| LAST NAME Bear | | FIRST NAM Kelsey | <u> </u> | | ONE # 83809969 | MESSAGE # 2083201003 | | CIAL SECURITY # 8-45-1186 | APPLIE 2014 | 4-06-11 PRII | NTED |
|--|--|--|--|-------------------|---|--|-----------------|---|--|---|--------|
| PHYSICAL ADDRESS P.O. Box 1188 | | | CITY Twin Falls | | S [| STATE D | COUNT | | 1P 3301 | | |
| Employment desired? | ? (indicate all applica | ble) | Indicate shifts you can v | work: | Indic | ate days you can work: | | Are you currently employed | d? [] y | res X no | |
| | [] Temp-to-Hire [] [] Part-Time [] | Permanent Seasonal Only | [] Day [] Swing | - | 0 | [] Summer Only [] Winter WE TH FR SA SU | , | Are you at least 18 years o | ld? 💢 y | | |
| Hourly Salary Require | ements: \$13.50 o | r more | [] Notating | 2 11001 | | [] [] [] [] | | TYPE OF WORK APPLYING [] Clerical / Office | G FOR: | | |
| Minimum Acceptable: | 7 | | | | | | | [] Professional / Te | | | |
| Smoker? [] yes | s 💢 no | | | | | | | [] Foodservice / He | | | |
| Are you authorized to | o work in the United S | States? 💢 y | es [] no | | | | | [] Sales / Managem | ent | | |
| Do you have proof of | f your authorization w | vith you today? 💢 y | es [] no | | | | - | Do you have your OWN tran | enortation | for work? [1 yes | [] no |
| Have you EVER been If yes, please explain | | eanor or felony crin | e(s)? A prior conviction | is not neces | sarily a bar to employn | nent. [] yes 💢 no | | If no, what form of transpor | tation will y | you use? | []110 |
| | | | | | | | | Do you have a valid driver's I | icense? [|] yes X] no | |
| How did you hear abo | out Porconnol Pluc? | | | | | | | State: | Class: _ | | |
| Have you ever worke | | rvice before? [1 | yes [] no | | | | 1 | Number: | Expir. | Date: | |
| If yes, what service (| | . 1.00 20.0.0. | yes []e | | | | | Auto Liability Insurance: [] y | es X] no | | |
| Which companies did | I the service send you | ı to? | | | | | | If yes, what company: | | | |
| | | | | | | | | How far are you willing to cor | nmute? N | | |
| | | | | | | | | | | | |
| | | | | APPROPRI <i>F</i> | TE BOX & LIST NUMI | BER OF YEARS EXPERIENCE | | | | | |
| CENERAL LABOR | | NVENTORY—LABO | R / INDUSTRIAL | | | SKILLS | | RY—CLERICAL / PROFES | | AAAA OMFNT | VDC |
| GENERAL LABOR | YRS. INDUSTR | RIAL YRS | PLASTIC/INJECTIO | N YRS | CLERICAL | SKILLS YRS. BOOKKEEPING | INVENTO YRS. | TECHNICAL | YRS. N | MANAGMENT 1 Accounting | YRS. |
| [] Landscaping [] Delivery | | RIAL YRS abor-light | PLASTIC/INJECTIO [] Assembly/Packagii [] Machine Operator | N YRS | | SKILLS | | | YRS. N | IANAGMENT] Accounting] Construction | YRS. |
| [] Landscaping [] Delivery [] Janitorial | YRS. INDUSTR [] Gen. L [] Gen. L [] Gen. L | RIAL YRS abor-light abor-Med. abor-Heavy | PLASTIC/INJECTIO [] Assembly/Packagii [] Machine Operator [] Injection | N YRS | CLERICAL [] Receptionist [] Switchboard #lines [] Clerical | SKILLS YRS. BOOKKEEPING Accts. Receivable Accts Payable Payroll Payroll | YRS. | TECHNI CAL [] Computer Tech. [] Copier Tech [] Telecom Tech | YRS. M [[|] Accounting] Construction] Production | |
| [] Landscaping [] Delivery [] Janitorial [] Warehouse | YRS. INDUSTR [] Gen. L [] Gen. L [] Gen. L [] Machir | RIAL YRS abor-light abor-Med. abor-Heavy e Operator | PLASTIC/INJECTIO [] Assembly/Packagii [] Machine Operator [] Injection [] Molding | N YRS | CLERICAL [] Receptionist [] Switchboard #lines [] Clerical [] Telephone #lines | SKILLS YRS. BOOKKEEPING Accts. Receivable Accts Payable Payroll Bank Reconciliation Bank Reconciliation Accts Payable Bank Reconciliation Bank Reconciliation | YRS. | TECHNICAL [] Computer Tech. [] Copier Tech [] Telecom Tech [] Electronics Tech | YRS. W [[|] Accounting] Construction] Production] Shift Supervisor | |
| [] Landscaping [] Delivery [] Janitorial | YRS. INDUSTR [] Gen. L [] Gen. L [] Gen. L | RIAL YRS abor-light abor-Med. abor-Heavy e Operator c Operator | PLASTIC/INJECTIO [] Assembly/Packagii [] Machine Operator [] Injection | N YRS | CLERICAL [] Receptionist [] Switchboard #lines [] Clerical | SKILLS YRS. BOOKKEEPING Accts. Receivable Accts Payable Payroll Payroll | YRS. | TECHNI CAL [] Computer Tech. [] Copier Tech [] Telecom Tech | YRS. M [[[|] Accounting] Construction] Production | |
| [] Landscaping [] Delivery [] Janitorial [] Warehouse [] Inventory [] Security [] Shipping/Receiving | YRS. INDUSTR | RIAL YRS abor-light abor-Med. abor-Heavy ae Operator c Operator gling cing | PLASTIC/INJECTIO [] Assembly/Packagii [] Machine Operator [] Injection [] Molding [] Maintenance [] Customer Service [] Quality Assurance | on YRS ng | CLERICAL [] Receptionist [] Switchboard #lines [] Clerical [] Telephone #lines [] Word processing [] Dictation [] Speed Writing | YRS. BOOKKEEPING [] Accts. Receivable [] Accts Payable [] Payroll [] Bank Reconciliation [] Posting [] Trial Balance [] Financial Stmnt Pr | YRS | TECHNI CAL [] Computer Tech. [] Copier Tech [] Telecom Tech [] Electronics Tech [] CAD Drafting [] Engineer [] Type: | YRS. |] Accounting] Construction] Production] Shift Supervisor] Food Processing] Office] Transportation | |
| [] Landscaping [] Delivery [] Janitorial [] Warehouse [] Inventory [] Security [] Shipping/Receiving [] Cleanup | YRS. INDUSTR | RIAL YRS abor-light abor-Med. abor-Heavy ae Operator c Operator gling cing | PLASTIC/INJECTIO [] Assembly/Packagir [] Machine Operator [] Injection [] Molding [] Maintenance [] Customer Service [] Quality Assurance [] Prep Room | on YRS ng | CLERICAL [] Receptionist [] Switchboard #lines [] Clerical [] Telephone #lines [] Word processing [] Dictation [] Speed Writing [] Typing word/min | YRS. BOOKKEEPING [] Accts. Receivable [] Accts Payable [] Payroll [] Bank Reconciliation [] Posting [] Trial Balance [] Financial Stmnt Prince [] Month End Close | YRS | TECHNI CAL [] Computer Tech. [] Copier Tech [] Telecom Tech [] Electronics Tech [] CAD Drafting [] Engineer [] Type: [] Certificate: | YRS. M [|] Accounting] Construction] Production] Shift Supervisor] Food Processing] Office] Transportation] Customer Service | |
| [] Landscaping [] Delivery [] Janitorial [] Warehouse [] Inventory [] Security [] Shipping/Receiving | YRS. INDUSTR | abor-Heavy te Operator tiping tion tion abor-Med. abor-Heavy te Operator tiping tion abor-Med. abor-Heavy te Operator tiping tion | PLASTIC/INJECTIO [] Assembly/Packagir [] Machine Operator [] Injection [] Molding [] Maintenance [] Customer Service [] Quality Assurance [] Prep Room [] Glue Room | on YRS ng | CLERICAL [] Receptionist [] Switchboard #lines [] Clerical [] Telephone #lines [] Word processing [] Dictation [] Speed Writing [] Typing word/min [] Statistical Typing w/n | YRS. BOOKKEEPING [] Accts. Receivable [] Accts Payable [] Payroll [] Bank Reconciliation [] Posting [] Trial Balance [] Financial Stmnt Property of the prope | YRS | TECHNI CAL [] Computer Tech. [] Copier Tech [] Telecom Tech [] Electronics Tech [] CAD Drafting [] Engineer [] Type: [] Certificate: [] Telecommunications | YRS. N |] Accounting] Construction] Production] Shift Supervisor] Food Processing] Office] Transportation] Customer Service] Warehouse | |
| [] Landscaping [] Delivery [] Janitorial [] Warehouse [] Inventory [] Security [] Shipping/Receiving [] Cleanup [] Farm [] Field [] Dairy [] Sprinkler | YRS. INDUSTR | AlaL YRS Abor-light Abor-Med. Abor-Heavy Be Operator Coperator Jing Ling Ling Ling Assurance | PLASTIC/INJECTIO [] Assembly/Packagir [] Machine Operator [] Injection [] Molding [] Maintenance [] Customer Service [] Quality Assurance [] Prep Room | on YRS ng | CLERICAL [] Receptionist [] Switchboard #lines [] Clerical [] Telephone #lines [] Word processing [] Dictation [] Speed Writing [] Typing word/min | YRS. BOOKKEEPING [] Accts. Receivable [] Accts Payable [] Payroll [] Bank Reconciliation [] Posting [] Trial Balance [] Financial Stmnt Prince [] Month End Close | YRS | TECHNI CAL [] Computer Tech. [] Copier Tech [] Telecom Tech [] Electronics Tech [] CAD Drafting [] Engineer [] Type: [] Certificate: | YRS. N |] Accounting] Construction] Production] Shift Supervisor] Food Processing] Office] Transportation] Customer Service | |
| [] Landscaping [] Delivery [] Janitorial [] Warehouse [] Inventory [] Security [] Shipping/Receiving [] Cleanup [] Farm [] Field [] Dairy [] Sprinkler [] Floral | YRS. INDUSTR | RIAL YRS abor-light abor-Med. abor-Heavy ae Operator if Operator iting tion // Assurance nance abor-Med. // Assurance nance abor-Med. // Assurance | PLASTIC/INJECTIO [] Assembly/Packagii [] Machine Operator [] Injection [] Molding [] Maintenance [] Customer Service [] Quality Assurance [] Prep Room [] Glue Room [] Other: FOODSERVICE [] Waitress | yrs yrs | CLERICAL [] Receptionist [] Switchboard #lines [] Clerical [] Telephone #lines [] Word processing [] Dictation [] Speed Writing [] Typing word/min [] Statistical Typing w/r [] Legal office [] Medical office [] Cashier | YRS. BOOKKEEPING [] Accts. Receivable [] Accts Payable [] Payroll [] Bank Reconciliation [] Posting [] Trial Balance [] Financial Stmnt Property [] Month End Close [] Accounting [] Tax [] Light [] Full Charge | YRS | TECHNICAL [] Computer Tech. [] Copier Tech [] Telecom Tech [] Electronics Tech [] CAD Drafting [] Engineer [] Type: [] Certificate: [] Telecommunications [] Computer Network SOFTWARE USED (list): [] | YRS. |] Accounting] Construction] Production] Shift Supervisor] Food Processing] Office] Transportation] Customer Service] Warehouse] Education] Call Center] Food Service | |
| [] Landscaping [] Delivery [] Janitorial [] Warehouse [] Inventory [] Security [] Shipping/Receiving [] Cleanup [] Farm [] Field [] Dairy [] Sprinkler | YRS. INDUSTR | RIAL YRS abor-light abor-Med. abor-Heavy ae Operator ing comparition / Assurance nance cal abor-Med. | PLASTIC/INJECTIO [] Assembly/Packagii [] Machine Operator [] Injection [] Molding [] Maintenance [] Customer Service [] Quality Assurance [] Prep Room [] Glue Room [] Other: FOODSERVICE [] Waitress [] Line cook | yrs yrs | CLERICAL [] Receptionist [] Switchboard #lines [] Clerical [] Telephone #lines [] Word processing [] Dictation [] Speed Writing [] Typing word/min [] Statistical Typing w/n [] Legal office [] Medical office [] Cashier [] 10-Key | YRS. BOOKKEEPING [] Accts. Receivable [] Accts Payable [] Payroll [] Bank Reconciliation [] Posting [] Trial Balance [] Financial Stmnt Pr [] Month End Close n [] Accounting [] Tax [] Light [] Full Charge SOFTWARE USED: | YRS | TECHNICAL [] Computer Tech. [] Copier Tech [] Telecom Tech [] Electronics Tech [] CAD Drafting [] Engineer [] Type: [] Certificate: [] Telecommunications [] Computer Network SOFTWARE USED (list): [] | YRS. |] Accounting] Construction] Production] Shift Supervisor] Food Processing] Office] Transportation] Customer Service] Warehouse] Education] Call Center] Food Service] CPA | , |
| [] Landscaping [] Delivery [] Janitorial [] Warehouse [] Inventory [] Security [] Shipping/Receiving [] Cleanup [] Farm [] Field [] Dairy [] Sprinkler [] Floral [] Yards & Grounds | YRS. INDUSTR | RIAL YRS abor-light abor-Med. abor-Heavy e Operator ing cling tion / Assurance nance cal nics ulics | PLASTIC/INJECTIO [] Assembly/Packagii [] Machine Operator [] Injection [] Molding [] Maintenance [] Customer Service [] Quality Assurance [] Prep Room [] Glue Room [] Other: FOODSERVICE [] Waitress [] Line cook [] Chef | yrs yrs | CLERICAL [] Receptionist [] Switchboard #lines [] Clerical [] Telephone #lines [] Word processing [] Dictation [] Speed Writing [] Typing word/min [] Statistical Typing w/n [] Legal office [] Medical office [] Cashier [] 10-Key [] Teller | YRS. BOOKKEEPING Accts. Receivable Accts Payable Payroll Sank Reconciliation Posting Trial Balance Financial Stmnt Properties Accounting Accounting Accounting Tax Light Financial Software Jeul Charge Accounting Ac | YRS | TECHNICAL [] Computer Tech. [] Copier Tech [] Telecom Tech [] Electronics Tech [] CAD Drafting [] Engineer [] Type: [] Certificate: [] Telecommunications [] Computer Network SOFTWARE USED (list): [] [] | YRS. |] Accounting] Construction] Production] Shift Supervisor] Food Processing] Office] Transportation] Customer Service] Warehouse] Education] Call Center] Food Service] CPA] Human Resources | , |
| [] Landscaping [] Delivery [] Janitorial [] Warehouse [] Inventory [] Security [] Shipping/Receiving [] Cleanup [] Farm [] Field [] Dairy [] Sprinkler [] Floral [] Yards & Grounds [] Housekeeping CONSTRUCTION [] General Labor | YRS. INDUSTR | Assurance nance cal | PLASTIC/INJECTIO [] Assembly/Packagii [] Machine Operator [] Injection [] Molding [] Maintenance [] Customer Service [] Quality Assurance [] Prep Room [] Glue Room [] Other: FOODSERVICE [] Waitress [] Line cook | yrs yrs | CLERICAL [] Receptionist [] Switchboard #lines [] Clerical [] Telephone #lines [] Word processing [] Dictation [] Speed Writing [] Typing word/min [] Statistical Typing w/n [] Legal office [] Medical office [] Cashier [] 10-Key | YRS. BOOKKEEPING [] Accts. Receivable [] Accts Payable [] Payroll [] Bank Reconciliation [] Posting [] Trial Balance [] Financial Stmnt Pr [] Month End Close [] Accounting [] Tax [] Light [] Full Charge SOFTWARE USED: [] Quicken [] Peachtree | YRS | TECHNICAL [] Computer Tech. [] Copier Tech [] Telecom Tech [] Electronics Tech [] CAD Drafting [] Engineer [] Type: [] Certificate: [] Telecommunications [] Computer Network SOFTWARE USED (list): [] [] [] [] [] [] [] [] [] [] [] [] [] | YRS. |] Accounting] Construction] Production] Shift Supervisor] Food Processing] Office] Transportation] Customer Service] Warehouse] Education] Call Center] Food Service] CPA | |
| [] Landscaping [] Delivery [] Janitorial [] Warehouse [] Inventory [] Security [] Shipping/Receiving [] Cleanup [] Farm [] Field [] Dairy [] Sprinkler [] Floral [] Yards & Grounds [] Housekeeping CONSTRUCTION [] General Labor [] Concrete Rough | YRS. INDUSTE | RIAL YRS abor-light abor-Med. abor-Heavy ee Operator gling tion Assurance nance cal nics ullics ng/Receiving ocessing LABOR | PLASTIC/INJECTIO [] Assembly/Packagii [] Machine Operator [] Injection [] Molding [] Maintenance [] Customer Service [] Quality Assurance [] Prep Room [] Glue Room [] Other: FOODSERVICE [] Waitress [] Line cook [] Chef [] Deli [] Dishwasher [] Hostess | yrs yrs | CLERICAL [] Receptionist [] Switchboard #lines [] Clerical [] Telephone #lines [] Word processing [] Dictation [] Speed Writing [] Typing word/min [] Statistical Typing w/r [] Legal office [] Medical office [] Cashier [] 10-Key [] Teller [] Data entry [] Mortgage [] Filing | YRS. BOOKKEEPING Accts. Receivable Accts Payable Payroll Accts Payable Accts Paya | YRS | TECHNICAL [] Computer Tech. [] Copier Tech [] Telecom Tech [] Electronics Tech [] Engineer [] Type: [] Certificate: [] Telecommunications [] Computer Network SOFTWARE USED (list): [] [] [] [] SALES [] Management [] Outside Sales | YRS. |] Accounting] Construction] Production] Production] Shift Supervisor] Food Processing] Office] Transportation] Customer Service] Warehouse] Education] Call Center] Food Service] CPA] Human Resources] Purchasing] Public Relations] Information Syste | |
| [] Landscaping [] Delivery [] Janitorial [] Warehouse [] Inventory [] Security [] Shipping/Receiving [] Cleanup [] Farm [] Field [] Dairy [] Sprinkler [] Floral [] Yards & Grounds [] Housekeeping CONSTRUCTION [] General Labor | YRS. INDUSTE | RIAL YRS abor-light abor-Med. abor-Heavy ae Operator ing ting ting ting ting ting ting ting | PLASTIC/INJECTIO [] Assembly/Packagii [] Machine Operator [] Injection [] Molding [] Maintenance [] Customer Service [] Quality Assurance [] Prep Room [] Glue Room [] Other: FOODSERVICE [] Waitress [] Line cook [] Chef [] Deli [] Dishwasher [] Hostess [] Supervisor | yrs yrs | CLERICAL [] Receptionist [] Switchboard #lines [] Clerical [] Telephone #lines [] Word processing [] Dictation [] Speed Writing [] Typing word/min [] Statistical Typing w/r [] Legal office [] Medical office [] Cashier [] 10-Key [] Teller [] Data entry [] Mortgage [] Filling [] Fax/Copier | YRS. BOOKKEPING Accts. Receivable Accts Payable Payroll Bank Reconciliation Posting Trial Balance Financial Stmnt Properties Accounting Accounting Accounting Trial Payroll Bank Reconciliation Posting Trial Balance Financial Stmnt Properties Financial Stmnt Properties Accounting Financial Stmnt Properties Financial Stmnt Properties Accounting Financial Stmnt Properties Accounting Financial Stmnt Properties Financial Stmnt Properties Financial Stmnt Properties Accts Payroll Balance Payroll Balance Financial Stmnt Properties Financial Stmnt Properties Accts Payroll Balance Payroll Balance Financial Stmnt Properties Financial Stmnt Properties Accts Payroll Balance Financial Stmnt Properties Financial Stmnt Properties Accts Payroll Accts Pa | YRS | TECHNICAL [] Computer Tech. [] Copier Tech [] Telecom Tech [] Electronics Tech [] Engineer [] Type: [] Certificate: [] Telecommunications [] Computer Network SOFTWARE USED (list): [] [] [] [] SALES [] Management [] Outside Sales [] Retail Sales | YRS. M |] Accounting] Construction] Production] Shift Supervisor] Food Processing] Office] Transportation] Customer Service] Warehouse] Education] Call Center] Food Service] CPA] Human Resources] Purchasing] Public Relations] Information Syste] Sales | |
| [] Landscaping [] Delivery [] Janitorial [] Warehouse [] Inventory [] Security [] Shipping/Receiving [] Cleanup [] Farm [] Field [] Dairy [] Sprinkler [] Floral [] Yards & Grounds [] Housekeeping CONSTRUCTION [] General Labor [] Concrete Rough [] Concrete Finish [] Carpenter Rough [] Carpenter Fough | YRS. INDUSTR | Assurance nance allics all allics allics allics all allics allics allics allics allics allics allics allics allics | PLASTIC/INJECTIO [] Assembly/Packagii [] Machine Operator [] Injection [] Molding [] Maintenance [] Customer Service [] Quality Assurance [] Prep Room [] Glue Room [] Other: FOODSERVICE [] Waitress [] Line cook [] Chef [] Deli [] Dishwasher [] Hostess [] Supervisor [] Banquet | yrs yrs | CLERICAL [] Receptionist [] Switchboard #lines [] Clerical [] Telephone #lines [] Word processing [] Dictation [] Speed Writing [] Typing word/min [] Statistical Typing w/n [] Legal office [] Medical office [] Cashier [] 10-Key [] Teller [] Data entry [] Mortgage [] Filling [] Fax/Copier [] Medical Term. | YRS. BOOKKEPING Accts. Receivable Accts Payable Payroll Sank Reconciliation Posting Trial Balance Financial Stmnt Properties Accounting Accounting Accounting Tax Light Full Charge Golden Peachtree Outcome Outcome Outcome Healthcare Other Healthcare Other Consider Other Healthcare Other Consider Other Consider | YRS | TECHNICAL [] Computer Tech. [] Copier Tech [] Telecom Tech [] Electronics Tech [] Engineer [] Type: [] Certificate: [] Telecommunications [] Computer Network SOFTWARE USED (list): [] [] [] [] [] [] [] [] [] [] [] [] [] | YRS. |] Accounting] Construction] Production] Shift Supervisor] Food Processing] Office] Transportation] Customer Service] Warehouse] Education] Call Center] Food Service] CPA] Human Resources] Purchasing] Public Relations] Information Syste] Sales] Technical | s |
| [] Landscaping [] Delivery [] Janitorial [] Warehouse [] Inventory [] Security [] Shipping/Receiving [] Cleanup [] Farm [] Field [] Dairy [] Sprinkler [] Floral [] Yards & Grounds [] Housekeeping CONSTRUCTION [] General Labor [] Concrete Rough [] Concrete Finish [] Carpenter Rough [] Carpenter Finish [] Carpenter Finish [] Framing | YRS. INDUSTE | Assurance nance allics all allics allics allics all allics allics allics allics allics allics allics allics allics | PLASTIC/INJECTIO [] Assembly/Packagii [] Machine Operator [] Injection [] Molding [] Maintenance [] Customer Service [] Quality Assurance [] Prep Room [] Glue Room [] Other: FOODSERVICE [] Waitress [] Line cook [] Chef [] Deli [] Dishwasher [] Hostess [] Supervisor | yrs yrs | CLERICAL [] Receptionist [] Switchboard #lines [] Clerical [] Telephone #lines [] Word processing [] Dictation [] Speed Writing [] Typing word/min [] Statistical Typing w/r [] Legal office [] Medical office [] Cashier [] 10-Key [] Teller [] Data entry [] Mortgage [] Filling [] Fax/Copier | YRS. BOOKKEPING Accts. Receivable Accts Payable Payroll | YRS | TECHNICAL [] Computer Tech. [] Copier Tech [] Telecom Tech [] Electronics Tech [] Engineer [] Type: [] Certificate: [] Telecommunications [] Computer Network SOFTWARE USED (list): [] [] [] [] [] [] [] [] [] [] [] [] [] | YRS. M |] Accounting] Construction] Production] Shift Supervisor] Food Processing] Office] Transportation] Customer Service] Warehouse] Education] Call Center] Food Service] CPA] Human Resources] Purchasing] Public Relations] Information Syste] Sales | s |
| [] Landscaping [] Delivery [] Janitorial [] Warehouse [] Inventory [] Security [] Shipping/Receiving [] Cleanup [] Farm [] Field [] Dairy [] Sprinkler [] Floral [] Yards & Grounds [] Housekeeping CONSTRUCTION [] General Labor [] Concrete Rough [] Concrete Finish [] Carpenter Rough [] Carpenter Fough | YRS. INDUSTE | Assurance mance cal mics ullics mg/Receiving coessing LABOR er Mechanic length abor-Med. | PLASTIC/INJECTIO [] Assembly/Packagii [] Machine Operator [] Injection [] Molding [] Maintenance [] Customer Service [] Quality Assurance [] Prep Room [] Glue Room [] Other: FOODSERVICE [] Waitress [] Line cook [] Chef [] Deli [] Dishwasher [] Hostess [] Supervisor [] Banquet [] Sanitation [] Warehouse DRIVING | yrs yrs | CLERICAL [] Receptionist [] Switchboard #lines [] Clerical [] Telephone #lines [] Word processing [] Dictation [] Speed Writing [] Typing word/min [] Statistical Typing w/r [] Legal office [] Medical office [] Cashier [] 10-Key [] Teller [] Data entry [] Mortgage [] Filing [] Fax/Copier [] Medical Term. [] Credit/Collection [] Customer Service [] Title/Escrow | YRS. BOOKKEPING Accts. Receivable Accts Payable Payroll | YRS | TECHNICAL [] Computer Tech. [] Copier Tech [] Telecom Tech [] Electronics Tech [] Engineer [] Type: [] Certificate: [] Telecommunications [] Computer Network SOFTWARE USED (list): [] [] [] [] SALES [] Management [] Outside Sales [] Retail Sales [] Reute Sales [] Telemarketing [] Marketing [] Product Demo | YRS. M |] Accounting] Construction] Production] Production] Shift Supervisor] Food Processing] Office] Transportation] Customer Service] Warehouse] Education] Call Center] Food Service] CPA] Human Resources] Purchasing] Public Relations] Information Syste] Sales] Technical] Quality Assurance] Construction] Farm | s |
| [] Landscaping [] Delivery [] Janitorial [] Warehouse [] Inventory [] Security [] Shipping/Receiving [] Cleanup [] Farm [] Field [] Dairy [] Sprinkler [] Floral [] Yards & Grounds [] Housekeeping CONSTRUCTION [] General Labor [] Concrete Rough [] Concrete Finish [] Carpenter Rough [] Carpenter Finish [] Framing [] Read Blueprints [] Roofing [] Painting | YRS. INDUSTE | Assurance cal consists Mechanic lechanic Engine Mech. | PLASTIC/INJECTIO [] Assembly/Packagin [] Machine Operator [] Injection [] Molding [] Maintenance [] Customer Service [] Quality Assurance [] Prep Room [] Glue Room [] Other: FOODSERVICE [] Waitress [] Line cook [] Chef [] Deli [] Dishwasher [] Hostess [] Supervisor [] Banquet [] Sanitation [] Warehouse DRIVING [] Class A CDL | yrs yrs | CLERICAL [] Receptionist [] Switchboard #lines [] Clerical [] Telephone #lines [] Word processing [] Dictation [] Speed Writing [] Typing word/min [] Statistical Typing w/r [] Legal office [] Medical office [] Cashier [] 10-Key [] Teller [] Data entry [] Mortgage [] Filing [] Fax/Copier [] Medical Term. [] Credit/Collection [] Customer Service [] Title/Escrow SOFTWARE USED: | YRS. BOOKKEPING Accts. Receivable Accts Payable Payroll Payroll | YRS | TECHNICAL [] Computer Tech. [] Copier Tech [] Telecom Tech [] Electronics Tech [] Engineer [] Type: [] Certificate: [] Telecommunications [] Computer Network SOFTWARE USED (list): [] [] [] [] [] [] [] [] [] [] [] [] [] | YRS. N |] Accounting] Construction] Production] Shift Supervisor] Food Processing] Office] Transportation] Customer Service] Warehouse [Education] Call Center] Food Service] CPA] Human Resources] Purchasing] Public Relations] Information Syste [Sales] Technical] Quality Assurance [Construction] Farm [Engineering | s |
| [] Landscaping [] Delivery [] Janitorial [] Warehouse [] Inventory [] Security [] Shipping/Receiving [] Cleanup [] Farm [] Field [] Dairy [] Sprinkler [] Floral [] Yards & Grounds [] Housekeeping CONSTRUCTION [] General Labor [] Concrete Rough [] Concrete Finish [] Carpenter Rough [] Carpenter Finish [] Framing [] Read Blueprints [] Roofing [] Painting [] Plumber | YRS. INDUSTE | RIAL YRS abor-light abor-Med. abor-Heavy ae Operator comperator ding ding ding ding ding ding ding ding | PLASTIC/INJECTIO [] Assembly/Packagii [] Machine Operator [] Injection [] Molding [] Maintenance [] Customer Service [] Quality Assurance [] Prep Room [] Glue Room [] Other: FOODSERVICE [] Waitress [] Line cook [] Chef [] Deli [] Dishwasher [] Hostess [] Supervisor [] Banquet [] Sanitation [] Warehouse DRIVING [] Class A CDL [] Class B CDL | yrs yrs | CLERICAL [] Receptionist [] Switchboard #lines [] Clerical [] Telephone #lines [] Word processing [] Dictation [] Speed Writing [] Typing word/min [] Statistical Typing w/r [] Legal office [] Medical office [] Medical office [] Cashier [] 10-Key [] Teller [] Data entry [] Mortgage [] Filing [] Fax/Copier [] Medical Term. [] Credit/Collection [] Customer Service [] Title/Escrow SOFTWARE USED: | YRS. BOOKKEPING Accts. Receivable Accts Payable Payroll Bank Reconciliation Posting Trial Balance Financial Stmnt Properties Accounting Trial Balance Posting Trial Balance Posting Trial Balance Posting | YRS | TECHNICAL [] Computer Tech. [] Copier Tech [] Telecom Tech [] Electronics Tech [] Engineer [] Type: [] Certificate: [] Telecommunications [] Computer Network SOFTWARE USED (list): [] [] [] [] SALES [] Management [] Outside Sales [] Retail Sales [] Reute Sales [] Telemarketing [] Marketing [] Product Demo | YRS. M |] Accounting] Construction] Production] Shift Supervisor] Food Processing] Office] Transportation] Customer Service] Warehouse] Education] Call Center] Food Service] CPA] Human Resources] Purchasing] Public Relations] Information Syste] Sales] Technical] Quality Assurance] Construction] Farm] Engineering] Other (list): | s |
| [] Landscaping [] Delivery [] Janitorial [] Warehouse [] Inventory [] Security [] Shipping/Receiving [] Cleanup [] Farm [] Field [] Dairy [] Sprinkler [] Floral [] Yards & Grounds [] Housekeeping CONSTRUCTION [] General Labor [] Concrete Rough [] Concrete Finish [] Carpenter Rough [] Carpenter Finish [] Framing [] Read Blueprints [] Roofing [] Painting [] Plumber [] Electrician | YRS. INDUSTE | Assurance nance and processing LABOR er Mechanic lechanic | PLASTIC/INJECTIO [] Assembly/Packagin [] Machine Operator [] Injection [] Molding [] Maintenance [] Customer Service [] Quality Assurance [] Prep Room [] Glue Room [] Other: FOODSERVICE [] Waitress [] Line cook [] Chef [] Deli [] Dishwasher [] Hostess [] Supervisor [] Banquet [] Sanitation [] Warehouse DRIVING [] Class A CDL | N YRS ng | CLERICAL [] Receptionist [] Switchboard #lines [] Clerical [] Telephone #lines [] Word processing [] Dictation [] Speed Writing [] Typing word/min [] Statistical Typing w/r [] Legal office [] Medical office [] Medical office [] Cashier [] 10-Key [] Teller [] Data entry [] Mortgage [] Filing [] Fax/Copier [] Medical Term. [] Credit/Collection [] Customer Service [] Title/Escrow SOFTWARE USED: [] Word | YRS. BOOKKEPING Accts. Receivable Accts Payable Payroll Payroll | YRS | TECHNICAL [] Computer Tech. [] Copier Tech [] Telecom Tech [] Electronics Tech [] Engineer [] Type: [] Certificate: [] Telecommunications [] Computer Network SOFTWARE USED (list): [] [] [] [] [] [] [] [] [] [] [] [] [] | YRS. M |] Accounting] Construction] Production] Shift Supervisor] Food Processing] Office] Transportation] Customer Service] Warehouse [Education] Call Center] Food Service] CPA] Human Resources] Purchasing] Public Relations] Information Syste [Sales] Technical] Quality Assurance [Construction] Farm [Engineering | s |
| [] Landscaping [] Delivery [] Janitorial [] Warehouse [] Inventory [] Security [] Shipping/Receiving [] Cleanup [] Farm [] Field [] Dairy [] Sprinkler [] Floral [] Yards & Grounds [] Housekeeping CONSTRUCTION [] General Labor [] Concrete Rough [] Concrete Finish [] Carpenter Rough [] Carpenter Finish [] Framing [] Read Blueprints [] Roofing [] Painting [] Plumber | YRS. INDUSTE | abor-light abor-Med. abor-Heavy ee Operator of Operator ging and the operator end of the operator end operato | PLASTIC/INJECTIO [] Assembly/Packagii [] Machine Operator [] Injection [] Molding [] Maintenance [] Customer Service [] Quality Assurance [] Prep Room [] Glue Room [] Other: FOODSERVICE [] Waitress [] Line cook [] Chef [] Deli [] Dishwasher [] Hostess [] Supervisor [] Banquet [] Sanitation [] Warehouse DRIVING [] Class A CDL [] Class B CDL [] Endorsements: | N YRS ng | CLERICAL [] Receptionist [] Switchboard #lines [] Clerical [] Telephone #lines [] Word processing [] Dictation [] Speed Writing [] Typing word/min [] Statistical Typing w/r [] Legal office [] Medical office [] Medical office [] Cashier [] 10-Key [] Teller [] Data entry [] Mortgage [] Filing [] Fax/Copier [] Medical Term. [] Credit/Collection [] Customer Service [] Title/Escrow SOFTWARE USED: | YRS. BOOKKEEPING Accts. Receivable Accts Payable Payroll Payroll Payroll Payroll Payroll Payroll Payroll Payroll | YRS | TECHNICAL [] Computer Tech. [] Copier Tech [] Telecom Tech [] Electronics Tech [] Engineer [] Type: [] Certificate: [] Telecommunications [] Computer Network SOFTWARE USED (list): [] [] [] [] [] [] [] [] [] [] [] [] [] | YRS. M |] Accounting] Construction] Production] Shift Supervisor] Food Processing] Office] Transportation] Customer Service] Warehouse] Education] Call Center] Food Service] CPA] Human Resources] Purchasing] Public Relations] Information Syste] Sales] Technical] Quality Assurance] Construction] Farm] Engineering] Other (list): | s |

| EMPLOY | MENT HIST | ORY (Begin with most r | ecent) (DO NOT V | WRITE IN SHADED AREAS) | | | | |
|---|---|---|---|--|--|---|--|---|
| Work Reco | ord | Employer | | Supervisor | City/State | Telephone | Duties | Pay Reason for leaving |
| From | То | | | | | | | |
| F | T. | | | | | | | |
| From | То | | | | | | | |
| From | То | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | INING SUMMARY: High al / Technical / Special | School Graduate Dates | [] Yes [] No GPA: Skills/Trade/License | Completed | Daniel (Cartificate | In case of emergency, notify: | |
| приот | oo / Vocation | iar / resimisar / opesiar | Dates | Skills, Hadd, Elschisc | Completed [] Yes [] No | Degree/Certificate | Name Karessa George | |
| | | | | | | | Address P.O. Box 1188 | Telephone (208) 320-100 |
| College . | Education / | Graduate School | Dates | Skills/Trade/License | Completed [] Yes [] No | Degree/Certificate | Doctor to Notify | Telephone |
| D | - I Di | - Farrel Oran attentity Far | | | | AGREEMENT | | |
| I unders vided so I affirm Plus to d assignm I unders checks, processe | tand that a lely by Per that the st conduct otherts. I un- tand that u and submi- es for the in | any employment with P sonnel Plus and not fror atements made on this ner background checks, derstand that any false upon successful submission to drug/alcohol tendividual assignments. | ersonnel Plus, Inc m the client compa application are tru which may includ- statement, omissication of this application sting as required be Successful complet | any to which I am assigned. ue and complete. I authorize Per le, but are not limited to: prior v on of facts or misrepresentation tion, Personnel Plus is extending | essful completion of job assignations are some Plus to investigate any work history, criminal history, of facts on these employment g a conditional offer of employing that actual job assignments are ded processes is not to be constituted. | y statement contain driver's license red t documents will be ment to me. This care offered based up trued as a final offe | ned in this application or in any employment decord, credit report, verification of licensure or egrounds for termination and recovery of potentional offer is based upon the completion coon my knowledge, experience, skills, abilities, | concomment I submit to Personnel Plus. I authorize Personnel education, etc. as may be necessary for placement on joi tital damages from me. of required employment documents, interview, background, availability for work, and the completion of the screening |
| Signatur | DN. ci | onically Signed by K n=Kelsey Bear,userr 2014-05-15 9:58:36 | name=k bear100 | 0 | | Date 20 | 014-06-11 | |
| | | | | INTERNAL AS | SSOCIATE USE ONLY | | | PERSONNEL |
| | | | | | | | | |
| | | | | | | | | YOUR TOTAL STAFFING SOLUTION PLUS |

PERSONNEL PLUS IS AN EQUAL OPPURTUNITY EMPLOYER.

PLUS 2 Rev 10/2010

EMPLOYMENTAPPLICATION



Welcome to Personnel Plus! This document is being furnished to you so you will understand what is expected as a Personnel Plus employee. Acceptance of this agreement is a condition of your employment. Your failure to comply with any of these policies may result in disciplinary action up to & including termination. If you have questions about these policies, please contact Personnel Plus.

- 1. Any person who is employed by Personnel Plus, is assigned to one of its client companies, & is paid for that assignment by Personnel Plus does so as an employee of Personnel Plus, & NOT of the client company. Unless otherwise defined by applicable law, any employment at any time with or without cause. This "at will" nature, which means that you may resign at any time & Personnel Plus may discharge you specifically acknowledged in writing by an authorized executive of Personnel Plus.
- Personnel Plus is an Equal Opportunity Employer. Personnel Plus does not discriminate on the basis of sex, race, age, marital status, religious affiliation, ethnic origin, or disability. Personnel Plus can make no guarantee as to the type or length of assignments or the number of hours you can expect to work.
- You must call the Personnel Plus office every day that you are available for work.
- Make sure, before accepting an assignment, that you can complete it. Once you've accepted, Personnel Plus expects you to report on time, every day of the assignment. Arrive early the first day so you can get settled before starting your shift. We expect you to report for work dressed appropriately, with good hygiene, & that you will be courteous & enthusiastic with our client. You are required to comply with all client rules. If you are asked to perform duties that were not included as part of your job description, contact Personnel Plus. Don not leave your number with the client. Tell them that you can be contacted through the Personnel Plus office.
- As an employee, you may decline assignments without jeopardizing future employment with Personnel Plus. However, if you fail to accept a suitable work assignment or accept other work without first contacting Personnel Plus, you will be considered to have voluntarily quit. If you leave an assignment without good cause, or do not complete a work assignment for personal reasons, you will be considered to have voluntarily quit.
- If at any time you have problems or concerns on a work assignment, contact Personnel Plus immediately. If the client company to which you are assigned has questions about Personnel Plus, please refer them to our office. Do not answer policy questions yourself.
- If the event of an emergency or illness, or if any reason you are not able to report to work on time & for your full shift, you must notify Personnel Plus before the start of your shift. Failure to do so may result in termination with no further warning.
- As a condition of your employment by Personnel Plus it is your obligation to perform all work in an acceptable manner & in accordance with both Personnel Plus & client company instructions, guidelines, & policies. If you walk off the job and/or quit your assignment without giving us one week's notice, then your final unpaid wages will be reduced to the state minimum hourly rate.
- You should notify Personnel Plus immediately if there are any changes to your contact information, including phone numbers, address, etc. or if there are changes in your ability or availability to work, or if you become unable to complete an assignment.
- 10. Upon the end of any assignment, you must call the Personnel Plus office between 8 am-5pm on the next business day following the end of the assignment, speak with a Personnel Plus representative, & report your availability for work. Failure to do so will be considered misconduct, & may result in your termination from Personnel Plus with no further warning.
- 11. All employees must respect the confidentiality of the client's business. You must sign a confidentiality &/or secrecy agreement if requested. Any breach of Personnel Plus or a client's confidentiality will be grounds for termination with no further warning. You may also be required to sign other client-specific policy statements, depending on the assignment, & are required to comply with their terms.
- 12. All employees are required to submit to drug &/or alcohol testing as a condition of employment. Failing or refusing a drug or alcohol test, or other violation of the Personnel Plus Drug Testing Policy, may result in termination with no further warning.
- 13. You must comply with the Personnel Plus Safety Policy Statement (including on-the-job accident procedures & wearing & using safety equipment as instructed) & with all jobsite, client, & OSHA safety requirements. If you are unfamiliar with these requirements, ask your jobsite supervisor or Personnel Plus. Failure to comply with safety rules will be grounds for termination with no further warning.
- 14. You may also be terminated for misconduct, with no further warning, for reason including, but not limited to; provoking, instigating or participation in a fight; refusal to perform assigned job duties; abusive, threatening or detrimental language or behavior, unauthorized possession, use, or removal of Personnel Plus or client company property or carelessness with that property; sleeping on the job; dishonesty (including giving false or misleading information in your application, interview, or on timesheets); sexual harassment (in accordance with the Personnel Plus Sexual Harassment Policy); insubordination; repeated &/or excessive tardiness or absenteeism; reporting to work under the influence of drugs or alcohol, of in the possession of drugs, alcohol, or weapons, violation of other Personnel Plus policies; violation of client company policies; or violation of a written warning.
- 15. It is your responsibility to ensure that your timesheet is filled out completely & correctly & is signed by an authorized representative of the client company to which you were assigned. Failure to do may result in a delay in the processing your timesheet until which time you make the necessary corrections & /or obtain the client's signature. The timesheet will then be submitted with the payroll currently being processed. You must deliver your properly completed timesheet to Personnel Plus no later than 5:00 pm on Monday following the end of the pay period. If your timesheet is turned in late, it will result in the delay of your paycheck by at least one week. Some client companies will report your hours to Personnel Plus via fax; however it is still your responsibility to make sure Personnel Pus received your hours by the 5:00 pm deadline.
- 16. No paycheck will be released to anyone other than the employee without a signed, dated note from the employee authorizing another party to pick up the employee's check. The party picking up your check must have their picture ID with them. As an employee, you agree to accept your paycheck on the regularly scheduled payday regardless of when your assignment ends. To obtain a replacement check for one that has been lost or stolen, you must contact Personnel Plus & complete an affidavit for its replacement. 14-30 days may be required to replace the check. Details can be obtained at the Personnel Plus office. Payroll debit cards & direct deposit are also available.
- 17. This document serves as a written warning for any terminable offense outline above & for violation of company code of conduct.



EXHIBIT A: AGREEMENT AND WAIVER

In consideration of my assignment to PERSONNEL PLUS CLIENT COMPANIES by PERSONNEL PLUS, INC., I agree that I am solely an employee of PERSONNEL PLUS, INC. for benefits plan purposes and that I am eligible only for such benefits as PERSONNEL PLUS, INC. may offer to its employees. I further understand and agree that I am not eligible for or entitled to participate in any benefit plan offered by PERSONNEL PLUS CLIENT COMPANIES, its parents, affiliates, subsidiaries, or successors to any of its direct employees, regardless of the length of my assignment to PERSONNEL PLUS CLIENT COMPANIES by PERSONNEL PLUS, INC. and regardless of whether I am held to be a common-law employee of PERSONNEL PLUS CLIENT COMPANIES for any purpose, and therefore, with full knowledge and understanding, I hereby expressly waive any claim or right that I may have, now or in the future, to such benefits and agree not to make any claim for such benefits.

EXHIBIT B: ASSIGNED EMPLOYEE CONFIDENTIALITY AGREEMENT

As a condition of my assignment by PERSONNEL PLUS, INC. to PERSONNEL PLUS CLIENT COMPANIES, I hereby acknowledge and agree as follows: I will not use, disclose, or in any way reveal or disseminate to unauthorized parties any information I gain through contact with materials or documents that are made available through my assignment at PERSONNEL PLUS CLIENT COMPANIES or that I learn about during such assignment.

I will not disclose or in any way reveal or disseminate any information pertaining to PERSONNEL PLUS CLIENT COMPANIES or its operating methods and procedures that come to my attention as a result of this assignment. Under no circumstances shall I remove copies or documents from the premises of PERSONNEL PLUS CLIENT COMPANIES I understand that I shall be responsible for any direct or consequential damages resulting from any violation of this agreement. The obligations of this Agreement shall survive my employment by PERSONNEL PLUS, INC.

EXHIBIT C: ASSIGNMENT OF COPYRIGHTS AND PATENTS

In connection with my assignment to provide services to PERSONNEL PLUS CLIENT COMPANIES, I agree that any and all discoveries and/or inventions (which shall include improvements—and modifications) relating to work I perform while providing services to PERSONNEL PLUS CLIENT—COMPANIES, or relating to matters disclosed to me by PERSONNEL PLUS CLIENT COMPANIES in connection with work to be performed, or suggested by such matters, whether or not patentable, which discoveries and/or inventions are made or conceived by me, solely or jointly with others, during the term of my assignment (regardless of whether conceived or developed during work hours) or during a period of one

(1) year thereafter, shall be the property of PERSONNEL PLUS CLIENT COMPANIES as "work made for hire" to the extent provided by sections 101 and 201(b) of the Copyright Act, 17 U.S.C. 101 *et seq.*, and such discoveries and/or inventions shall be promptly disclosed to PERSONNEL PLUS CLIENT COMPANIES. PERSONNEL PLUS CLIENT COMPANIES shall have the right to file and prosecute, at its own expense, all patent applications, whether U.S. or foreign on said discoveries and/or inventions. I shall, during any assignment to PERSONNEL PLUS CLIENT COMPANIES or at any time thereafter, provide to PERSONNEL PLUS CLIENT COMPANIES all documents, information, and assistance requested for the filing or prosecution of any such patent application, for the preparation, prosecution, or defense of any legal action or application pertaining to such discoveries and/or inventions and for the assignment or conveyance to PERSONNEL PLUS CLIENT COMPANIES of all right, title, and interest in and to such discoveries and/or inventions, patent applications, and letters patent issuing thereon.

<u>I certify by my signature below that I have reviewed the agreements above, understand the policies and I willing to comply with each policy set forth herein.</u>

| Kelsey Bear | Electronically Signed by Kelsey Bear DN: cn=Kelsey Bear,username=k.bear100 Date: 2014-05-15 9:58:36 AM | 2014-06-11 |
|------------------|--|------------|
| Employee (Print) | Employee Signature | Date |



Below is a summary of current legislation in Idaho affecting unemployment:

A benefit claimant:

- 1. Who has been assigned to work for one or more customers of a staffing service and,
- 2. Who at the time of hire by the staffing service, signed a written notice informing him/her that completion or termination of an assignment for a customer would not, of itself, terminate the employment relationship with the staffing service, will not be considered unemployed upon completion or termination of an assignment until such time that he/she contacts the staffing service to determine if further suitable work is available. If the claimant:
 - a. Contacts the staffing service and refuses a suitable work assignment that they offer him/her at that time, he/she will be considered to have voluntarily quit that employment; or
 - b. Contacts the staffing service and they do not have a suitable work assignment for him/her, he/she will be considered unemployed due to lack of work; or
 - c. Accepts new employment without first contacting the staffing service for additional work, he/she will be considered to have voluntarily quit the employment with the staffing service.
 - d. The term "staffing service" means any person who assigns individuals to work for its customers, and includes but is not limited to professional employers as defined in chapter 24, title 44, Idaho Code, and the employers of temporary employees as defined in section 44-2403(7) of Idaho Code.

| EMPLOYEE (PRINT) | EMPLOYEE SIGNATURE | DATE | |
|------------------|--|------------|--|
| Kelsey Bear | DN: cn=Kelsey Bear,username=k.bear100 Date: 2014-05-15 9:58:36 AM | 2014-06-11 | |

Below is a summary of Personnel Plus Policies & Procedures regarding unemployment:

- 1 Any person paid for a work assignment by Personnel Plus is an employee of Personnel Plus & not of the client company.
- 2 Any employee who refuses suitable work or accepts other work without first contacting Personnel Plus following the end of an assignment will be considered to have voluntarily quit.
- 3 Personnel Plus can make no guarantee as to the length of assignments or the number of hours an employee can expect to work. Additionally, it is essential that Personnel Plus maintain an accurate daily list of employees available for new assignments. For these reasons, it is the responsibility of the employee to maintain contact with Personnel Plus. It is Personnel Plus policy that upon the end of an assignment, or upon the reduction of hours at an assignment, the employee must contact our office between 8am-5pm on the next business day following the end of the assignment or reduction of hours, speak to a Personnel Plus representative, & report his/her availability for work. Failure to do so may be considered misconduct, & may result in the employee's immediate termination from Personnel Plus with no further warning.
- 4 An employee may also be terminated for misconduct, with no further warning, for reasons including, but not limited to: quitting an assignment without good cause or for personal reasons, failure to report for work without calling Personnel Plus prior to the start of the shift; refusing or failing a drug test; provoking, instigating or participating in a fight; obtrusive or detrimental language or behavior; unauthorized possession, use, or removal of Personnel Plus or client company property; dishonesty; sexual harassment, insubordination; repeated &/or excessive tardiness or absenteeism; failure to comply with safety rules/regulations, reporting to a work assignment under the influence of alcohol or drugs or in possession of alcohol, drugs, or weapons; violation of other Personnel Plus Policies & Procedures; violation of client company policy; or violation of previous warning(s).
- 5 This document serves as a written warning for any terminable offense outlined in policies 3 & 4 above.

The undersigned acknowledges that the Idaho State legislation & Personnel Plus policies, as outlined on this document, will apply to his/her employment with Personnel Plus & acceptance of such is a condition of employment with Personnel Plus:

| Kelsey Bear | Electronically Signed by Kelsey Bear DN: cn=Kelsey Bear,username=k.bear100 Date: 2014-05-15 9:58:36 AM | 2014-06-11 |
|------------------|--|------------|
| EMPLOYEE (PRINT) | EMPLOYEE SIGNATURE | DATE |

Form W-4 (2014)

Purpose. Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. Consider completing a new Form W-4 each year and when your personal or financial situation changes.

Exemption from withholding. If you are exempt, complete only lines 1, 2, 3, 4, and 7 and sign the form to validate it. Your exemption for 2014 expires February 17, 2015. See Pub. 505, Tax Withholding and Estimated Tax.

Note. If another person can claim you as a dependent on his or her tax return, you cannot claim exemption from withholding if your income exceeds \$1,000 and includes more than \$350 of unearned income (for example, interest and dividends).

Exceptions. An employee may be able to claim exemption from withholding even if the employee is a dependent, if the employee:

- Is age 65 or older,
- Is blind, or
- Will claim adjustments to income; tax credits; or itemized deductions, on his or her tax return.

The exceptions do not apply to supplemental wages greater than \$1,000,000.

Basic instructions. If you are not exempt, complete the Personal Allowances Worksheet below. The worksheets on page 2 further adjust your withholding allowances based on itemized deductions, certain credits, adjustments to income, or two-earners/multiple jobs situations.

Complete all worksheets that apply. However, you may claim fewer (or zero) allowances. For regular wages, withholding must be based on allowances you claimed and may not be a flat amount or percentage of wages.

Head of household. Generally, you can claim head of household filing status on your tax return only if you are unmarried and pay more than 50% of the costs of keeping up a home for yourself and your dependent(s) or other qualifying individuals. See Pub. 501, Exemptions, Standard Deduction, and Filing Information, for information.

Tax credits. You can take projected tax credits into account in figuring your allowable number of withholding allowances. Credits for child or dependent care expenses and the child tax credit may be claimed using the Personal Allowances Worksheet below. See Pub. 505 for information on converting your other credits into withholding allowances.

Nonwage income. If you have a large amount of nonwage income, such as interest or dividends, consider making estimated tax payments using Form 1040-ES, Estimated Tax for Individuals. Otherwise, you may owe additional tax. If you have pension or annuity iincome, see Pub. 505 to find out if you should adjust your withholding on Form W-4 or W-4P.

Two earners or multiple jobs. If you have a working spouse or more than one job, figure the total number of allowances you are entitled to claim on all jobs using worksheets from only one Form W-4. Your withholding usually will be most accurate when all allowances are claimed on the Form W-4 for the highest paying job and zero allowances are claimed on the others. See Pub. 505 for details.

Nonresident alien. If you are a nonresident alien, see Notice 1392, Supplemental Form W-4 Instructions for Nonresident Aliens, before completing this form.

Check your withholding. After your Form W-4 takes effect, use Pub. 505 to see how the amount you are having withheld compares to your projected total tax for 2014. See Pub. 505, especially if your earnings exceed \$130,000 (Single) or \$180,000 (Married).

Future developments. Information about any future developments affecting Form W-4 (such as legislation enacted after we release it) will be posted at www.irs.gov/w-

| B Enter " C Enter " than on D Enter n E Enter " (Note. I G Child T If you have th If your H Add line For according to the control of | er "1" for yourself if no one else can claim you as a depen er "1" if: • You are single and have only one job; or • You are married, have only one job, and yo • Your wages from a second job or your spouse er "1" for your spouse. But, you may choose to enter "-0-" n one job. (Entering "-0-" may help you avoid having too lit er number of dependents (other than your spouse or yours er "1" if you will file as head of household on your tax retuer "1" if you have at least \$2,000 of child or dependent cate. Do not include child support payments. See Pub. 503, Id Tax Credit (including additional child tax credit). See Pu your total income will be less than \$65,000 (\$95,000 if mar the three to six eligible children or less "2" if you have sever your total income will be between \$65,000 and \$84,000 (\$95,000) | your spoouse's wa 0-" if you little tax urself) you eturn (see care exp 3, Child Pub. 972 narried), een or mo | pouse does n wages (or the you are marrie ax withheld.) you will claim see conditions expenses for ld and Depend 272, Child Tax), enter "2" for more eligible of \$119,000 if ma from the number | nes not work; or the total of both arried and have eld.) | or oth) are \$1,50 ave either a v tax return . Head of hou ou plan to cla e Expenses, for more info igible child; t ter "1" for eac mptions you c | re \$1,500 or less. ther a working spouse turn of household above) n to claim a credit enses, for details.) re information. child; then less "1" if | ng spouse or mo | pouse or more C D bove) E dit F s.) "1" if you | rour spouse does not work; or use's wages (or the total of both) are \$1,500 or less. D-" if you are married and have either a working spouse or more little tax withheld.) Uurself) you will claim on your tax return Uurn (see conditions under Head of household above) Care expenses for which you plan to claim a credit Care ex | Personal Allowances Worksheet (Keep for your records.) |
|---|--|---|--|--|---|---|--|---|---|--|
| B Enter " C Enter " than on D Enter n E Enter " (Note. I G Child T If you have th If your H Add line For according to the control of | • You are single and have only one job; or • You are married, have only one job, and yo • Your wages from a second job or your spouser "1" for your spouse. But, you may choose to enter "-0-" none job. (Entering "-0-" may help you avoid having too liter number of dependents (other than your spouse or yourser "1" if you will file as head of household on your tax retuer "1" if you have at least \$2,000 of child or dependent cate. Do not include child support payments. See Pub. 503, Ild Tax Credit (including additional child tax credit). See Puyour total income will be less than \$65,000 (\$95,000 if mare three to six eligible children or less "2" if you have sever your total income will be between \$65,000 and \$84,000 (\$95,000) | your spoouse's wa 0-" if you little tax urself) you eturn (sec care exp 3, Child Pub. 972 narried), e en or mo | pouse does n wages (or the vou are marrie ax withheld.) you will claim see conditions expenses for Id and Depend 72, Child Tax), enter "2" for more eligible of \$119,000 if ma from the number | the total of both arried and have eld.) | oth) are \$1,50 ave either a volume either a volume either a volume either a volume either are expenses, for more infoigible child; the ter "1" for each applions you continue either some expenses of the expe | ther a working spouse turn of household above) to claim a credit enses, for details.) re information. child; then less "1" if | ng spouse or mo | pouse or more C D bove) E dit F s.) "1" if you | rour spouse does not work; or use's wages (or the total of both) are \$1,500 or less. D-" if you are married and have either a working spouse or more little tax withheld.) | Personal Allowances Worksheet Ik een for Vour records 1 |
| C Enter "than on D Enter n E Enter " F Enter " (Note. 1) G Child T • If you have th • If your H Add line | • You are married, have only one job, and yo • Your wages from a second job or your spouser "1" for your spouse. But, you may choose to enter "-0-" none job. (Entering "-0-" may help you avoid having too liter number of dependents (other than your spouse or yourser "1" if you will file as head of household on your tax retuer "1" if you have at least \$2,000 of child or dependent cate. Do not include child support payments. See Pub. 503, Id Tax Credit (including additional child tax credit). See Puyour total income will be less than \$65,000 (\$95,000 if mar te three to six eligible children or less "2" if you have sever your total income will be between \$65,000 and \$84,000 (\$95,000) | ouse's wa 0-" if you little tax urself) you eturn (see care explications) 3, Child Pub. 972 parried), eten or mo 00 and \$1 | wages (or the vou are marrie ax withheld.) you will claim see conditions expenses for ld and Depend 172, Child Tax ld, enter "2" for more eligible of \$119,000 if ma from the number vous axis wages. | the total of both arried and have eld.) | oth) are \$1,50 ave either a volume either a volume either a volume either a volume either are expenses, for more infoigible child; the ter "1" for each applions you continue either some expenses of the expe | ther a working spouse turn of household above) to claim a credit enses, for details.) re information. child; then less "1" if | ng spouse or mo | pouse or more C D bove) E dit F s.) "1" if you | use's wages (or the total of both) are \$1,500 or less. July or less and have either a working spouse or more little tax withheld.) | |
| C Enter "than on D Enter n E Enter " F Enter " (Note. 1) G Child T • If you have th • If your H Add line | • Your wages from a second job or your spouser "1" for your spouse . But, you may choose to enter "-0-" none job. (Entering "-0-" may help you avoid having too litter number of dependents (other than your spouse or your er "1" if you will file as head of household on your tax retuer "1" if you have at least \$2,000 of child or dependent cate . Do not include child support payments. See Pub. 503, Id Tax Credit (including additional child tax credit). See Puyour total income will be less than \$65,000 (\$95,000 if mar the three to six eligible children or less "2" if you have sever your total income will be between \$65,000 and \$84,000 (\$95,000) | ouse's wa 0-" if you little tax urself) you eturn (see care explications) 3, Child Pub. 972 parried), eten or mo 00 and \$1 | wages (or the vou are marrie ax withheld.) you will claim see conditions expenses for ld and Depend 172, Child Tax ld, enter "2" for more eligible of \$119,000 if ma from the number vous axis wages. | the total of both arried and have eld.) | oth) are \$1,50 ave either a volume either a volume either a volume either a volume either are expenses, for more infoigible child; the ter "1" for each applions you continue either some expenses of the expe | ther a working spouse turn of household above) to claim a credit enses, for details.) re information. child; then less "1" if | ng spouse or mo | pouse or more C D bove) E dit F s.) "1" if you | use's wages (or the total of both) are \$1,500 or less. July or less and have either a working spouse or more little tax withheld.) | A Enter "1" for yourself if no one else can claim you as a dependent |
| than on Enter n Enter " Fenter " (Note. I Child T If your have th If your Head line | er "1" for your spouse . But, you may choose to enter "-0-" n one job. (Entering "-0-" may help you avoid having too litter number of dependents (other than your spouse or your er "1" if you will file as head of household on your tax retuer "1" if you have at least \$2,000 of child or dependent cate . Do not include child support payments. See Pub. 503, Id Tax Credit (including additional child tax credit). See Puyour total income will be less than \$65,000 (\$95,000 if mar three to six eligible children or less "2" if you have sever your total income will be between \$65,000 and \$84,000 (\$95,000) | 0-" if you little tax urself) you turn (see care explications, and the control of the care explications, and the control of the care explications and \$100 a | you are marrie ax withheld.) you will claim see conditions expenses for ld and Depend 72, Child Tax (), enter "2" for more eligible of \$119,000 if ma from the number 100 from the number | arried and have eld.) | tax return . Head of hou bu plan to clae Expenses, for more info igible child; ter "1" for eac inptions you c | ther a working spouse turn of household above) to claim a credit enses, for details.) re information. child; then less "1" if | ng spouse or mo | pouse or more C D bove) E dit F s.) "1" if you | o-" if you are married and have either a working spouse or more little tax withheld.) | A Enter "1" for yourself if no one else can claim you as a dependent |
| than on Enter n Enter " Fenter " (Note. I Child T If your have th If your Head line | n one job. (Entering "-0-" may help you avoid having too litter number of dependents (other than your spouse or yourser "1" if you will file as head of household on your tax retuer "1" if you have at least \$2,000 of child or dependent cate. Do not include child support payments. See Pub. 503, Id Tax Credit (including additional child tax credit). See Puyour total income will be less than \$65,000 (\$95,000 if mar the three to six eligible children or less "2" if you have sever your total income will be between \$65,000 and \$84,000 (\$95,000) | little tax urself) yo eturn (se care ex 3, Child Pub. 972 harried), e en or mo | ax withheld.) you will claim see conditions expenses for Id and Depend 72, Child Tax), enter "2" for more eligible of \$119,000 if ma from the number | eld.) | tax return . Head of hou ou plan to clae Expenses, for more info igible child; ter "1" for eac apptions you c | eturn | old above) | | little tax withheld.) | A Enter "1" for yourself if no one else can claim you as a dependent |
| D Enter n E Enter " F Enter " (Note. I G Child T | er number of dependents (other than your spouse or yourser "1" if you will file as head of household on your tax retuer "1" if you have at least \$2,000 of child or dependent cate. Do not include child support payments. See Pub. 503, Id Tax Credit (including additional child tax credit). See Puyour total income will be less than \$65,000 (\$95,000 if mare three to six eligible children or less "2" if you have sever your total income will be between \$65,000 and \$84,000 (\$95,000) | urself) yo eturn (see care ex 3, Child Pub. 972 narried), e en or mo | you will claim see conditions expenses for Id and Depend 72, Child Tax), enter "2" for more eligible of \$119,000 if ma from the number | claim on your tax itions under Hea s for which you pependent Care E I Tax Credit, for 2" for each eligible ible children. if married), enter taumber of exempt | tax return. Head of hou ou plan to cla e Expenses, for more info igible child; t ter "1" for eac inptions you c | of household above) In to claim a credit enses, for details.) Ire information. Ichild; then less "1" if If for each eligible child | old above) | bove) Edit Fs.) "1" if you | turself) you will claim on your tax return | A Enter "1" for yourself if no one else can claim you as a dependent |
| E Enter " (Note. I G Child T If your have th Add line For acc. | er "1" if you will file as head of household on your tax retuer "1" if you have at least \$2,000 of child or dependent cate. Do not include child support payments. See Pub. 503, Id Tax Credit (including additional child tax credit). See Puyour total income will be less than \$65,000 (\$95,000 if mare three to six eligible children or less "2" if you have sever your total income will be between \$65,000 and \$84,000 (\$95,000) | eturn (sec care exp 3, Child Pub. 972 narried), e en or mo 00 and \$1 | see conditions expenses for Id and Depend 72, Child Tax), enter "2" for more eligible of \$119,000 if ma from the numb | itions under Heats for which you pependent Care El Tax Credit, for 2" for each eligibile children. if married), enter bumber of exempt | Head of hou bu plan to cla e Expenses, for more info igible child; t ter "1" for eac inptions you c | of household above) In to claim a credit enses, for details.) Ire information. Ichild; then less "1" if Ifor each eligible child | old above) | bove) Edit Fis.) "1" if you | turn (see conditions under Head of household above) E care expenses for which you plan to claim a credit F 3, Child and Dependent Care Expenses, for details.) Pub. 972, Child Tax Credit, for more information. carried), enter "2" for each eligible child; then less "1" if you en or more eligible children. and \$119,000 if married), enter "1" for each eligible child G 0 | A Enter "1" for yourself if no one else can claim you as a dependent |
| E Enter " (Note. I G Child T If your have th Add line For acc. | er "1" if you will file as head of household on your tax retuer "1" if you have at least \$2,000 of child or dependent cate. Do not include child support payments. See Pub. 503, Id Tax Credit (including additional child tax credit). See Puyour total income will be less than \$65,000 (\$95,000 if mare three to six eligible children or less "2" if you have sever your total income will be between \$65,000 and \$84,000 (\$95,000) | eturn (sec care exp 3, Child Pub. 972 narried), e en or mo 00 and \$1 | see conditions expenses for Id and Depend 72, Child Tax), enter "2" for more eligible of \$119,000 if ma from the numb | itions under Heats for which you pependent Care El Tax Credit, for 2" for each eligibile children. if married), enter bumber of exempt | Head of hou bu plan to cla e Expenses, for more info igible child; t ter "1" for eac inptions you c | of household above) In to claim a credit enses, for details.) Ire information. Ichild; then less "1" if Ifor each eligible child | old above) | bove) Edit Fis.) "1" if you | turn (see conditions under Head of household above) E Care expenses for which you plan to claim a credit F 3, Child and Dependent Care Expenses, for details.) Pub. 972, Child Tax Credit, for more information. Carried), enter "2" for each eligible child; then less "1" if you en or more eligible children. Co and \$119,000 if married), enter "1" for each eligible child G O | A Enter "1" for yourself if no one else can claim you as a dependent |
| F Enter " (Note. I G Child T If your have th If your H Add line | er "1" if you have at least \$2,000 of child or dependent cate. Do not include child support payments. See Pub. 503, Id Tax Credit (including additional child tax credit). See Puyour total income will be less than \$65,000 (\$95,000 if mare three to six eligible children or less "2" if you have sever your total income will be between \$65,000 and \$84,000 (\$95,000). | care exp 3, Child Pub. 972 parried), even or mo 00 and \$1 | expenses for Id and Depend 972, Child Tax), enter "2" for more eligible of \$119,000 if ma from the numb | s for which you perpendent Care E I Tax Credit, for 2" for each eligible ible children. if married), enter bumber of exempt | ou plan to cla e Expenses, for more info igible child; t ter "1" for eac nptions you c | n to claim a credit enses, for details.) re information. child; then less "1" if for each eligible child | credit etails.) ion. ess "1" if you ible child | dit F ls.) "1" if you child G | care expenses for which you plan to claim a credit F 0 3, Child and Dependent Care Expenses, for details.) Pub. 972, Child Tax Credit, for more information. arried), enter "2" for each eligible child; then less "1" if you en or more eligible children. on and \$119,000 if married), enter "1" for each eligible child G 0 | A Enter "1" for yourself if no one else can claim you as a dependent |
| (Note. I G Child T • If you have th • If your H Add line | te. Do not include child support payments. See Pub. 503, Id Tax Credit (including additional child tax credit). See Puyour total income will be less than \$65,000 (\$95,000 if mar te three to six eligible children or less "2" if you have sever your total income will be between \$65,000 and \$84,000 (\$95,000). | 3, Child Pub. 972 narried), e en or mo | ld and Depend 072, Child Tax), enter "2" for more eligible of \$119,000 if ma from the numb | ependent Care E I Tax Credit, for 2" for each eligib ible children. if married), enter number of exempt | e Expenses, for more info igible child; t ter "1" for eac nptions you c | enses, for details.) re information. child; then less "1" if for each eligible child | etails.) ion. ess "1" if you ible child | s.) "1" if you child G | 3, Child and Dependent Care Expenses, for details.) Pub. 972, Child Tax Credit, for more information. arried), enter "2" for each eligible child; then less "1" if you en or more eligible children. 0 and \$119,000 if married), enter "1" for each eligible child | A Enter "1" for yourself if no one else can claim you as a dependent |
| G Child T • If you have th • If your H Add line | Id Tax Credit (including additional child tax credit). See Puyour total income will be less than \$65,000 (\$95,000 if mar be three to six eligible children or less "2" if you have sever your total income will be between \$65,000 and \$84,000 (\$95,000). | Pub. 972 narried), e en or mo | 972, Child Tax), enter "2" for more eligible of \$119,000 if ma from the number | I Tax Credit, for 2" for each eligible children. if married), enter number of exempt | for more info igible child; t ter "1" for eac mptions you c | re information. child; then less "1" if for each eligible child | ion. less "1" if you lible child | "1" if you child G | Pub. 972, Child Tax Credit, for more information. arried), enter "2" for each eligible child; then less "1" if you en or more eligible children. on and \$119,000 if married), enter "1" for each eligible child | A Enter "1" for yourself if no one else can claim you as a dependent |
| If you have thIf yourAdd lineFor acc | your total income will be less than \$65,000 (\$95,000 if mar te three to six eligible children or less "2" if you have sever your total income will be between \$65,000 and \$84,000 (\$95,000 | narried), e en or mo 00 and \$1 |), enter "2" for more eligible of \$119,000 if ma from the numbe | 2" for each eligit ible children. if married), enter number of exempt | igible child; t ter "1" for eac nptions you c | child; then less "1" if for each eligible child | ess "1" if you | child G | arried), enter "2" for each eligible child; then less "1" if you en or more eligible children. 10 and \$119,000 if married), enter "1" for each eligible child G 0 | A Enter "1" for yourself if no one else can claim you as a dependent |
| have th • If your H Add line | e three to six eligible children or less "2" if you have sever your total income will be between \$65,000 and \$84,000 (\$95,000 | en or mo | more eligible of \$119,000 if ma | ible children. if married), enter bumber of exempt | ter "1" for eac mptions you c | for each eligible child | ible child | child G | en or more eligible children. 10 and \$119,000 if married), enter "1" for each eligible child G 0 | A Enter "1" for yourself if no one else can claim you as a dependent |
| • If your Add line For acc | your total income will be between \$65,000 and \$84,000 (\$95,000 | 00 and \$1 | \$119,000 if ma from the number | if married), enter of exempt | nptions you c | | | | 0 and \$119,000 if married), enter "1" for each eligible child | A Enter "1" for yourself if no one else can claim you as a dependent |
| H Add line | | | from the numb | number of exempt | nptions you c | | | | | A Enter "1" for yourself if no one else can claim you as a dependent |
| For acc | | | | • | | you olallil on your tax | | iur tax return) 🕨 📙 | erent from the number of exemptions you claim on your tax return) > H | A Enter "1" for yourself if no one else can claim you as a dependent |
| | · · · | | | na wani to reduc | auce your wit | auw with halding age th | , | , | | A Enter "1" for yourself if no one else can claim you as a dependent |
| | | | income and w | | | our withholding, see th | ling, see the Deal | see the Deduction s | An An increase and constitutional constitution will be followed as a the Declinations | A Enter "1" for yourself if no one else can claim you as a dependent |
| comple | | | or are marrie | arried and you | ou and your | d your spouse both w | ise both work an | oth work and the | | A Enter "1" for yourself if no one else can claim you as a dependent |
| | l in it is a single to the single terms of the | 0,000 if r | if married), see |), see the Two-E | o-Earners/M | ners/Multiple Jobs W | e Jobs Workshe | JOHN WORK AND THE | | A Enter "1" for yourself if no one else can claim you as a dependent |
| that ap | · appiyi | | | | | | | | ne job or are married and you and your spouse both work and the combined | A Enter "1" for yourself if no one else can claim you as a dependent |
| | • it neitner of the above situations applies, si | stop nei | | | المسائل مستسلك سماما | | | bs Worksheet on | ne job or are married and you and your spouse both work and the combined 0,000 if married), see the Two-Earners/Multiple Jobs Worksheet on page 2 to | A Enter "1" for yourself if no one else can claim you as a dependent |
| | Separate here and give Form W-4 to you | | nere and enter | enter the number | ber from line | m line H on line 5 of Fo | | bs Worksheet on | ne job or are married and you and your spouse both work and the combined 0,000 if married), see the Two-Earners/Multiple Jobs Worksheet on page 2 to | A Enter "1" for yourself if no one else can claim you as a dependent |
| 344 | | our emp | | | | | line 5 of Form W- | bbs Worksheet on 5 of Form W-4 below | ne job or are married and you and your spouse both work and the combined 0,000 if married), see the Two-Earners/Multiple Jobs Worksheet on page 2 to stop here and enter the number from line H on line 5 of Form W-4 below. | A Enter "1" for yourself if no one else can claim you as a dependent |
| Form W- | Employoo's Withhold | • | nployer. Keep | Keep the top pa | part for your | or your records | line 5 of Form W- | 5 of Form W-4 below | ne job or are married and you and your spouse both work and the combined 0,000 if married), see the Two-Earners/Multiple Jobs Worksheet on page 2 to stop here and enter the number from line H on line 5 of Form W-4 below. | A Enter "1" for yourself if no one else can claim you as a dependent |
| | Employee's Withhold | • | nployer. Keep | Keep the top pa | part for your | or your records | line 5 of Form W- | 5 of Form W-4 below | ne job or are married and you and your spouse both work and the combined 0,000 if married), see the Two-Earners/Multiple Jobs Worksheet on page 2 to stop here and enter the number from line H on line 5 of Form W-4 below. | A Enter "1" for yourself if no one else can claim you as a dependent |
| Department of the | of the Treasury Whether you are entitled to claim a certain r | ding | mployer. Keep G Allowa Der of allowance | Keep the top par wance Ce | part for your Certifica | or your recordsificate | ordsOME | 5 of Form W-4 below OMB No. 15 | ne job or are married and you and your spouse both work and the combined 0,000 if married), see the Two-Earners/Multiple Jobs Worksheet on page 2 to stop here and enter the number from line H on line 5 of Form W-4 below. Our employer. Keep the top part for your records. OMB No. 1545-0074 number of allowances or exemption from withholding is | A Enter "1" for yourself if no one else can claim you as a dependent |
| Department of the Internal Revenue S | of the Treasury nue Service Whether you are entitled to claim a certain r subject to review by the IRS. Your employer r | ding | mployer. Keep G Allowa Der of allowance | Keep the top par wance Ce | part for your Certifica | or your records ificate from withholding is s form to the IRS. | ords. OME | obs Worksheet on 5 of Form W-4 below OMB No. 18 | ne job or are married and you and your spouse both work and the combined 0,000 if married), see the Two-Earners/Multiple Jobs Worksheet on page 2 to stop here and enter the number from line H on line 5 of Form W-4 below. Our employer. Keep the top part for your records. In number of allowances or exemption from withholding is may be required to send a copy of this form to the IRS. | A Enter "1" for yourself if no one else can claim you as a dependent |
| Department of the Internal Revenue S 1 Your fi | of the Treasury nue Service Whether you are entitled to claim a certain r subject to review by the IRS. Your employer rour first name and middle initial Last name | ding | mployer. Keep G Allowa Der of allowance | Keep the top par wance Ce | part for your Certifica | or your records ificate from withholding is s form to the IRS. 2 Your social | ords OME ling is IRS. Your social securi | OMB No. 18 | ne job or are married and you and your spouse both work and the combined 0,000 if married), see the Two-Earners/Multiple Jobs Worksheet on page 2 to stop here and enter the number from line H on line 5 of Form W-4 below. Our employer. Keep the top part for your records. ding Allowance Certificate n number of allowances or exemption from withholding is may be required to send a copy of this form to the IRS. 2 Your social security number | A Enter "1" for yourself if no one else can claim you as a dependent |
| Department of the Internal Revenue S 1 Your fi | Whether you are entitled to claim a certain results subject to review by the IRS. Your employer report first name and middle initial Last name Bear | ding | mployer. Keep G Allowa Der of allowance | Keep the top par wance Ce | part for your Certifica | or your records ificate from withholding is s form to the IRS. 2 Your social | ords OME ling is IRS. Your social securi | OMB No. 18 | ne job or are married and you and your spouse both work and the combined 0,000 if married), see the Two-Earners/Multiple Jobs Worksheet on page 2 to stop here and enter the number from line H on line 5 of Form W-4 below. Our employer. Keep the top part for your records. In number of allowances or exemption from withholding is may be required to send a copy of this form to the IRS. | A Enter "1" for yourself if no one else can claim you as a dependent |
| Department of the Internal Revenue S 1 Your fi | Whether you are entitled to claim a certain results subject to review by the IRS. Your employer report first name and middle initial Last name Bear | ding n number r may be | mployer. Keep G Allowa per of allowance be required to so | Wance Ce vances or exemption to send a copy of | part for your Certifica potion from wit y of this form | or your records ificate from withholding is s form to the IRS. 2 Your socia 518 45 1 | ords. OME | OMB No. 18 Ombs Worksheet on OMB No. 18 Oms r social security num 45 1186 | ne job or are married and you and your spouse both work and the combined 0,000 if married), see the Two-Earners/Multiple Jobs Worksheet on page 2 to stop here and enter the number from line H on line 5 of Form W-4 below. Our employer. Keep the top part for your records. ding Allowance Certificate n number of allowances or exemption from withholding is may be required to send a copy of this form to the IRS. 2 Your social security number | A Enter "1" for yourself if no one else can claim you as a dependent |
| Department of the Internal Revenue S 1 Your fit Kels Home P.O. | whether you are entitled to claim a certain results a certain results and middle initial subject to review by the IRS. Your employer report from the IRS and middle initial cells and middle initial | ding n number er may be | mployer. Keep g Allowa per of allowance be required to see | Keep the top particle. Wance Ce vances or exemption to send a copy of | part for your Certifica nption from wit y of this form | or your records ificate from withholding is s form to the IRS. 2 Your socia 518 45 1 | ords ling is IRS. OME Your social securits 18 45 1186 out withhold at higher | OMB No. 15 Or social security num 45 1186 | ne job or are married and you and your spouse both work and the combined 0,000 if married), see the Two-Earners/Multiple Jobs Worksheet on page 2 to stop here and enter the number from line H on line 5 of Form W-4 below. Dour employer. Keep the top part for your records. In number of allowance Certificate In number of allowances or exemption from withholding is may be required to send a copy of this form to the IRS. 2 Your social security number 518 45 1186 | A Enter "1" for yourself if no one else can claim you as a dependent |
| Department of the Internal Revenue S 1 Your fit Kels Home P.O. | whether you are entitled to claim a certain results a certain results and middle initial subject to review by the IRS. Your employer report from the IRS and middle initial cells and middle initial | ding n number or may be | mployer. Keep g Allowa per of allowance be required to so 3 X Single Note. If married | Wance Ce vances or exemption to send a copy of | part for your Certifica potion from with y of this form arried Mar separated, or spo | from withholding is s form to the IRS. 2 Your socia 518 45 1 Married, but withhold ed, or spouse is a nonresident | line 5 of Form W-ords | OMB No. 18 OMB No. 18 Or social security num 45 1186 ithhold at higher Single iresident alien, check the " | ne job or are married and you and your spouse both work and the combined 0,000 if married), see the Two-Earners/Multiple Jobs Worksheet on page 2 to stop here and enter the number from line H on line 5 of Form W-4 below. Dour employer. Keep the top part for your records. Compared to see the top part for your records. OMB No. 1545-0074 Compared to see the top part for withholding is a may be required to send a copy of this form to the IRS. 2 Your social security number 518 45 1186 3 X Single Married Married, but withhold at higher Single rate. | A Enter "1" for yourself if no one else can claim you as a dependent |
| Department of the Internal Revenue S 1 Your fit Kels Home P.O. City or | Whether you are entitled to claim a certain r subject to review by the IRS. Your employer rour first name and middle initial Last name Bear Celsey A Ome address (number and street or rural route) 2.O. Box 1188 ity or town, state, and ZIP code | ding n number or may be | mployer. Keep g Allowa per of allowance be required to so 3 X Single Note. If married 4 If your last | Wance Ce vances or exemption to send a copy of Single Married narried, but legally sepur last name differs | part for your Certifica potion from with y of this form arried Mar separated, or spo | or your records ificate from withholding is s form to the IRS. 2 Your socia 518 45 1 Married, but withhold ed, or spouse is a nonresident on that shown on your s | line 5 of Form W- ords | OMB No. 18 OMB No. 18 Ome resident alien, check the "your social security or | ne job or are married and you and your spouse both work and the combined 0,000 if married), see the Two-Earners/Multiple Jobs Worksheet on page 2 to stop here and enter the number from line H on line 5 of Form W-4 below. Our employer. Keep the top part for your records. In number of allowance Certificate In number of allowances or exemption from withholding is a may be required to send a copy of this form to the IRS. 2 Your social security number 518 45 1186 3 X Single Married Married, but withhold at higher Single rate. Note. If married, but legally separated, or spouse is a nonresident alien, check the "Single" box. | A Enter "1" for yourself if no one else can claim you as a dependent |
| Department of the Internal Revenue S 1 Your fi Kels Home P.O. City or | Whether you are entitled to claim a certain r subject to review by the IRS. Your employer rour first name and middle initial Celsey A Description of the Treasury subject to review by the IRS. Your employer rour first name and middle initial Last name Bear Co. Box 1188 Ity or town, state, and ZIP code Win Falls, ID 83301 | ding n number r may be | g Allowa per of allowance be required to se 3 X Single Note. If married 4 If your last check her | Wance Ce vances or exemption to send a copy of Single Married narried, but legally sep ur last name differs k here. You must | part for your Certifica Inption from with y of this form the separated, or specifiers from that just call 1-800- | or your records ificate from withholding is s form to the IRS. 2 Your socia 518 45 1 Married, but withhold ed, or spouse is a nonresident om that shown on your s 1-800-772-1213 for a re | line 5 of Form W-ords | OMB No. 18 OMB No. 18 or social security num 45 1186 ithhold at higher Single resident alien, check the " your social security of for a replacement case (2) 5 2 | ne job or are married and you and your spouse both work and the combined 0,000 if married), see the Two-Earners/Multiple Jobs Worksheet on page 2 to stop here and enter the number from line H on line 5 of Form W-4 below. Dour employer. Keep the top part for your records. ding Allowance Certificate In number of allowances or exemption from withholding is a may be required to send a copy of this form to the IRS. 2 Your social security number 518 45 1186 3 X Single Married Married, but withhold at higher Single rate. Note. If married, but legally separated, or spouse is a nonresident alien, check the "Single" box. 4 If your last name differs from that shown on your social security card, check here. You must call 1-800-772-1213 for a replacement card. | A Enter "1" for yourself if no one else can claim you as a dependent |
| Department of the Internal Revenue S | whether you are entitled to claim a certain results and subject to review by the IRS. Your employer results and middle initial Last name Bear one address (number and street or rural route) 2.O. Box 1188 at your employer results and subject to review by the IRS. Your employer results and subject to review by | Iding n number r may be | a Allowa Der of allowance De required to so 3 X Single Note. If married 4 If your last check her or from the a | Keep the top particle wances or exemption to send a copy of the copy of the send a copy of the send a copy of the send a copy o | part for your Certifica Aption from with y of this form Arried Mar separated, or spote fers from that just call 1-800-be worksheet | ryour records ificate from withholding is s form to the IRS. 2 Your socia 518 45 1 Married, but withhold ed, or spouse is a nonresident om that shown on your s 1-800-772-1213 for a resheet on page 2) | line 5 of Form W-ords | OMB No. 18 OMB No. 18 or social security num 45 1186 ithhold at higher Single resident alien, check the " your social security of for a replacement ca | ne job or are married and you and your spouse both work and the combined 0,000 if married), see the Two-Earners/Multiple Jobs Worksheet on page 2 to stop here and enter the number from line H on line 5 of Form W-4 below. Our employer. Keep the top part for your records. ding Allowance Certificate In number of allowances or exemption from withholding is a may be required to send a copy of this form to the IRS. 2 Your social security number 518 45 1186 3 X Single Married Married, but withhold at higher Single rate. Note. If married, but legally separated, or spouse is a nonresident alien, check the "Single" box. 4 If your last name differs from that shown on your social security card, check here. You must call 1-800-772-1213 for a replacement card. | A Enter "1" for yourself if no one else can claim you as a dependent |
| Department of the Internal Revenue S 1 Your fit Kels | Whether you are entitled to claim a certain results and subject to review by the IRS. Your employer report first name and middle initial Last name Bear Co. Box 1188 ity or town, state, and ZIP code Win Falls, ID 83301 otal number of allowances you are claiming (from line H abdidditional amount, if any, you want withheld from each payor | above or | g Allowa per of allowance be required to so 3 X Single Note. If married 4 If your last check her or from the a | Wance Ce vances or exemption to send a copy of Single Married harried, but legally sepur last name differs k here. You must the applicable w | part for your Certifica Inption from with y of this form the separated, or spot fers from that just call 1-800- Worksheet | or your records ificate from withholding is a form to the IRS. 2 Your social 518 45 1 Married, but withhold ed, or spouse is a nonresident on that shown on your sident on that shown on your sident on page 2) | ding is IRS. Your social securi 18 45 1186 Dut withhold at higher a nonresident alien, che non your social securi 3 for a replacem age 2) 6 \$ | OMB No. 15 | ne job or are married and you and your spouse both work and the combined 0,000 if married), see the Two-Earners/Multiple Jobs Worksheet on page 2 to stop here and enter the number from line H on line 5 of Form W-4 below. Our employer. Keep the top part for your records. ding Allowance Certificate In number of allowances or exemption from withholding is a remay be required to send a copy of this form to the IRS. 2 Your social security number 518 45 1186 3 X Single Married Married, but withhold at higher Single rate. Note. If married, but legally separated, or spouse is a nonresident alien, check the "Single" box. 4 If your last name differs from that shown on your social security card, check here. You must call 1-800-772-1213 for a replacement card. In the check here. You must call 1-800-772-1213 for a replacement card. Shove or from the applicable worksheet on page 2) ycheck | A Enter "1" for yourself if no one else can claim you as a dependent |
| Department of the Internal Revenue S 1 Your fit Kels Home P.O. City or Twir 5 Total 6 Addit 7 I clair | Whether you are entitled to claim a certain results and subject to review by the IRS. Your employer results and middle initial Last name Bear one address (number and street or rural route) 2.O. Box 1188 Ity or town, state, and ZIP code Win Falls, ID 83301 Intelligent to review by the IRS. Your employer results and provided initial Last name Bear one address (number and street or rural route) 2.O. Box 1188 Ity or town, state, and ZIP code and the provided initial control of allowances you are claiming (from line H and additional amount, if any, you want withheld from each payor claim exemption from withholding for 2014, and I certify the | above or | g Allowa per of allowance be required to so 3 X Single Note. If married 4 If your last check her or from the a ck meet both of the | Wance Ce vances or exemption to send a copy of Single Marrie narried, but legally sepur last name differs k here. You must the applicable w h of the following | part for your Certifica Inption from with y of this form the separated, or spot fers from that set call 1-800- Worksheet | from withholding is so form to the IRS. 2 Your social 518 45 1 Married, but withhold ed, or spouse is a nonresident of that shown on your social 1-800-772-1213 for a resistence on page 2) | ding is IRS. Your social securities a nonresident alien, chen on your social securities a replacemage 2) To exemption. | OMB No. 15 | ne job or are married and you and your spouse both work and the combined 0,000 if married), see the Two-Earners/Multiple Jobs Worksheet on page 2 to stop here and enter the number from line H on line 5 of Form W-4 below. Dour employer. Keep the top part for your records. ding Allowance Certificate In number of allowances or exemption from withholding is a remay be required to send a copy of this form to the IRS. 2 Your social security number 518 45 1186 3 X Single Married Married, but withhold at higher Single rate. Note. If married, but legally separated, or spouse is a nonresident alien, check the "Single" box. 4 If your last name differs from that shown on your social security card, check here. You must call 1-800-772-1213 for a replacement card. In above or from the applicable worksheet on page 2) Sycheck | A Enter "1" for yourself if no one else can claim you as a dependent |
| Department of the Internal Revenue S 1 Your fit Kels Home P.O. City or Twir 5 Total 6 Addit 7 I clair Las | Whether you are entitled to claim a certain resulting subject to review by the IRS. Your employer resu | above or aycheck that I meax withhe | a Single Note. If married the check her or from the act is meet both of theld because | Wance Ce vances or exemption to send a copy of Single Marrie narried, but legally sepur last name differs the applicable wance. You must the applicable wance in the following cause I had no to | part for your Certifica Inption from with y of this form the separated, or spot fers from that ust call 1-800- Worksheet | from withholding is so form to the IRS. 2 Your social 518 45 1 Married, but withhold ed, or spouse is a nonresident of that shown on your social 1-800-772-1213 for a resident on page 2) | ding is IRS. Your social securi 18 45 1186 out withhold at higher a nonresident alien, che non your social se 213 for a replacemage 2) 5 6 \$ or exemption. | OMB No. 15 | ne job or are married and you and your spouse both work and the combined 0,000 if married), see the Two-Earners/Multiple Jobs Worksheet on page 2 to stop here and enter the number from line H on line 5 of Form W-4 below. Dour employer. Keep the top part for your records. ding Allowance Certificate In number of allowances or exemption from withholding is a may be required to send a copy of this form to the IRS. 2 Your social security number 518 45 1186 3 X Single Married Married, but withhold at higher Single rate. Note. If married, but legally separated, or spouse is a nonresident alien, check the "Single" box. 4 If your last name differs from that shown on your social security card, check here. You must call 1-800-772-1213 for a replacement card. Above or from the applicable worksheet on page 2) Sycheck | A Enter "1" for yourself if no one else can claim you as a dependent |
| Department of the Internal Revenue S 1 Your fi Kels Home P.O. City or Twir 5 Total 6 Addit 7 I clair • Las • This | Whether you are entitled to claim a certain r subject to review by the IRS. Your employer report first name and middle initial Last name Bear Bear Bear Bear Bear Bear Bear Bear | above or aycheck that I meax withheld bed | g Allowa per of allowance be required to so 3 X Single Note. If married 4 If your last check her or from the a ck meet both of the | Wance Ce vances or exemption to send a copy of Single Married married, but legally sepur last name differs the applicable wance. You must the applicable wance in the following cause I had no to expect to have | part for your Certifica Inption from with y of this form the separated, or sport fers from that ust call 1-800-be worksheet In your sport for your sport fers from that ust call 1-800-be worksheet In your sport for your sport for your sport fers from that ust call 1-800-be worksheet In your sport for your sport for your sport fers from that ust call 1-800-be worksheet In your sport for your your sport for your your your your your your your yo | or your records ificate from withholding is soften to the IRS. 2 Your socia 518 45 1 Married, but withhold ad, or spouse is a nonresident of the that shown on your social sheet on page 2) | ding is IRS. Your social securial 8 45 1186 out withhold at higher a nonresident alien, chan on your social securiage 2) To exemption. | OMB No. 15 | ne job or are married and you and your spouse both work and the combined 0,000 if married), see the Two-Earners/Multiple Jobs Worksheet on page 2 to stop here and enter the number from line H on line 5 of Form W-4 below. Tour employer. Keep the top part for your records. Tour employer. Keep the top part for your records. Tour employer. Keep the top part for your records. Tour employer. Keep the top part for your records. Tour employer. Keep the top part for your records. Tour employer. Keep the top part for your records. Tour employer. Keep the top part for your records. Tour employer. Keep the top part for your records. Tour employer. Keep the top part for your records. Tour employer. Keep the top part for your records. Tour employer. Keep the top part for your records. Tour employer. Keep the top part for your records. Tour employer. Keep the top part for your records. Tour employer. Keep the top part for your records. Tour employer. Keep the top part for your records. Tour employer. Keep the top part for your records. Tour employer. We plow the following is a nonresident alien, check the "Single rate. Note. If married, but legally separated, or spouse is a nonresident alien, check the "Single" box. Tour last name differs from that shown on your social security card, check here. You must call 1-800-772-1213 for a replacement card. Tour employer. Legally because an onresident alien, check the "Single" box. Tour social security number social securit | Enter "1" for yourself if no one else can claim you as a dependent |
| Department of the Internal Revenue S 1 Your fit Kels Home P.O. City or Twir 5 Total 6 Addit 7 I clair • Las • This If you | Whether you are entitled to claim a certain results and subject to review by the IRS. Your employer results are and middle initial Last name Bear one address (number and street or rural route) 2.O. Box 1188 Ity or town, state, and ZIP code Win Falls, ID 83301 Interest of allowances you are claiming (from line H abdeditional amount, if any, you want withheld from each payor claim exemption from withholding for 2014, and I certify the Last year I had a right to a refund of all federal income tax. This year I expect a refund of all federal income tax withhely you meet both conditions, write "Exempt" here | above on aycheck that I meax withheld bed | a Single Note. If married the required to so the re | Wance Ce vances or exemption to send a copy of Single Marrie married, but legally sepur last name differs k here. You must the applicable w the of the following cause I had no to expect to have | part for your Certifica Inption from with y of this form the separated, or sport fers from that set call 1-800-be worksheet In your condition to tax liability we no tax liability. | or your records ificate from withholding is s form to the IRS. 2 Your socia 518 45 1 Married, but withhold ed, or spouse is a nonresident om that shown on your s 1-800-772-1213 for a resisheet on page 2) | line 5 of Form W- ords | OMB No. 18 OMB No. 18 OMB No. 18 OMB round is 20 in resocial security num 45 1186 ithhold at higher Single resident alien, check the " your social security of for a replacement ca 2) 5 2 6 \$ emption. | ne job or are married and you and your spouse both work and the combined 0,000 if married), see the Two-Earners/Multiple Jobs Worksheet on page 2 to stop here and enter the number from line H on line 5 of Form W-4 below. Tour employer. Keep the top part for your records. Tour employer. Keep the top part for your records. Tour employer. Keep the top part for your records. Tour employer. Keep the top part for your records. Tour employer. Keep the top part for your records. Tour employer. Keep the top part for your records. Tour employer. Keep the top part for your records. Tour employer. Keep the top part for your records. Tour employer. Keep the top part for your records. Tour employer. Keep the top part for your records. Tour employer. Keep the top part for your records. Tour employer. Keep the top part for your records. Tour employer. Keep the top part for your records. Tour employer. Keep the top part for your records. Tour employer. Keep the top part for your records. Tour employer. Keep the top page 2 on the least of Form W-4 below. Tour employer. Ye below. Tour employer. Keep the top page 2 on the least of Form W-4 below. Tour employer. Ye below. Tour employer. Tour emp | Enter "1" for yourself if no one else can claim you as a dependent |
| Department of the Internal Revenue S 1 Your fi Kels Home P.O. City or Twir 5 Total 6 Addit 7 I clair • Las • This If you Under penaltic | Whether you are entitled to claim a certain resubject to review by the IRS. Your employer report first name and middle initial Last name Bear Description of all street or rural route Description of all federal income tax withher you meet both conditions, write "Exempt" here. Description of the Irea subject to review by the IRS. Your employer reports to review by the I | above or aycheck that I me ax withher held beck the and, the celsey Be | a Single Note. If married the check her or from the act of the check her or from the check her or f | Wance Ce vances or exemption to send a copy of Single | part for your Certifica Inption from with y of this form the separated, or sport fers from that set call 1-800-be worksheet In your condition to tax liability we no tax liability. | or your records ificate from withholding is s form to the IRS. 2 Your socia 518 45 1 Married, but withhold ed, or spouse is a nonresident om that shown on your s 1-800-772-1213 for a resisheet on page 2) | line 5 of Form W- ords | OMB No. 18 OMB No. 18 OMB No. 18 OMB round is 20 in resocial security num 45 1186 ithhold at higher Single resident alien, check the " your social security of for a replacement ca 2) 5 2 6 \$ emption. | ne job or are married and you and your spouse both work and the combined 0,000 if married), see the Two-Earners/Multiple Jobs Worksheet on page 2 to stop here and enter the number from line H on line 5 of Form W-4 below. Our employer. Keep the top part for your records. In number of allowances or exemption from withholding is a may be required to send a copy of this form to the IRS. 2 Your social security number 518 45 1186 3 X Single Married Married, but withhold at higher Single rate. Note. If married, but legally separated, or spouse is a nonresident alien, check the "Single" box. 4 If your last name differs from that shown on your social security card, check here. You must call 1-800-772-1213 for a replacement card. Check here. You must call 1-800-772-1213 for a replacement card. Above or from the applicable worksheet on page 2) yocheck | Enter "1" for yourself if no one else can claim you as a dependent |
| Department of the Internal Revenue S 1 Your fi Kels Home P.O. City or Twir 5 Total 6 Addit 7 I clair • Las • This If you Under penaltic | Whether you are entitled to claim a certain resulting subject to review by the IRS. Your employer resu | above or aycheck that I me ax withhe held bed to the telephone in the tele | a Single Note. If married the check her or from the act of the check her or from the check her or f | Wance Ce vances or exemption to send a copy of Single | part for your Certifica Inption from with y of this form the separated, or sport fers from that set call 1-800-be worksheet In your condition to tax liability we no tax liability. | ificate from withholding is softem to the IRS. 2 Your social 518 45 1 Married, but withhold ed, or spouse is a nonresident of the that shown on your social sheet on page 2) | ding is IRS. Your social securit 18 45 1186 Dut withhold at higher a nonresident alien, chen on your social securit age 2) The exemption of the structure of | OMB No. 15 OMB No. 15 OMB No. 15 Ir social security num 45 1186 iithhold at higher Single resident alien, check the replacement car 2) 5 2 6 \$ remption. | ne job or are married and you and your spouse both work and the combined 0,000 if married), see the Two-Earners/Multiple Jobs Worksheet on page 2 to stop here and enter the number from line H on line 5 of Form W-4 below. Dour employer. Keep the top part for your records. Dour employer. Keep the top part for your records. Dour employer. Keep the top part for your records. Dour employer. Keep the top part for your records. Dour employer. Keep the top part for your records. Dour employer. Keep the top part for your records. Double No. 1545-0074 Double No. 1545- | Enter "1" for yourself if no one else can claim you as a dependent |
| Department of the Internal Revenue S 1 Your fi Kels Home P.O. City or Twir 5 Total 6 Addit 7 I clair Las This If you Under penaltic Employee's s (This form is n | Whether you are entitled to claim a certain of subject to review by the IRS. Your employer of pur first name and middle initial Last name Bear Co. Box 1188 Ity or town, state, and ZIP code Win Falls, ID 83301 Interpretational amount, if any, you want withheld from each payor claim exemption from withholding for 2014, and I certify the Last year I had a right to a refund of all federal income tax withhele you meet both conditions, write "Exempt" here. Inalties of perjury, I declare that I have examined this certificate by's signature It is not valid unless you sign it.) ▶ Date: 2014-05-15 9:58:36 A | above or aycheck that I me ax withher held bed ax deland, to Kelsey Be name=k. | a Allowa Der of allowance be required to so 3 X Single Note. If married 4 If your last check her or from the a ck meet both of theld because lecause lexperies. It is not the best of Bear lek. bear 100 | Wance Ce vances or exemption to send a copy of Single Marrie narried, but legally separr last name differs the applicable was the applicable was the applicable was a copy of the following cause I had no to expect to have the set of my knowless | part for your Certifica Inption from with y of this form the separated, or sponsor the separated, or sponsor the separated of the separated | pr your records ificate from withholding is s form to the IRS. 2 Your social 518 45 1 Married, but withhold ed, or spouse is a nonresident of the shown on your self-800-772-1213 for a resisheet on page 2) | line 5 of Form W- ords ling is IRS. Your social securi 18 45 1186 out withhold at highe a nonresident alien, che n on your social se 213 for a replacem age 2) 5 6 \$ or exemption. it is true, correct, | OMB No. 15 OMB No. 15 OMB No. 15 Ir social security num 45 1186 iithhold at higher Single resident alien, check the replacement car 2) 5 2 6 \$ remption. | ne job or are married and you and your spouse both work and the combined 0,000 if married), see the Two-Earners/Multiple Jobs Worksheet on page 2 to stop here and enter the number from line H on line 5 of Form W-4 below. Dur employer. Keep the top part for your records. Dur employer. Keep the top part for your records. Diamober of allowances or exemption from withholding is raw be required to send a copy of this form to the IRS. 2 Your social security number 518 45 1186 3 X Single Married Married, but withhold at higher Single rate. Note. If married, but legally separated, or spouse is a nonresident alien, check the "Single" box. 4 If your last name differs from that shown on your social security card, check here. You must call 1-800-772-1213 for a replacement card. ► Check here. You must call 1-800-772-1213 for a replacement card. ► Check here. You must call 1-800-772-1213 for a replacement card. ► Check here. You must call 1-800-772-1213 for a replacement card. ► Check here. You must call 1-800-772-1213 for a replacement card. ► Check here. You must call 1-800-772-1213 for a replacement card. ► Check here. You must call 1-800-772-1213 for a replacement card. ► Check here. You must call 1-800-772-1213 for a replacement card. ► Check here. You must call 1-800-772-1213 for a replacement card. ► Check here. You must call 1-800-772-1213 for a replacement card. ► Check here. You must call 1-800-772-1213 for a replacement card. ► Check here. You must call 1-800-772-1213 for a replacement card. ► Check here. You must call 1-800-772-1213 for a replacement card. ► Check here. You must call 1-800-772-1213 for a replacement card. ► Check here. You must call 1-800-772-1213 for a replacement card. ► Check here. You must call 1-800-772-1213 for a replacement card. ► Check here. You must call 1-800-772-1213 for a replacement card. ► Check here. You must call 1-800-772-1213 for a replacement card. ► Check here. You must call 1-800-772-1213 for a replacement card. ► Check here. You must call 1-800-772-1213 for a replac | A Enter "1" for yourself if no one else can claim you as a dependent |
| Department of the Internal Revenue S 1 Your fi | of the Treasury nue Service Whether you are entitled to claim a certain r subject to review by the IRS. Your employer rour first name and middle initial Last name | ding | mployer. Keep G Allowa Der of allowance | Keep the top par wance Ce | part for your Certifica | or your records ificate from withholding is s form to the IRS. 2 Your social | ords OME ling is IRS. Your social securi | OMB No. 18 | ne job or are married and you and your spouse both work and the composition of married), see the Two-Earners/Multiple Jobs Worksheet on page stop here and enter the number from line H on line 5 of Form W-4 below. Tour employer. Keep the top part for your records. OMB No. 1545-0 and the interval of allowances or exemption from withholding is may be required to send a copy of this form to the IRS. | A Enter "1" for yourself if no one else can claim you as a dependent |
| For acc | | | | • | | o , ca ciaiii oii youi tax | | ur tax return I 🕨 📙 | erent from the number of exemptions you claim on your tax return) H 2 | Enter "1" for yourself if no one else can claim you as a dependent |
| For acc | lines A through G and enter total here. (Note. This may be differ | fferent fro | | • | | s you claim on your tax | on vour tay roturn) | | | Enter "1" for yourself if no one else can claim you as a dependent |
| H Add line | | | from the numb | number of exempt | nptions you c | | | | | A Enter "1" for yourself if no one else can claim you as a dependent |
| • If your Add line | your total income will be between \$65,000 and \$84,000 (\$95,000 | 00 and \$1 | \$119,000 if ma from the number | if married), enter of exempt | nptions you c | | | | 0 and \$119,000 if married), enter "1" for each eligible child G 0 | A Enter "1" for yourself if no one else can claim you as a dependent |
| If you have thIf yourAdd line | your total income will be less than \$65,000 (\$95,000 if mar te three to six eligible children or less "2" if you have sever your total income will be between \$65,000 and \$84,000 (\$95,000 | narried), e en or mo 00 and \$1 |), enter "2" for more eligible of \$119,000 if ma from the numbe | 2" for each eligit ible children. if married), enter number of exempt | igible child; t ter "1" for eac nptions you c | child; then less "1" if for each eligible child | ess "1" if you | child G | arried), enter "2" for each eligible child; then less "1" if you en or more eligible children. 10 and \$119,000 if married), enter "1" for each eligible child G 0 | A Enter "1" for yourself if no one else can claim you as a dependent |
| G Child T • If you have th • If your H Add line | Id Tax Credit (including additional child tax credit). See Puyour total income will be less than \$65,000 (\$95,000 if mar be three to six eligible children or less "2" if you have sever your total income will be between \$65,000 and \$84,000 (\$95,000). | Pub. 972 narried), e en or mo | 972, Child Tax), enter "2" for more eligible of \$119,000 if ma from the number | I Tax Credit, for 2" for each eligible children. if married), enter number of exempt | for more info igible child; t ter "1" for eac mptions you c | re information. child; then less "1" if for each eligible child | ion. less "1" if you lible child | "1" if you child G | Pub. 972, Child Tax Credit, for more information. arried), enter "2" for each eligible child; then less "1" if you en or more eligible children. on and \$119,000 if married), enter "1" for each eligible child | A Enter "1" for yourself if no one else can claim you as a dependent |
| (Note. I G Child T • If you have th • If your H Add line | te. Do not include child support payments. See Pub. 503, Id Tax Credit (including additional child tax credit). See Puyour total income will be less than \$65,000 (\$95,000 if mar te three to six eligible children or less "2" if you have sever your total income will be between \$65,000 and \$84,000 (\$95,000). | 3, Child Pub. 972 narried), e en or mo | ld and Depend 072, Child Tax), enter "2" for more eligible of \$119,000 if ma from the numb | ependent Care E I Tax Credit, for 2" for each eligib ible children. if married), enter number of exempt | e Expenses, for more info igible child; t ter "1" for eac nptions you c | enses, for details.) re information. child; then less "1" if for each eligible child | etails.) ion. ess "1" if you ible child | s.) "1" if you child G | 3, Child and Dependent Care Expenses, for details.) Pub. 972, Child Tax Credit, for more information. arried), enter "2" for each eligible child; then less "1" if you en or more eligible children. 0 and \$119,000 if married), enter "1" for each eligible child | A Enter "1" for yourself if no one else can claim you as a dependent |
| F Enter "' (Note. Child T If you have th If your Add line | er "1" if you have at least \$2,000 of child or dependent cate. Do not include child support payments. See Pub. 503, Id Tax Credit (including additional child tax credit). See Puyour total income will be less than \$65,000 (\$95,000 if mare three to six eligible children or less "2" if you have sever your total income will be between \$65,000 and \$84,000 (\$95,000). | care exp 3, Child Pub. 972 parried), even or mo 00 and \$1 | expenses for Id and Depend 972, Child Tax), enter "2" for more eligible of \$119,000 if ma from the numb | s for which you perpendent Care E I Tax Credit, for 2" for each eligible ible children. if married), enter bumber of exempt | ou plan to cla e Expenses, for more info igible child; t ter "1" for eac nptions you c | n to claim a credit enses, for details.) re information. child; then less "1" if for each eligible child | credit etails.) ion. ess "1" if you ible child | dit F ls.) "1" if you child G | care expenses for which you plan to claim a credit F 0 3, Child and Dependent Care Expenses, for details.) Pub. 972, Child Tax Credit, for more information. arried), enter "2" for each eligible child; then less "1" if you en or more eligible children. on and \$119,000 if married), enter "1" for each eligible child G 0 | A Enter "1" for yourself if no one else can claim you as a dependent |
| E Enter " (Note. I G Child T If your have th Add line For acc. | er "1" if you will file as head of household on your tax retuer "1" if you have at least \$2,000 of child or dependent cate. Do not include child support payments. See Pub. 503, Id Tax Credit (including additional child tax credit). See Puyour total income will be less than \$65,000 (\$95,000 if mare three to six eligible children or less "2" if you have sever your total income will be between \$65,000 and \$84,000 (\$95,000) | eturn (sec care exp 3, Child Pub. 972 narried), e en or mo 00 and \$1 | see conditions expenses for Id and Depend 72, Child Tax), enter "2" for more eligible of \$119,000 if ma from the numb | itions under Heats for which you pependent Care El Tax Credit, for 2" for each eligibile children. if married), enter bumber of exempt | Head of hou bu plan to cla e Expenses, for more info igible child; t ter "1" for eac inptions you c | of household above) In to claim a credit enses, for details.) Ire information. Ichild; then less "1" if Ifor each eligible child | old above) | bove) Edit Fis.) "1" if you | turn (see conditions under Head of household above) E Care expenses for which you plan to claim a credit F 3, Child and Dependent Care Expenses, for details.) Pub. 972, Child Tax Credit, for more information. Carried), enter "2" for each eligible child; then less "1" if you en or more eligible children. Co and \$119,000 if married), enter "1" for each eligible child G O | A Enter "1" for yourself if no one else can claim you as a dependent |
| D Enter n E Enter " F Enter " (Note. I G Child T | er number of dependents (other than your spouse or yourser "1" if you will file as head of household on your tax retuer "1" if you have at least \$2,000 of child or dependent cate. Do not include child support payments. See Pub. 503, Id Tax Credit (including additional child tax credit). See Puyour total income will be less than \$65,000 (\$95,000 if mare three to six eligible children or less "2" if you have sever your total income will be between \$65,000 and \$84,000 (\$95,000) | urself) yo eturn (see care ex 3, Child Pub. 972 narried), e en or mo | you will claim see conditions expenses for Id and Depend 72, Child Tax), enter "2" for more eligible of \$119,000 if ma from the number | claim on your tax itions under Hea s for which you pependent Care E I Tax Credit, for 2" for each eligible ible children. if married), enter to number of exempt | tax return. Head of hou ou plan to cla e Expenses, for more info igible child; t ter "1" for eac inptions you c | of household above) In to claim a credit enses, for details.) Ire information. Ichild; then less "1" if If for each eligible child | old above) | bove) Edit Fs.) "1" if you | turself) you will claim on your tax return | A Enter "1" for yourself if no one else can claim you as a dependent |
| than on E Enter " F Enter " (Note. I o If you have th o If your H Add line | n one job. (Entering "-0-" may help you avoid having too litter number of dependents (other than your spouse or yourser "1" if you will file as head of household on your tax retuer "1" if you have at least \$2,000 of child or dependent cate. Do not include child support payments. See Pub. 503, Id Tax Credit (including additional child tax credit). See Puyour total income will be less than \$65,000 (\$95,000 if mar the three to six eligible children or less "2" if you have sever your total income will be between \$65,000 and \$84,000 (\$95,000) | little tax urself) yo eturn (se care ex 3, Child Pub. 972 harried), e en or mo | ax withheld.) you will claim see conditions expenses for Id and Depend 72, Child Tax), enter "2" for more eligible of \$119,000 if ma from the number | eld.) | tax return . Head of hou ou plan to clae Expenses, for more info igible child; ter "1" for eac apptions you c | eturn | old above) | | little tax withheld.) | A Enter "1" for yourself if no one else can claim you as a dependent |
| than on E Enter " F Enter " (Note. I o If you have th o If your H Add line | er "1" for your spouse . But, you may choose to enter "-0-" n one job. (Entering "-0-" may help you avoid having too litter number of dependents (other than your spouse or your er "1" if you will file as head of household on your tax retuer "1" if you have at least \$2,000 of child or dependent cate . Do not include child support payments. See Pub. 503, Id Tax Credit (including additional child tax credit). See Puyour total income will be less than \$65,000 (\$95,000 if mar three to six eligible children or less "2" if you have sever your total income will be between \$65,000 and \$84,000 (\$95,000) | 0-" if you little tax urself) you turn (see care explications, and the control of the care explications, and the control of the control of the care explications and \$100 and | you are marrie ax withheld.) you will claim see conditions expenses for ld and Depend 72, Child Tax (), enter "2" for more eligible of \$119,000 if ma from the number 100 from the number | arried and have eld.) | tax return . Head of hou bu plan to clae Expenses, for more info igible child; ter "1" for eac inptions you c | ther a working spouse turn of household above) to claim a credit enses, for details.) re information. child; then less "1" if | ng spouse or mo | pouse or more C D bove) E dit F s.) "1" if you | o-" if you are married and have either a working spouse or more little tax withheld.) | A Enter "1" for yourself if no one else can claim you as a dependent |
| C Enter "than on D Enter n E Enter " F Enter " (Note. I G Child T • If you have th • If your H Add line | • Your wages from a second job or your spouser "1" for your spouse . But, you may choose to enter "-0-" none job. (Entering "-0-" may help you avoid having too litter number of dependents (other than your spouse or your er "1" if you will file as head of household on your tax retuer "1" if you have at least \$2,000 of child or dependent cate . Do not include child support payments. See Pub. 503, Id Tax Credit (including additional child tax credit). See Puyour total income will be less than \$65,000 (\$95,000 if mar the three to six eligible children or less "2" if you have sever your total income will be between \$65,000 and \$84,000 (\$95,000) | ouse's wa 0-" if you little tax urself) you eturn (see care explications) 3, Child Pub. 972 parried), eten or mo 00 and \$1 | wages (or the vou are marrie ax withheld.) you will claim see conditions expenses for ld and Depend 172, Child Tax ld, enter "2" for more eligible of \$119,000 if ma from the number vous axis wages. | the total of both arried and have eld.) | oth) are \$1,50 ave either a volume either a volume either a volume either a volume either are expenses, for more infoigible child; the ter "1" for each applions you continue either some expenses of the expe | ther a working spouse turn of household above) to claim a credit enses, for details.) re information. child; then less "1" if | ng spouse or mo | pouse or more C D bove) E dit F s.) "1" if you | use's wages (or the total of both) are \$1,500 or less. July or less and have either a working spouse or more little tax withheld.) | A Enter "1" for yourself if no one else can claim you as a dependent |
| C Enter "than on D Enter n E Enter " F Enter " (Note. I G Child T • If you have th • If your H Add line | • You are married, have only one job, and yo • Your wages from a second job or your spouser "1" for your spouse. But, you may choose to enter "-0-" none job. (Entering "-0-" may help you avoid having too liter number of dependents (other than your spouse or yourser "1" if you will file as head of household on your tax retuer "1" if you have at least \$2,000 of child or dependent cate. Do not include child support payments. See Pub. 503, Id Tax Credit (including additional child tax credit). See Puyour total income will be less than \$65,000 (\$95,000 if mar te three to six eligible children or less "2" if you have sever your total income will be between \$65,000 and \$84,000 (\$95,000) | ouse's wa 0-" if you little tax urself) you eturn (see care explications) 3, Child Pub. 972 parried), eten or mo 00 and \$1 | wages (or the vou are marrie ax withheld.) you will claim see conditions expenses for ld and Depend 172, Child Tax ld, enter "2" for more eligible of \$119,000 if ma from the number vous axis wages. | the total of both arried and have eld.) | oth) are \$1,50 ave either a volume either a volume either a volume either a volume either are expenses, for more infoigible child; the ter "1" for each applions you continue either some expenses of the expe | ther a working spouse turn of household above) to claim a credit enses, for details.) re information. child; then less "1" if | ng spouse or mo | pouse or more C D bove) E dit F s.) "1" if you | use's wages (or the total of both) are \$1,500 or less. July or less and have either a working spouse or more little tax withheld.) | |
| B Enter " C Enter " than on D Enter n E Enter " (Note. I G Child T If you have th If your H Add line | • You are single and have only one job; or • You are married, have only one job, and yo • Your wages from a second job or your spouser "1" for your spouse. But, you may choose to enter "-0-" none job. (Entering "-0-" may help you avoid having too liter number of dependents (other than your spouse or yourser "1" if you will file as head of household on your tax retuer "1" if you have at least \$2,000 of child or dependent cate. Do not include child support payments. See Pub. 503, Ild Tax Credit (including additional child tax credit). See Puyour total income will be less than \$65,000 (\$95,000 if mare three to six eligible children or less "2" if you have sever your total income will be between \$65,000 and \$84,000 (\$95,000) | your spoouse's wa 0-" if you little tax urself) you eturn (sec care exp 3, Child Pub. 972 narried), e en or mo | pouse does n wages (or the vou are marrie ax withheld.) you will claim see conditions expenses for Id and Depend 72, Child Tax), enter "2" for more eligible of \$119,000 if ma from the number | the total of both arried and have eld.) | oth) are \$1,50 ave either a volume either a volume either a volume either a volume either are expenses, for more infoigible child; the ter "1" for each applions you continue either some expenses of the expe | ther a working spouse turn of household above) to claim a credit enses, for details.) re information. child; then less "1" if | ng spouse or mo | pouse or more C D bove) E dit F s.) "1" if you | rour spouse does not work; or use's wages (or the total of both) are \$1,500 or less. 0-" if you are married and have either a working spouse or more little tax withheld.) | Parsonal Allowances Worksheat (Keen for Vollr records) |



IDAHO STATE POLICE BUREAU OF CRIMINAL IDENTIFICATION

NON-CRIMINAL JUSTICE CRIMINAL HISTORY RECORDS CHECK REQUEST of the Idaho Central Repository of Criminal History Records



A separate form must be used for each request. Do not use staples on the forms. A \$10 processing fee must be included. Make checks payable to the Idaho State Police. A \$20.00 fee will be charged for any returned checks. Please Print clearly in blue or black ink only.

| Please provide an Io | daho Crim | REQUE inal Histo | ST ry on the individu | al na | med belov | v. |
|--|--------------|------------------|-----------------------------------|---------|---------------|---|
| Last Name First Bear | Nan | ne | Middle | | Nam Kelsey | ne |
| Alias Names (Include Maiden/prior Married Names) Bear | | l , | th (Month/day/year 20 / 1993 | Sex | Race | Social Security Number (optional) $518 - 45 - 1186$ |
| P.O. Box 1188 Address City | Twin | Falls | ID State | | | 83301 ^{Zip} |
| WAIVER Idaho law does not require a waiver. However, without a signed waiver from the subject of the record, any arrest more than 12 months old, without a disposition, cannot be given to a non-criminal justice agency. | | | | | | |
| I hereby give permission for the requester, named below concerning myself. Electronically Signed by Kelsey Bear DN: cn=Kelsey Bear,username=k.bea | | • | · | e Idaho | | Criminal Identification 2014-06-11 |
| Signature The signature date on to | he waiver m | ust be withir | n 180 days of the name | e chec | k submissior | Date 1. |
| TO BE COMPLETED BY COMPA | ANY OR P | PERSON R | EQUESTING BA | CKG | ROUND II | NFORMATION |
| Requesting Person or Company | | F | Address of Requester (Re | | | ŕ |
| Personnel Plus, Inc. | | | 111 Filer Ave, | Twin | Falls, Id | 83301 |
| Signature of Requester or Representative of Requesting Comp | pany | I | Request Date | | | |
| n. | agulta of N | on Contin | nd Doggard Consists | | | |
| Record attached No Record Found | esuits of No | | ed Record Search CI Initials ——— | | I | Date |

General Information:

Idaho law does **not** require a person to give consent, however, without a signed release from the subject of the record, any arrest more than 12 months old, **without** a disposition, cannot be given to a non-criminal justice agency.

Criminal history record information furnished as a result of a non-fingerprint based computerized search is based solely on a search of identifiers provided in the request. Be aware it is not uncommon for criminal offenders to use alias names and false dates of birth, which would adversely affect the completeness and accuracy of a non-fingerprint based search of the Idaho Central Repository of Criminal History Records. No other state or federal agency records can be searched under current law. The bureau does not telephone or fax responses. Please allow ample time for processing this request. Requests are processed on a first come basis.

The records maintained by the Idaho Bureau of Criminal Identification (BCI) are based upon the felony and serious misdemeanor arrests reported to BCI from other Idaho criminal justice agencies. If a person disputes the accuracy of information obtained, that person may challenge the information by writing to the address on this form.

Idaho code 67-3008 (6) states, "A person or private agency, or public agency, other than the department, shall not disseminate criminal history record information obtained from the department to a person or agency that is not a criminal justice agency or a court without a signed release of the subject of record or unless otherwise provided by law."

P.O. BOX 700 MERIDIAN, ID 83680-0700 - (208) 884-7130 - FAX 884-7193

I:\APP\Letters\chprequest.doc Rev 3/5/200



SAFETY POLICY STATEMENT

Personnel Plus is dedicated to ensuring a safe workplace environment for all of our employees. Our goal is to have zero on-the-job injuries. As an employee of Personnel Plus, it is essential that you are aware of and understand this goal, as well as all other Personnel Plus and jobsite safety requirements. We are committed to your safety and well-being, and you must also take personal responsibility for always conducting yourself in a safe and responsible manner. You should always think "safety first" before initiating any task. We expect you to always perform your duties in a manner that is consistent with this "zero injuries" goal. We ask that you read and understand the following safety policy. You are responsible for seeking clarification with us if any part of this policy is unclear. As an employee with our company, you will be required to acknowledge this policy and conform to its requirements.

EMPLOYEE SAFE WORK PROCEDURES

Personnel Plus strives to ensure a safe workplace for all employees and has established a goal of zero on-the-job injuries. As such, you must adhere to all workplace safety requirements. Following are general safety guidelines that you will be expected to follow:

- You should never perform a task that you believe to be unsafe, or that is beyond your physical capability. Always ask for help if needed.
- You will be required to comply with all safety policies and procedures in place at your jobsite. If any jobsite policy or procedure is unclear to you, it is your responsibility to seek clarification from your jobsite supervisor.
- Appropriate PPE (personal protective equipment) will be issued to you as needed for your assignment. You are required to use PPE correctly and at all times necessary for the task being performed.
- You may operate vehicles, equipment, or tools only if specifically authorized and trained to do so. Safety guards and devices must always be operable and in place while equipment is in use. Never use equipment, tools, or vehicles that are not in safe operating condition.
- If at any time you are asked to perform work in an unsafe manner, you are required to:
 - STOP and inform your jobsite supervisor of your safety concern
 - if asked to continue, you should request a modification to ensure safe work conditions
 - if no modification is made, you should request alternative work that you can safely perform
 - if no alternative work is available, you should immediately request to contact your Personnel Plus supervisor to discuss your safety concern
 - if no resolution is determined, you may leave your work area only after receiving authorization from your Personnel Plus or jobsite supervisor
- If you witness or experience a "near-miss incident," you must report it immediately to your jobsite and Personnel Plus supervisors so that any existing hazard can be eliminated.
- You may always contact your Personnel Plus office if you have any question or concern related to the safety of your jobsite.

INJURY OR ILLNESS REPORTING - RETURN-TO-WORK POLICIES

- 1. If you are injured in any jobsite incident, or have incurred a work-related illness at a jobsite, you must:
 - Immediately report the incident to your direct jobsite supervisor (not a co-worker).
 - Report the incident to your Personnel Plus office no later than the end of your shift that day. Go to: http://www.personnelplus-inc.com/include/content/contact.asp for Personnel Plus office contact information. In any non-emergency situation, you must contact Personnel Plus before seeking medical treatment. You can reach a representative at any time outside business hours by calling the local Personnel Plus on-call phone number.
 - Anyone experiencing a medical emergency should be immediately transported to and treated at the nearest hospital emergency room.
 - You are required to complete an incident report with the Personnel Plus office, and may be required to submit to a post-accident drug test.
- 2. Any safety incident or injury that is reported after the end of your scheduled shift on the day of occurrence may be deemed a violation of this policy and could result in your claim being denied. Personnel Plus reserves the right to investigate any claim of injury.
- 3. If you require medical care, you must be treated by a Personnel Plus-designated medical provider. You are required to view the designated medical providers for your area [available here: http://www.personnelplus-inc.com/include/content/medproviders/]. If you seek treatment from any unapproved provider, you may be responsible for payment of any unauthorized treatment costs.
- 4. If you have sought treatment from a designated provider, you should be given a form indicating your return-to-work status. You are required to provide that form to the Personnel Plus office immediately following your treatment. If your designated provider has deemed that you are unable to return to your regular work duties, you will be offered modified work if available. You should remain in contact with your Personnel Plus office on a weekly basis until released to full duty by your treating physician.
- 5. You must inform Personnel Plus in advance of all medical appointments. You are required to keep all appointments as scheduled. If you must reschedule any appointment, it must be approved in advance by Personnel Plus, unless the reschedule is a result of a medical emergency. Personnel Plus reserves the right to attend any medical visit.

I have read and understand the above policy and agree that I have viewed the list of designated medical providers for my area. I acknowledge that any failure to comply with this policy or with any client company jobsite safety requirement may be deemed a violation of this policy and may result in disciplinary action up to and including termination and can also result in the denial of worker's compensation benefits. I understand that by my compliance with safety policies and procedures and my effort to always work in a safe manner, I can help ensure my own well-being and my success at any client company jobsite and with Personnel Plus.

| Kelsey Bear | DN: cn=Kelsey Bear,username=k.bear100 Date: 2014-05-15 9:58:36 AM | | 2014-06-11 | |
|-------------|--|------|------------|--|
| Print Name | Employee Signature | Date | | |

Flectronically Signed by Kelsey Rear



Policy Statement It is the policy of Personnel Plus to maintain an alcohol and drug free workplace in accordance with the standards set by the Idaho Employers Alcohol and Drug-Free Workplace Act and it is a condition of employment with Personnel Plus that all employees comply with this policy. Personnel Plus will not hire, rehire, or retain any individual who tests positive for illegal drugs or alcohol; or who uses illegal or controlled drugs in any amount, regardless of frequency, without a medically acceptable prescription or admits use of illegal drugs or alcohol. Idaho law stipulates conditions for which an employee may be discharged for misconduct or denied employment due to testing positive for illegal drugs or alcohol. In accordance with Idaho law Personnel Plus will discharge any current employee for misconduct or deny employment to any prospective employee who tests positive or admits use to the use of illegal drugs or alcohol.

Adulterated test: The sample will be thrown away of anyone giving an adulterated test and the next test will be viewed.

<u>Conditions for testing:</u> All current Personnel Plus employees, or prospective employees, may be required to undergo a drug/alcohol test for any of the following reasons which may include, but are not limited to, the following:

A. Baseline B. Pre-employment C. Post-Accident D. Random E. Return to Duty F. Follow Up

G. Reasonable Suspicion

Requirements: You will be required to submit a urine specimen of greater than 30 ml or 80 strands of hair under reasonable and sanitary conditions for drug testing. Alcohol testing shall be done by saliva device or breath device or urine alcohol. Results of greater than .00 blood alcohol content shall be grounds for discharge. If you fail or refuse to submit a specimen within two hours, and unless you have a documented medically acceptable reason, alteration or attempt to alter a test sample, admitting use or submitting a sample that is not his/her own will be deemed in violation of this policy and discharged for misconduct or denied employment.

<u>Collection</u>: Upon returning the specimen to the technician it will be checked for contamination, dilution and correct temperature. Reasonable quality assurance standards will be maintained throughout the collection, assay, and shipping process to ensure non-adulteration of specimens, containers or devices. The specimen will be initially tested utilizing a scientifically accepted one-step in vitro immunoassay device for qualitative determination of the presence of the following drugs of abuse in concentrations greater than:

| THC | 50ng/ml | Amphetamine | 1000ng/ml |
|-----------------|------------|--------------------------|------------|
| Phencyclidine | 25ng/ml | Barbiturates | 300 ng/ml |
| Opiate | 300ng/ml | Benzodiazepine | 300 ng/ml |
| Cocaine | 300ng/ml | Methadone | 300 ng/ml |
| Methamphetamine | 1,000ng/ml | Tricyclic antidepressant | 1000 ng/ml |

The device will be labeled with donor name, time and date and will be photocopied on the face of the results form to record the results. Personnel Plus routinely tests for the preceding drugs and threshold levels, and depending on employment situations that may arise, reserves the right to test for other drugs and/or quantities as necessary. The employee will be advised of the nature of such other tests at the time of testing.

Positive Immunoassay Result: Positive immunoassay results will be interpreted as presumed positive. Confirmatory testing is required unless the donor admits use. The assayed specimen will be packaged and sealed for shipment to a SAMSHA certified laboratory in accordance with acknowledged chain of custody standards. Employees presenting presumed positive results will be removed from active duty pending confirmatory test results. In the event of a presumed positive assay, the donor will be given the test result, including the type of substance involved and will be given an opportunity to decline confirmatory testing due to admitted use or accept sending specimen for confirmatory testing at a certified lab.

Confirmatory Lab Test: A SAMSHA certified laboratory will perform a Gas chromatography/mass spectrometry (CG/MS) test to confirm or disprove the in-vitro result. The employee will have an opportunity to discuss positive test results with the laboratory's medical review officer or other qualified person. The employee or prospective employee who has a positive test result may request that the same sample be retested by a mutually agreed laboratory. A request for a retest must be done within (7) working days from the date of the first confirmed positive test notification and may be paid for by the employee or prospective employee requesting the test. If the retest results in a negative test outcome, the private employer will reimburse the cost of the retest, compensate the employee for his time if suspended without pay, or if terminated solely because of the positive test, the employee shall be reinstated with back pay.

Negative test: Negative immunoassay results will be accepted as negative. No action will be taken.

<u>Confidentiality</u>: Personnel Plus will only use information obtained from a substance abuse test in a lawful manner to assure confidentiality of donor records.

<u>Acknowledgement</u>: By signing this form, the undersigned acknowledges that he/she understands the Alcohol and Drug-Free Workplace Policy of Personnel Plus Inc. and agrees to comply with the terms of this policy.

| EMPLÓYEE (PRINT) | EMPLOYEE SIGNATURE | DATE | |
|------------------|--|------------|--|
| Kelsev Bear | DN: cn=Kelsey Bear,username=k.bear100 Date: 2014-05-15 9:58:36 AM | 2014-06-11 | |



1. Introduction

Employees of Personnel Plus have the right to expect a workplace and work environment free from sexual harassment. Employees are expected to conduct themselves in a manner that does not constitute sexual harassment of a fellow employee, client or resident.

2. Coverage

- a. This sexual harassment policy covers all persons employed by Personnel Plus, regardless of classification or employment status. Any complaint against an employee or agent of the company is covered by this policy.
- b. A complaint against an employee is subject to compliance with Personnel Plus Policies and Procedures. (Policy 2. and 12.)

3. Definition

Requests for sexual favors and/or other unwelcome verbal or physical conduct of a sexual nature by an employee constitute sexual harassment when:

- A. Submission to such conduct is made either explicitly or implicitly a term or condition of an individual's employment, or
- B. Submission to or rejection of such conduct by an individual is used as the basis for employment or decisions affecting that individual, or
- C. Such conduct has the purpose or effect of creating an intimidating, offensive, or hostile environment, or
- D. Such conduct has the purpose or effect of unreasonably interfering with an individual's performance.

4. Consequences

In determining whether alleged conduct constitutes sexual harassment, the record as a whole will be considered, as well as the totality of the circumstances, such as the nature of the alleged conduct and the context in which it occurred. Any employee found to be in violation of this policy will be disciplined in accordance with Personnel Plus Policy 12 - Disciplinary Action, Suspension, and Dismissal.

5. Retaliation

Retaliation by any employee of Personnel Plus against an employee for responsibly using this policy and its procedures is grounds for appropriate disciplinary action.

6. False Allegations

Failure to substantiate a complaint is not equivalent to a false allegation. However, a false allegation brought forth with malicious intent or without regard for truth, will subject the complainant to disciplinary action.

The undersigned acknowledges that they have read and fully understands this policy:

| EMPLÓYEE (PRINT) | EMPLOYEE SIGNATURE | DATE | |
|------------------|--|------------|--|
| Kelsev Bear | DN: cn=Kelsey Bear,username=k.bear100 Date: 2014-05-15 9:58:36 AM | 2014-06-11 | |

Flactronically Signed by Kalsey Rear



Dear employer: We are requesting a reference check on the following employee. All replies will be kept strictly confidential. We thank you in advance for your prompt response!

| Date: | | | | | |
|---|--|---|--|--|----------|
| To: | | | | | |
| Name of Applicant: | Kelsey Bear | | | | |
| SS#: | 518 45 1186 | | _ | | |
| Did the employee was Did he/she perform | s: b title: | he job? | Yes Ye | No | Comments |
| Would you be in | nterested in learning more al | , | , | | |
| Please return and m | TI nail this completed form to: Or fax to: | hank you for your tin Personnel Plus, 117 Falls, Id 83301 (208) 733-7362 | | e, Twin | |

APPLICANT'S STATEMENT

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this application for employment as may be necessary in arriving at an employment decision. I hereby understand and acknowledge that, unless otherwise defined by applicable law, any employment relationship with this organization is of an "at will" nature, which means that the Employee may resign at any time and the Employer may discharge Employee at any time with or without cause. It is further understood that this "at will" employment relationship may not be changed by any written document or by conduct unless such change is specifically acknowledged in writing by an authorized executive of this organization. In the event of employment, I understand that false or misleading information given in my application or interview(s) may result in discharge. I also understand that I am required to abide by all policies, rules and regulations of the employer.

| Kelsey Bear | Electronically Signed by Kelsey Bear DN: cn=Kelsey Bear,username=k.bear100 Date: 2014-05-15 9:58:36 AM | 2014-06-11 |
|------------------|--|------------|
| EMPLOYEE (PRINT) | EMPLOYEE SIGNATURE | DATE |