



New Variable Hour Employee # \_\_\_\_\_ Start Date \_\_\_\_\_

EMPLOYEE TO COMPLETE

Date \_\_\_\_\_ Social Security # \_\_\_\_\_

Name \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Date of Birth \_\_\_\_\_ Phone # \_\_\_\_\_ Cell # \_\_\_\_\_

Email \_\_\_\_\_

Emergency Contact \_\_\_\_\_

Relationship \_\_\_\_\_ Phone # \_\_\_\_\_

Are you currently affiliated with a Union? \_\_\_\_\_

If yes, which one? \_\_\_\_\_

FOREMAN TO COMPLETE

Employee Class

<input type="checkbox"/>	Bricklayer
<input type="checkbox"/>	Apprentice
<input type="checkbox"/>	Carpenter
<input type="checkbox"/>	Welder
<input type="checkbox"/>	Laborer Refractory
<input type="checkbox"/>	Laborer Mechanical

Pay Scale

Rate	<input type="text"/>	/HOUR
Per Diem	100.00	/DAY
Travel	<input type="text"/>	/HOUR
Mileage	.27	/MILE

SPECIAL INSTRUCTIONS

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

FOREMAN MUST ENSURE THAT EACH SECTION IS COMPLETED IN ITS ENTIRETY BEFORE SUBMITTING TO PAYROLL

FOREMAN SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

EMPLOYEE SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

MANAGER SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

VP SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**Employee's Withholding Certificate****2021**

- ▶ **Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay.**  
 ▶ **Give Form W-4 to your employer.**  
 ▶ **Your withholding is subject to review by the IRS.**

**Step 1:  
Enter  
Personal  
Information**

(a) First name and middle initial	Last name	(b) Social security number
Address		▶ Does your name match the name on your social security card? If not, to ensure you get credit for your earnings, contact SSA at 800-772-1213 or go to <a href="http://www.ssa.gov">www.ssa.gov</a> .
City or town, state, and ZIP code		
(c) <input type="checkbox"/> Single or Married filing separately <input type="checkbox"/> Married filing jointly or Qualifying widow(er) <input type="checkbox"/> Head of household (Check only if you're unmarried and pay more than half the costs of keeping up a home for yourself and a qualifying individual.)		

**Complete Steps 2–4 ONLY if they apply to you; otherwise, skip to Step 5.** See page 2 for more information on each step, who can claim exemption from withholding, when to use the estimator at [www.irs.gov/W4App](http://www.irs.gov/W4App), and privacy.

**Step 2:  
Multiple Jobs  
or Spouse  
Works**

Complete this step if you (1) hold more than one job at a time, or (2) are married filing jointly and your spouse also works. The correct amount of withholding depends on income earned from all of these jobs.

Do **only one** of the following.

- (a) Use the estimator at [www.irs.gov/W4App](http://www.irs.gov/W4App) for most accurate withholding for this step (and Steps 3–4); **or**  
 (b) Use the Multiple Jobs Worksheet on page 3 and enter the result in Step 4(c) below for roughly accurate withholding; **or**  
 (c) If there are only two jobs total, you may check this box. Do the same on Form W-4 for the other job. This option is accurate for jobs with similar pay; otherwise, more tax than necessary may be withheld . . . . . ▶ ☐

**TIP:** To be accurate, submit a 2021 Form W-4 for all other jobs. If you (or your spouse) have self-employment income, including as an independent contractor, use the estimator.

**Complete Steps 3–4(b) on Form W-4 for only ONE of these jobs.** Leave those steps blank for the other jobs. (Your withholding will be most accurate if you complete Steps 3–4(b) on the Form W-4 for the highest paying job.)

**Step 3:  
Claim  
Dependents**

If your total income will be \$200,000 or less (\$400,000 or less if married filing jointly):

Multiply the number of qualifying children under age 17 by \$2,000 ▶ \$

Multiply the number of other dependents by \$500 . . . . . ▶ \$

Add the amounts above and enter the total here . . . . . **3** \$

**Step 4  
(optional):  
Other  
Adjustments**

(a) **Other income (not from jobs).** If you want tax withheld for other income you expect this year that won't have withholding, enter the amount of other income here. This may include interest, dividends, and retirement income . . . . . **4(a)** \$

(b) **Deductions.** If you expect to claim deductions other than the standard deduction and want to reduce your withholding, use the Deductions Worksheet on page 3 and enter the result here . . . . . **4(b)** \$

(c) **Extra withholding.** Enter any additional tax you want withheld each pay period . . . **4(c)** \$

**Step 5:  
Sign  
Here**

Under penalties of perjury, I declare that this certificate, to the best of my knowledge and belief, is true, correct, and complete.

▶ **Employee's signature** (This form is not valid unless you sign it.)

▶ **Date**

**Employers  
Only**

Employer's name and address  
 F.S. Sperry Co., Inc.  
 1907 Vanderhorn Drive  
 Memphis, TN 38134

**First date of  
employment**

Employer identification  
 number (EIN)  
 62-0723179

## General Instructions

### Future Developments

For the latest information about developments related to Form W-4, such as legislation enacted after it was published, go to [www.irs.gov/FormW4](http://www.irs.gov/FormW4).

### Purpose of Form

Complete Form W-4 so that your employer can withhold the correct federal income tax from your pay. If too little is withheld, you will generally owe tax when you file your tax return and may owe a penalty. If too much is withheld, you will generally be due a refund. Complete a new Form W-4 when changes to your personal or financial situation would change the entries on the form. For more information on withholding and when you must furnish a new Form W-4, see Pub. 505, Tax Withholding and Estimated Tax.

**Exemption from withholding.** You may claim exemption from withholding for 2021 if you meet both of the following conditions: you had no federal income tax liability in 2020 **and** you expect to have no federal income tax liability in 2021. You had no federal income tax liability in 2020 if (1) your total tax on line 24 on your 2020 Form 1040 or 1040-SR is zero (or less than the sum of lines 27, 28, 29, and 30), or (2) you were not required to file a return because your income was below the filing threshold for your correct filing status. If you claim exemption, you will have no income tax withheld from your paycheck and may owe taxes and penalties when you file your 2021 tax return. To claim exemption from withholding, certify that you meet both of the conditions above by writing "Exempt" on Form W-4 in the space below Step 4(c). Then, complete Steps 1(a), 1(b), and 5. Do not complete any other steps. You will need to submit a new Form W-4 by February 15, 2022.

**Your privacy.** If you prefer to limit information provided in Steps 2 through 4, use the online estimator, which will also increase accuracy.

As an alternative to the estimator: if you have concerns with Step 2(c), you may choose Step 2(b); if you have concerns with Step 4(a), you may enter an additional amount you want withheld per pay period in Step 4(c). If this is the only job in your household, you may instead check the box in Step 2(c), which will increase your withholding and significantly reduce your paycheck (often by thousands of dollars over the year).

**When to use the estimator.** Consider using the estimator at [www.irs.gov/W4App](http://www.irs.gov/W4App) if you:

1. Expect to work only part of the year;
2. Have dividend or capital gain income, or are subject to additional taxes, such as Additional Medicare Tax;
3. Have self-employment income (see below); or
4. Prefer the most accurate withholding for multiple job situations.

**Self-employment.** Generally, you will owe both income and self-employment taxes on any self-employment income you receive separate from the wages you receive as an employee. If you want to pay these taxes through withholding from your wages, use the estimator at [www.irs.gov/W4App](http://www.irs.gov/W4App) to figure the amount to have withheld.

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

## Specific Instructions

**Step 1(c).** Check your anticipated filing status. This will determine the standard deduction and tax rates used to compute your withholding.

**Step 2.** Use this step if you (1) have more than one job at the same time, or (2) are married filing jointly and you and your spouse both work.

Option **(a)** most accurately calculates the additional tax you need to have withheld, while option **(b)** does so with a little less accuracy.

If you (and your spouse) have a total of only two jobs, you may instead check the box in option **(c)**. The box must also be checked on the Form W-4 for the other job. If the box is checked, the standard deduction and tax brackets will be cut in half for each job to calculate withholding. This option is roughly accurate for jobs with similar pay; otherwise, more tax than necessary may be withheld, and this extra amount will be larger the greater the difference in pay is between the two jobs.



**Multiple jobs.** Complete Steps 3 through 4(b) on only one Form W-4. Withholding will be most accurate if you do this on the Form W-4 for the highest paying job.

**Step 3.** This step provides instructions for determining the amount of the child tax credit and the credit for other dependents that you may be able to claim when you file your tax return. To qualify for the child tax credit, the child must be under age 17 as of December 31, must be your dependent who generally lives with you for more than half the year, and must have the required social security number. You may be able to claim a credit for other dependents for whom a child tax credit can't be claimed, such as an older child or a qualifying relative. For additional eligibility requirements for these credits, see Pub. 972, Child Tax Credit and Credit for Other Dependents. You can also include **other tax credits** in this step, such as education tax credits and the foreign tax credit. To do so, add an estimate of the amount for the year to your credits for dependents and enter the total amount in Step 3. Including these credits will increase your paycheck and reduce the amount of any refund you may receive when you file your tax return.

### Step 4 (optional).

**Step 4(a).** Enter in this step the total of your other estimated income for the year, if any. You shouldn't include income from any jobs or self-employment. If you complete Step 4(a), you likely won't have to make estimated tax payments for that income. If you prefer to pay estimated tax rather than having tax on other income withheld from your paycheck, see Form 1040-ES, Estimated Tax for Individuals.

**Step 4(b).** Enter in this step the amount from the Deductions Worksheet, line 5, if you expect to claim deductions other than the basic standard deduction on your 2021 tax return and want to reduce your withholding to account for these deductions. This includes both itemized deductions and other deductions such as for student loan interest and IRAs.

**Step 4(c).** Enter in this step any additional tax you want withheld from your pay **each pay period**, including any amounts from the Multiple Jobs Worksheet, line 4. Entering an amount here will reduce your paycheck and will either increase your refund or reduce any amount of tax that you owe.

**Step 2(b)—Multiple Jobs Worksheet** (Keep for your records.)

If you choose the option in Step 2(b) on Form W-4, complete this worksheet (which calculates the total extra tax for all jobs) on **only ONE** Form W-4. Withholding will be most accurate if you complete the worksheet and enter the result on the Form W-4 for the highest paying job.

**Note:** If more than one job has annual wages of more than \$120,000 or there are more than three jobs, see Pub. 505 for additional tables; or, you can use the online withholding estimator at [www.irs.gov/W4App](http://www.irs.gov/W4App).

- 1 Two jobs.** If you have two jobs or you're married filing jointly and you and your spouse each have one job, find the amount from the appropriate table on page 4. Using the "Higher Paying Job" row and the "Lower Paying Job" column, find the value at the intersection of the two household salaries and enter that value on line 1. Then, **skip** to line 3 . . . . . **1** \$ \_\_\_\_\_
- 2 Three jobs.** If you and/or your spouse have three jobs at the same time, complete lines 2a, 2b, and 2c below. Otherwise, skip to line 3.
  - a** Find the amount from the appropriate table on page 4 using the annual wages from the highest paying job in the "Higher Paying Job" row and the annual wages for your next highest paying job in the "Lower Paying Job" column. Find the value at the intersection of the two household salaries and enter that value on line 2a . . . . . **2a** \$ \_\_\_\_\_
  - b** Add the annual wages of the two highest paying jobs from line 2a together and use the total as the wages in the "Higher Paying Job" row and use the annual wages for your third job in the "Lower Paying Job" column to find the amount from the appropriate table on page 4 and enter this amount on line 2b . . . . . **2b** \$ \_\_\_\_\_
  - c** Add the amounts from lines 2a and 2b and enter the result on line 2c . . . . . **2c** \$ \_\_\_\_\_
- 3** Enter the number of pay periods per year for the highest paying job. For example, if that job pays weekly, enter 52; if it pays every other week, enter 26; if it pays monthly, enter 12, etc. . . . . **3** \_\_\_\_\_
- 4 Divide** the annual amount on line 1 or line 2c by the number of pay periods on line 3. Enter this amount here and in **Step 4(c)** of Form W-4 for the highest paying job (along with any other additional amount you want withheld) . . . . . **4** \$ \_\_\_\_\_

**Step 4(b)—Deductions Worksheet** (Keep for your records.)

- 1** Enter an estimate of your 2021 itemized deductions (from Schedule A (Form 1040)). Such deductions may include qualifying home mortgage interest, charitable contributions, state and local taxes (up to \$10,000), and medical expenses in excess of 7.5% of your income . . . . . **1** \$ \_\_\_\_\_
- 2** Enter:  $\left\{ \begin{array}{l} \bullet \$25,100 \text{ if you're married filing jointly or qualifying widow(er)} \\ \bullet \$18,800 \text{ if you're head of household} \\ \bullet \$12,550 \text{ if you're single or married filing separately} \end{array} \right\}$  . . . . . **2** \$ \_\_\_\_\_
- 3** If line 1 is greater than line 2, subtract line 2 from line 1 and enter the result here. If line 2 is greater than line 1, enter "-0-" . . . . . **3** \$ \_\_\_\_\_
- 4** Enter an estimate of your student loan interest, deductible IRA contributions, and certain other adjustments (from Part II of Schedule 1 (Form 1040)). See Pub. 505 for more information . . . . . **4** \$ \_\_\_\_\_
- 5 Add** lines 3 and 4. Enter the result here and in **Step 4(b)** of Form W-4 . . . . . **5** \$ \_\_\_\_\_

**Privacy Act and Paperwork Reduction Act Notice.** We ask for the information on this form to carry out the Internal Revenue laws of the United States. Internal Revenue Code sections 3402(f)(2) and 6109 and their regulations require you to provide this information; your employer uses it to determine your federal income tax withholding. Failure to provide a properly completed form will result in your being treated as a single person with no other entries on the form; providing fraudulent information may subject you to penalties. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation; to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their tax laws; and to the Department of Health and Human Services for use in the National Directory of New Hires. We may also disclose this information to other countries under a tax treaty, to federal and state agencies to enforce federal nontax criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism.

You are not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by Code section 6103.

The average time and expenses required to complete and file this form will vary depending on individual circumstances. For estimated averages, see the instructions for your income tax return.

If you have suggestions for making this form simpler, we would be happy to hear from you. See the instructions for your income tax return.

**Married Filing Jointly or Qualifying Widow(er)**

Higher Paying Job Annual Taxable Wage & Salary	Lower Paying Job Annual Taxable Wage & Salary											
	\$0 - 9,999	\$10,000 - 19,999	\$20,000 - 29,999	\$30,000 - 39,999	\$40,000 - 49,999	\$50,000 - 59,999	\$60,000 - 69,999	\$70,000 - 79,999	\$80,000 - 89,999	\$90,000 - 99,999	\$100,000 - 109,999	\$110,000 - 120,000
\$0 - 9,999	\$0	\$190	\$850	\$890	\$1,020	\$1,020	\$1,020	\$1,020	\$1,020	\$1,100	\$1,870	\$1,870
\$10,000 - 19,999	190	1,190	1,890	2,090	2,220	2,220	2,220	2,220	2,300	3,300	4,070	4,070
\$20,000 - 29,999	850	1,890	2,750	2,950	3,080	3,080	3,080	3,160	4,160	5,160	5,930	5,930
\$30,000 - 39,999	890	2,090	2,950	3,150	3,280	3,280	3,360	4,360	5,360	6,360	7,130	7,130
\$40,000 - 49,999	1,020	2,220	3,080	3,280	3,410	3,490	4,490	5,490	6,490	7,490	8,260	8,260
\$50,000 - 59,999	1,020	2,220	3,080	3,280	3,490	4,490	5,490	6,490	7,490	8,490	9,260	9,260
\$60,000 - 69,999	1,020	2,220	3,080	3,360	4,490	5,490	6,490	7,490	8,490	9,490	10,260	10,260
\$70,000 - 79,999	1,020	2,220	3,160	4,360	5,490	6,490	7,490	8,490	9,490	10,490	11,260	11,260
\$80,000 - 99,999	1,020	3,150	5,010	6,210	7,340	8,340	9,340	10,340	11,340	12,340	13,260	13,460
\$100,000 - 149,999	1,870	4,070	5,930	7,130	8,260	9,320	10,520	11,720	12,920	14,120	15,090	15,290
\$150,000 - 239,999	2,040	4,440	6,500	7,900	9,230	10,430	11,630	12,830	14,030	15,230	16,190	16,400
\$240,000 - 259,999	2,040	4,440	6,500	7,900	9,230	10,430	11,630	12,830	14,030	15,270	17,040	18,040
\$260,000 - 279,999	2,040	4,440	6,500	7,900	9,230	10,430	11,630	12,870	14,870	16,870	18,640	19,640
\$280,000 - 299,999	2,040	4,440	6,500	7,900	9,230	10,470	12,470	14,470	16,470	18,470	20,240	21,240
\$300,000 - 319,999	2,040	4,440	6,500	7,940	10,070	12,070	14,070	16,070	18,070	20,070	21,840	22,840
\$320,000 - 364,999	2,720	5,920	8,780	10,980	13,110	15,110	17,110	19,110	21,190	23,490	25,560	26,860
\$365,000 - 524,999	2,970	6,470	9,630	12,130	14,560	16,860	19,160	21,460	23,760	26,060	28,130	29,430
\$525,000 and over	3,140	6,840	10,200	12,900	15,530	18,030	20,530	23,030	25,530	28,030	30,300	31,800

**Single or Married Filing Separately**

Higher Paying Job Annual Taxable Wage & Salary	Lower Paying Job Annual Taxable Wage & Salary											
	\$0 - 9,999	\$10,000 - 19,999	\$20,000 - 29,999	\$30,000 - 39,999	\$40,000 - 49,999	\$50,000 - 59,999	\$60,000 - 69,999	\$70,000 - 79,999	\$80,000 - 89,999	\$90,000 - 99,999	\$100,000 - 109,999	\$110,000 - 120,000
\$0 - 9,999	\$440	\$940	\$1,020	\$1,020	\$1,410	\$1,870	\$1,870	\$1,870	\$1,870	\$2,030	\$2,040	\$2,040
\$10,000 - 19,999	940	1,540	1,620	2,020	3,020	3,470	3,470	3,470	3,640	3,840	3,840	3,840
\$20,000 - 29,999	1,020	1,620	2,100	3,100	4,100	4,550	4,550	4,720	4,920	5,120	5,120	5,120
\$30,000 - 39,999	1,020	2,020	3,100	4,100	5,100	5,550	5,720	5,920	6,120	6,320	6,320	6,320
\$40,000 - 59,999	1,870	3,470	4,550	5,550	6,690	7,340	7,540	7,740	7,940	8,140	8,150	8,150
\$60,000 - 79,999	1,870	3,470	4,690	5,890	7,090	7,740	7,940	8,140	8,340	8,540	9,190	9,990
\$80,000 - 99,999	2,000	3,810	5,090	6,290	7,490	8,140	8,340	8,540	9,390	10,390	11,190	11,990
\$100,000 - 124,999	2,040	3,840	5,120	6,320	7,520	8,360	9,360	10,360	11,360	12,360	13,410	14,510
\$125,000 - 149,999	2,040	3,840	5,120	6,910	8,910	10,360	11,360	12,450	13,750	15,050	16,160	17,260
\$150,000 - 174,999	2,220	4,830	6,910	8,910	10,910	12,600	13,900	15,200	16,500	17,800	18,910	20,010
\$175,000 - 199,999	2,720	5,320	7,490	9,790	12,090	13,850	15,150	16,450	17,750	19,050	20,150	21,250
\$200,000 - 249,999	2,970	5,880	8,260	10,560	12,860	14,620	15,920	17,220	18,520	19,820	20,930	22,030
\$250,000 - 399,999	2,970	5,880	8,260	10,560	12,860	14,620	15,920	17,220	18,520	19,820	20,930	22,030
\$400,000 - 449,999	2,970	5,880	8,260	10,560	12,860	14,620	15,920	17,220	18,520	19,910	21,220	22,520
\$450,000 and over	3,140	6,250	8,830	11,330	13,830	15,790	17,290	18,790	20,290	21,790	23,100	24,400

**Head of Household**

Higher Paying Job Annual Taxable Wage & Salary	Lower Paying Job Annual Taxable Wage & Salary											
	\$0 - 9,999	\$10,000 - 19,999	\$20,000 - 29,999	\$30,000 - 39,999	\$40,000 - 49,999	\$50,000 - 59,999	\$60,000 - 69,999	\$70,000 - 79,999	\$80,000 - 89,999	\$90,000 - 99,999	\$100,000 - 109,999	\$110,000 - 120,000
\$0 - 9,999	\$0	\$820	\$930	\$1,020	\$1,020	\$1,020	\$1,420	\$1,870	\$1,870	\$1,910	\$2,040	\$2,040
\$10,000 - 19,999	820	1,900	2,130	2,220	2,220	2,620	3,620	4,070	4,110	4,310	4,440	4,440
\$20,000 - 29,999	930	2,130	2,360	2,450	2,850	3,850	4,850	5,340	5,540	5,740	5,870	5,870
\$30,000 - 39,999	1,020	2,220	2,450	2,940	3,940	4,940	5,980	6,630	6,830	7,030	7,160	7,160
\$40,000 - 59,999	1,020	2,470	3,700	4,790	5,800	7,000	8,200	8,850	9,050	9,250	9,380	9,380
\$60,000 - 79,999	1,870	4,070	5,310	6,600	7,800	9,000	10,200	10,850	11,050	11,250	11,520	12,320
\$80,000 - 99,999	1,880	4,280	5,710	7,000	8,200	9,400	10,600	11,250	11,590	12,590	13,520	14,320
\$100,000 - 124,999	2,040	4,440	5,870	7,160	8,360	9,560	11,240	12,690	13,690	14,690	15,670	16,770
\$125,000 - 149,999	2,040	4,440	5,870	7,240	9,240	11,240	13,240	14,690	15,890	17,190	18,420	19,520
\$150,000 - 174,999	2,040	4,920	7,150	9,240	11,240	13,290	15,590	17,340	18,640	19,940	21,170	22,270
\$175,000 - 199,999	2,720	5,920	8,150	10,440	12,740	15,040	17,340	19,090	20,390	21,690	22,920	24,020
\$200,000 - 249,999	2,970	6,470	9,000	11,390	13,690	15,990	18,290	20,040	21,340	22,640	23,880	24,980
\$250,000 - 349,999	2,970	6,470	9,000	11,390	13,690	15,990	18,290	20,040	21,340	22,640	23,880	24,980
\$350,000 - 449,999	2,970	6,470	9,000	11,390	13,690	15,990	18,290	20,040	21,340	22,640	23,900	25,200
\$450,000 and over	3,140	6,840	9,570	12,160	14,660	17,160	19,660	21,610	23,110	24,610	26,050	27,350





**Employment Eligibility Verification**  
**Department of Homeland Security**  
U.S. Citizenship and Immigration Services

**USCIS**  
**Form I-9**  
OMB No. 1615-0047  
Expires 10/31/2022

► **START HERE:** Read instructions carefully before completing this form. The instructions must be available, either in paper or electronically, during completion of this form. Employers are liable for errors in the completion of this form.

**ANTI-DISCRIMINATION NOTICE:** It is illegal to discriminate against work-authorized individuals. Employers **CANNOT** specify which document(s) an employee may present to establish employment authorization and identity. The refusal to hire or continue to employ an individual because the documentation presented has a future expiration date may also constitute illegal discrimination.

**Section 1. Employee Information and Attestation** *(Employees must complete and sign Section 1 of Form I-9 no later than the first day of employment, but not before accepting a job offer.)*

Last Name (Family Name)		First Name (Given Name)		Middle Initial	Other Last Names Used (if any)	
Address (Street Number and Name)			Apt. Number	City or Town		State ZIP Code
Date of Birth (mm/dd/yyyy)	U.S. Social Security Number [ ][ ][ ] - [ ][ ] - [ ][ ][ ][ ]		Employee's E-mail Address		Employee's Telephone Number	

I am aware that federal law provides for imprisonment and/or fines for false statements or use of false documents in connection with the completion of this form.

I attest, under penalty of perjury, that I am (check one of the following boxes):

<input type="checkbox"/> 1. A citizen of the United States	<div>QR Code - Section 1 Do Not Write In This Space</div>
<input type="checkbox"/> 2. A noncitizen national of the United States (See instructions)	
<input type="checkbox"/> 3. A lawful permanent resident (Alien Registration Number/USCIS Number): _____	
<input type="checkbox"/> 4. An alien authorized to work until (expiration date, if applicable, mm/dd/yyyy): _____ Some aliens may write "N/A" in the expiration date field. (See instructions)  Aliens authorized to work must provide only one of the following document numbers to complete Form I-9: An Alien Registration Number/USCIS Number OR Form I-94 Admission Number OR Foreign Passport Number.  1. Alien Registration Number/USCIS Number: _____ <b>OR</b> 2. Form I-94 Admission Number: _____ <b>OR</b> 3. Foreign Passport Number: _____ Country of Issuance: _____	

Signature of Employee	Today's Date (mm/dd/yyyy)
-----------------------	---------------------------

**Preparer and/or Translator Certification (check one):**

☐ I did not use a preparer or translator. ☐ A preparer(s) and/or translator(s) assisted the employee in completing Section 1.  
*(Fields below must be completed and signed when preparers and/or translators assist an employee in completing Section 1.)*

I attest, under penalty of perjury, that I have assisted in the completion of Section 1 of this form and that to the best of my knowledge the information is true and correct.

Signature of Preparer or Translator		Today's Date (mm/dd/yyyy)	
Last Name (Family Name)		First Name (Given Name)	
Address (Street Number and Name)		City or Town	State ZIP Code



Employer Completes Next Page





**Employment Eligibility Verification**  
**Department of Homeland Security**  
U.S. Citizenship and Immigration Services

**USCIS**  
**Form I-9**  
OMB No. 1615-0047  
Expires 10/31/2022

**Section 2. Employer or Authorized Representative Review and Verification**

(Employers or their authorized representative must complete and sign Section 2 within 3 business days of the employee's first day of employment. You must physically examine one document from List A OR a combination of one document from List B and one document from List C as listed on the "Lists of Acceptable Documents.")

<b>Employee Info from Section 1</b>	<b>Last Name (Family Name)</b>	<b>First Name (Given Name)</b>	<b>M.I.</b>	<b>Citizenship/Immigration Status</b>
<b>List A</b> <b>Identity and Employment Authorization</b>	<b>OR</b>	<b>List B</b> <b>Identity</b>	<b>AND</b>	<b>List C</b> <b>Employment Authorization</b>
<b>Document Title</b>		<b>Document Title</b>		<b>Document Title</b>
<b>Issuing Authority</b>		<b>Issuing Authority</b>		<b>Issuing Authority</b>
<b>Document Number</b>		<b>Document Number</b>		<b>Document Number</b>
<b>Expiration Date (if any) (mm/dd/yyyy)</b>		<b>Expiration Date (if any) (mm/dd/yyyy)</b>		<b>Expiration Date (if any) (mm/dd/yyyy)</b>
<b>Document Title</b>		<div><b>Additional Information</b></div> <div>QR Code - Sections 2 &amp; 3 Do Not Write In This Space</div>		
<b>Issuing Authority</b>				
<b>Document Number</b>				
<b>Expiration Date (if any) (mm/dd/yyyy)</b>				
<b>Document Title</b>				
<b>Issuing Authority</b>				
<b>Document Number</b>				
<b>Expiration Date (if any) (mm/dd/yyyy)</b>				
<b>Document Title</b>				
<b>Issuing Authority</b>				

**Certification:** I attest, under penalty of perjury, that (1) I have examined the document(s) presented by the above-named employee, (2) the above-listed document(s) appear to be genuine and to relate to the employee named, and (3) to the best of my knowledge the employee is authorized to work in the United States.

**The employee's first day of employment (mm/dd/yyyy):** \_\_\_\_\_ **(See instructions for exemptions)**

<b>Signature of Employer or Authorized Representative</b>	<b>Today's Date (mm/dd/yyyy)</b>	<b>Title of Employer or Authorized Representative</b>		
<b>Last Name of Employer or Authorized Representative</b>	<b>First Name of Employer or Authorized Representative</b>	<b>Employer's Business or Organization Name</b>		
<b>Employer's Business or Organization Address (Street Number and Name)</b>	<b>City or Town</b>	<b>State</b>	<b>ZIP Code</b>	

**Section 3. Reverification and Rehires** (To be completed and signed by employer or authorized representative.)

<b>A. New Name (if applicable)</b>			<b>B. Date of Rehire (if applicable)</b>	
<b>Last Name (Family Name)</b>	<b>First Name (Given Name)</b>	<b>Middle Initial</b>	<b>Date (mm/dd/yyyy)</b>	

**C.** If the employee's previous grant of employment authorization has expired, provide the information for the document or receipt that establishes continuing employment authorization in the space provided below.

<b>Document Title</b>	<b>Document Number</b>	<b>Expiration Date (if any) (mm/dd/yyyy)</b>
-----------------------	------------------------	--

**I attest, under penalty of perjury, that to the best of my knowledge, this employee is authorized to work in the United States, and if the employee presented document(s), the document(s) I have examined appear to be genuine and to relate to the individual.**

<b>Signature of Employer or Authorized Representative</b>	<b>Today's Date (mm/dd/yyyy)</b>	<b>Name of Employer or Authorized Representative</b>
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## LISTS OF ACCEPTABLE DOCUMENTS

### All documents must be UNEXPIRED

Employees may present one selection from List A  
or a combination of one selection from List B and one selection from List C.

<b>LIST A</b> <b>Documents that Establish Both Identity and Employment Authorization</b>	<b>OR</b>	<b>LIST B</b> <b>Documents that Establish Identity</b>	<b>AND</b> <b>LIST C</b> <b>Documents that Establish Employment Authorization</b>
<ol style="list-style-type: none"> <li>1. U.S. Passport or U.S. Passport Card</li> <li>2. Permanent Resident Card or Alien Registration Receipt Card (Form I-551)</li> <li>3. Foreign passport that contains a temporary I-551 stamp or temporary I-551 printed notation on a machine-readable immigrant visa</li> <li>4. Employment Authorization Document that contains a photograph (Form I-766)</li> <li>5. For a nonimmigrant alien authorized to work for a specific employer because of his or her status:               <ol style="list-style-type: none"> <li>a. Foreign passport; and</li> <li>b. Form I-94 or Form I-94A that has the following:                   <ol style="list-style-type: none"> <li>(1) The same name as the passport; and</li> <li>(2) An endorsement of the alien's nonimmigrant status as long as that period of endorsement has not yet expired and the proposed employment is not in conflict with any restrictions or limitations identified on the form.</li> </ol> </li> </ol> </li> <li>6. Passport from the Federated States of Micronesia (FSM) or the Republic of the Marshall Islands (RMI) with Form I-94 or Form I-94A indicating nonimmigrant admission under the Compact of Free Association Between the United States and the FSM or RMI</li> </ol>		<ol style="list-style-type: none"> <li>1. Driver's license or ID card issued by a State or outlying possession of the United States provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address</li> <li>2. ID card issued by federal, state or local government agencies or entities, provided it contains a photograph or information such as name, date of birth, gender, height, eye color, and address</li> <li>3. School ID card with a photograph</li> <li>4. Voter's registration card</li> <li>5. U.S. Military card or draft record</li> <li>6. Military dependent's ID card</li> <li>7. U.S. Coast Guard Merchant Mariner Card</li> <li>8. Native American tribal document</li> <li>9. Driver's license issued by a Canadian government authority</li> <li><b>For persons under age 18 who are unable to present a document listed above:</b></li> <li>10. School record or report card</li> <li>11. Clinic, doctor, or hospital record</li> <li>12. Day-care or nursery school record</li> </ol>	<ol style="list-style-type: none"> <li>1. A Social Security Account Number card, unless the card includes one of the following restrictions:               <ol style="list-style-type: none"> <li>(1) NOT VALID FOR EMPLOYMENT</li> <li>(2) VALID FOR WORK ONLY WITH INS AUTHORIZATION</li> <li>(3) VALID FOR WORK ONLY WITH DHS AUTHORIZATION</li> </ol> </li> <li>2. Certification of report of birth issued by the Department of State (Forms DS-1350, FS-545, FS-240)</li> <li>3. Original or certified copy of birth certificate issued by a State, county, municipal authority, or territory of the United States bearing an official seal</li> <li>4. Native American tribal document</li> <li>5. U.S. Citizen ID Card (Form I-197)</li> <li>6. Identification Card for Use of Resident Citizen in the United States (Form I-179)</li> <li>7. Employment authorization document issued by the Department of Homeland Security</li> </ol>

**Examples of many of these documents appear in the Handbook for Employers (M-274).**

**Refer to the instructions for more information about acceptable receipts.**



## Account Information

# F.S. SPERRY INC.

3205 KIRBY WHITTEN PKWY., STE. 105B

BARTLETT, TN 38134

## Direct Deposit Authorization

Employee ID or SSN: \_\_\_\_\_ Date: \_\_\_\_\_  
Employee Name: (First) \_\_\_\_\_ (Middle) \_\_\_\_\_ (Last) \_\_\_\_\_ (Suffix) \_\_\_\_\_  
Street Address: \_\_\_\_\_ Telephone No. \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_ Mobile Phone No. \_\_\_\_\_

I authorize my Employer and its Agents, including Financial Institutions, to initiate electronic credit entries, and if necessary, debit entries and adjustments for any credit entries made in error to my checking or savings account listed below. This authorization will remain in effect until I have informed my employer in writing that I wish to cancel it and my employer has had reasonable time to effect such a cancellation. NOTE: A check with the employee's name imprinted must be attached !!!!!

## Account Information

☐ Checking ☐ Savings

Routing/Transit Number: \_\_\_\_\_ Account Number: \_\_\_\_\_

## Bank Information

Name: \_\_\_\_\_ Branch: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

## Deposit Options

☐ Enter Dollar Amount: \$ \_\_\_\_\_

☐ Percentage of Paycheck: \_\_\_\_\_ %

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_



**F.S. SPERRY**

REFRACTORIES EXPERTISE SINCE 1946

# Employee Manual

F.S. Sperry Co., Inc.  
1907 Vanderhorn Drive  
Memphis, TN 38134

Revised 09/11/18

# **Table of Contents**

## **Introduction**

- Welcome
- Mission Statement
- History
- Company Culture
- Disclaimer

## **Company Policies**

- Equal Employment Opportunity
- Harassment
- Violence
- Substance Abuse
- Smoking
- Dress Code
- Code of Conduct
- Company Property
- Confidentiality

## **Employment Basics**

- Personal Information
- Employment Categories
- Probationary Period
- Work Schedules
- Attendance
- Holidays
- Time Off
- Travel
- Personal Phone Calls & E-mails
- Performance Reviews
- Disciplinary Process
- Termination/Resignation

## **Compensation**

- Reporting Time Worked
- Regular Pay
- Overtime
- Bonuses & Incentives
- Garnishment of Wages

## **Employee Benefits**

- Social Security & Medicare
- Unemployment Compensation
- Supplemental Workers' Compensation Pay
- Life Insurance
- Cafeteria Plan
- Health Insurance
- Tuition Reimbursement
- Retirement Plan
- COBRA

## **Miscellaneous**

- Gifts and Tips
- Information Posting
- Labor Organizations
- Outside Employment
- Inclement Weather
- Safety
- Staff Meetings
- Suggestion Box

# Introduction

## Welcome

Welcome to F. S. Sperry! The purpose of this employee manual is to briefly outline the business services provided by F. S. Sperry, provide you with a general understanding of the policies by which F. S. Sperry operates, and provide an outline of the procedures to be followed by each employee in order to maintain a smoothly running, professional, and profitable operation.

A strong and productive F. S. Sperry team can be achieved by cooperative working relationships based on mutual respect and understanding. A system of policies and practices provides a basis for these relationships.

This employee manual has been prepared to provide you with general information about the policies, procedures, and benefits of F. S. Sperry. Contact your supervisor for more detailed information.

## Mission Statement

F.S. Sperry strives for outstanding quality and service, and doing business with us guarantees you reasonable prices and complete satisfaction. We love our work, and value our client relationships. We promise that you won't have to just take our word for it — 98% of our customers have returned to us for another project.

## History

F.S. Sperry Co. lives and breathes refractories. We've been doing it since 1946, and have built a tremendous knowledge base about refractories and manufacturing equipment. Some of this equipment has been out of production for decades – but is still being used in plants – and we might be the only ones left who understand it.

We're contractors and engineers, and we love our work. We're proud to share our technical expertise with plant engineers and clients – so you can make the right refractory product and installation decisions, for the right reasons.

## Company Culture

F. S. Sperry employees are expected to contribute to a safe and healthy work environment that promotes cooperative working relationships based on mutual respect and understanding. Because each employee's job is important to the overall success of F. S. Sperry, all employees are expected to complete their assigned task skillfully and efficiently.

## Disclaimer

This manual has been prepared as a guide to policies, benefits, and general information which should assist you during your employment with F. S. Sperry, however, nothing contained herein is intended to be a contract of employment or contractual duty between F. S. Sperry and any of its employees. This manual may be

changed, amended, revised, or discontinued as deemed appropriate by the management of F. S. Sperry. Changes may be made with or without advance notice to employees. This manual is a summary of policies, benefits, and procedures of F. S. Sperry and is neither all-inclusive nor intended to anticipate and address each specific circumstance which may arise.

# **Company Policies**

## **Equal Employment Opportunity**

F. S. Sperry shall provide Equal Employment Opportunity to all employees and applicants for employment in accordance with all applicable Equal Employment/Affirmative Action laws, directives and regulations of Federal, State, and Local governing bodies or agencies. F. S. Sperry will not discriminate against or harass any employee or applicant for employment on the basis of race, color, creed, religion, national origin, sex, sexual orientation, disability, age, marital status, or status with regard to public assistance. F. S. Sperry will take affirmative action to ensure that all practices are free of such discrimination. Such employment practices include, but are not limited to, the following: hiring, upgrading, demotion, transfer, recruitment or recruitment advertising, selection, layoff, disciplinary action, termination, rates of pay or other forms of compensation, and selection for training.

F.S. Sperry supports the policies of the Americans with Disabilities Act and is committed to treating all applicants and employees with disabilities in accordance with the requirements of that act.

## **Harassment**

It is the policy of F.S. Sperry to foster an environment of respect for the dignity and worth of all its employees. Because incidents of harassment are demeaning to all persons involved and impair the ability of F. S. Sperry to perform its functions, F.S. Sperry will not tolerate any conduct that sexually, physically, or emotionally harasses another employee by intimidation, retaliation, verbal abuse, or in any other way that discriminates against any employee.

Harassing behavior has the effect of creating an intimidating, hostile, or offensive work environment and is prohibited in the work place, whether committed by supervisory or non-supervisory personnel.

Harassing conduct includes, but is not limited to unwelcome sexual advances, requests for sexual favors, and all other verbal or physical conduct of an offensive sexual nature, especially where such conduct is made either explicitly or implicitly a term or condition of employment or rejection of such conduct is used as the basis for decisions affecting an individual's employment, evaluation, wages, advancement, assigned duties, shifts, other conditions of employment or career development. Harassing behavior may include offensive comments, jokes, e-mail, innuendoes, graphic verbal comments about an individual's body, sexually degrading words used to describe an individual, or display or possession in the work place of sexually suggestive objects or pictures.

Any employee who believes he or she has been harassed should immediately notify his or her supervisor or Barry Cox. All complaints and related information will be investigated and kept confidential to the extent possible without compromising an investigation. Any employee who is found, after appropriate investigation, to have engaged in any type of harassment will be subject to disciplinary action up to and including termination.



## Violence

F. S. Sperry is committed to maintaining a workplace that is free of violence. The safety and security of our employees is of the utmost importance. Acts of violence or threats of violence will not be tolerated and will result in disciplinary action up to and including termination.

## Substance Abuse

F. S. Sperry employees are expected to report for duty in a manner that provides for public safety and efficient performance. The possession, use, distribution, manufacture or sale of alcohol and/or controlled substances is prohibited. An employee may not work while under the influence of alcohol and/or a controlled substance. Employees violating this policy may be subject to disciplinary action up to and including termination.

Prohibited drug use may include over-the-counter medication when it is used in a manner inconsistent with its intended use and affects the performance of the employee.

The use of alcoholic beverages during office hours or lunch breaks is strictly prohibited. Purchase of alcoholic beverages after hours shall be limited to no more than two (2) drinks, beers, etc. per person when using the company credit card for entertainment purposes.

As a condition of continued employment, employees may be required to undergo random alcohol and drug screening. An alcohol and/or drug screening may also be required in the event an employee is party to a workplace injury that results in damage to company property. Failure to take part in a drug or alcohol screening may be cause for termination.

## Smoking

F. S. Sperry endeavors to provide a safe and healthy working environment for all employees and therefore prohibits smoking in company buildings. Employees who violate this policy may be subject to disciplinary action up to and including termination.

## Dress Code

F. S. Sperry expects that each employee's appearance will be consistent with a professional image. All employees are expected to dress in attire appropriate to their position and duties. Clothing should be neatly laundered and all employees must practice good hygiene.

Casual dress may be appropriate on Fridays, although employees are still expected to use good judgment in their choice of casual clothes.

## Code of Conduct

F. S. Sperry requires all employees to comply with all company policies and directives. Employees are to perform their duties in a cooperative and efficient manner demonstrating high regard for work habits, attitude, production and personal conduct.

F. S. Sperry expects employees to refrain from discussing politics, religion, personal topics involving other employees, and salary amounts. Each and every employee is expected to conduct themselves professionally at all times.

Whether you are a current employee or a former employee of F. S. Sperry, under no circumstances may you use, transfer or convey by any means including e-mail: equipment, purchased software, computer software developed by yourself or another employee, customer lists, any other company-owned materials or intellectual property belonging to F. S. Sperry, or use such for other employment or for the benefit of any other company or person outside of the company without express written permission of Barry Cox. Personal use of property belonging to F. S. Sperry may be authorized for the benefit of an employee under special circumstances.

Employees should leave valuable personal items at home. F. S. Sperry cannot be responsible for the loss, theft, or damage of any personal property brought to the office.

F. S. Sperry management works hard to analyze the value of various job tasks, educational requirements, and experience. Your proficiency at your job and that job's value to the company determines your pay. Anyone accessing payroll records without specific authorization will be subject to immediate termination.

Nothing destroys company moral more than gossiping. Management will not tolerate negative discussions amongst employees about management or other employees. Reports of such conduct may result in disciplinary action up to and including termination. If you have time to gossip, you are probably not using your time for the tasks that you were hired to do. If you have a question about an event or a policy, go directly to your supervisor and ask for a clarification.

## Company Property

If you leave your employment with F. S. Sperry, under no circumstances may you use, remove, or fail to return any F. S. Sperry equipment, purchased software, software developed by yourself or another employee, customer lists, any other company owned materials or intellectual property belonging to F. S. Sperry without the express written permission of Barry Cox.

## Confidentiality

F. S. Sperry requires all employees in management, sales or supervisory positions to sign a confidentiality agreement as a condition of employment, due to the possibility of being privy to information that is confidential and/or intended for the company use only. This policy benefits employees by protecting the interests of F. S. Sperry to safeguard confidential, unique, and valuable information from competitors or others.

Should an occasion arise in which you are unsure of your obligations under this policy, it is your responsibility to consult with Barry Cox. Failure to comply with this policy could result in disciplinary action, up to and including termination.

# Employment Basics

## Personal Information

It is important that the personnel records of F. S. Sperry be accurate at all times. All employees are required to inform F. S. Sperry if they have a change in any of the following: Name, Address, Phone number/Cell number, Person to be notified in case of an emergency, and Marital Status/Dependents

F. S. Sperry does not give out personal employee information to outside callers.

## Employment Categories

**Variable-Hour** -- A variable hour employee is one who is retained on a limited time basis, as needed, and is called upon from time to time for special projects. Variable hour employees may not be eligible for company benefits (ins., profit sharing, etc) until they have completed 1560 hours of work in a 12-month period. This mandatory look-back period begins on the date of hire and runs for 12 consecutive months from the date of hire. Upon completion of 1560 hours a variable hour employee will be considered full-time. Once considered full-time the employee will have a 3-month waiting period before becoming eligible for insurance. Variable hour employees will be eligible for a paid holiday if they have worked 40 hours per week for the prior 14 days. Variable hour employees' hours will be tracked by the foreman/supervisor on the particular job.

**Full-Time** -- A full-time employee is one who works a minimum of 30 hours in a pay period and employment is expected to be at his/her place of employment daily.

**Part-Time** -- A part-time employee is a person employed for less than thirty hours a week and likely less than five days per week.

**Non-Exempt** -- Non-exempt employees are paid on a per hour basis. Non-exempt employees are expected to maintain an in and out time record of time worked by their foreman or supervisor. These positions are eligible for overtime pay if more than 40 hours are worked in a workweek. Any overtime or nonstandard hours must be approved in writing, before they occur, by the appropriate supervisor.

**Exempt** -- These positions are excluded from the overtime provisions of the Fair Labor Standards Act. An employee who is classified as exempt is paid a salary, regardless of the amount of hours it takes to complete weekly tasks. Salaried employees are eligible for the same benefits as full-time employees; with the exception of overtime compensation or compensation time. Your salary takes into consideration your skill level as well as the hours your particular job demands.

## Probationary Period

An employee hired by F. S. Sperry will be on probation for 90 days. This will be set up by your supervisor at the time of hire and will vary by department. The probationary period is the final phase of the selection process and is used to ensure that the new employee possesses the technical and interpersonal skills needed to perform

the job satisfactorily and to interact successfully with the F. S. Sperry team. Failure to receive a satisfactory evaluation during or at the end of this probationary period will result in termination.

## Work Schedules

The normal F. S. Sperry work week is from Sunday through Saturday. Normal business hours are from 8 a.m. to 5 p.m. for office personnel. Field employees business hours vary depending on the nature of the job and the time frame in which it must be completed. Every full-time employee is expected to work at least an 8-hour day, five days a week. There may be an agreement between a supervisor and employee to modify this schedule if it meets management approval.

Full-time employees are allowed a 60 minute lunch period. Part-time employees' lunches are scheduled as needed. All breaks offered will be in accordance with state laws.

If the company requires you to be at a meeting, which is held over the lunch hour, the company will pay for your lunch.

F. S. Sperry may allow its employees a flexible work schedule. Contact your supervisor if your schedule does not work for you. If feasible, your supervisor will try to accommodate your individual needs.

If you are going to be late, you must contact your supervisor. Failure to do so will result in a verbal warning. After 3 verbal warnings your employee status will be under review.

## Attendance

Chronic, habitual, and/or excessive lateness or absenteeism will not be tolerated. Lateness, absenteeism, and failure to follow call-in procedures are cause for disciplinary actions up to and including termination.

F. S. Sperry has some very busy months. This will vary between the office and field personnel. For the office personnel the months of November through February are normally the busiest. During this time, employees are required to be available for longer, busier days.

## Holidays

All regular full-time and salaried employees received the following eight paid holidays per year:

- New Year's Day
- Memorial Day
- 4th of July
- Labor Day
- Thanksgiving Day & the day after
- Christmas Day
- Employee's Birthday

Should a holiday fall on a Saturday, the preceding Friday will be considered the paid holiday; if a holiday falls on a Sunday, the following Monday will be considered the paid holiday. Employees who work in a department that regularly operates 7 days a week will be scheduled for an alternate day off if they work on the holiday.

If your job requires you to work on one of these holidays, you may be paid overtime.

If a paid holiday occurs during your vacation, you will not be charged a vacation day. If you choose, your vacation can be extended by an additional day.

## Time Off

Personal Time is any time an employee is not at work during their normal work schedule. This time can be used for sicknesses, vacation, compassionate leave, maternity leave or any other reason an employee is not at work.

Full-time and salaried employees may be eligible for personal time with pay. Personal time accrual begins the first day of your employment. Personal time is allocated according to the length of service and to the date of hire as follows:

All full-time employees receive one week vacation after completion of one year on the job. Thereafter, employees receive two weeks of vacation.

Personal time is left to the discretion of the supervisor and will depend on the workload and nature of the personal time, unless it is considered an emergency.

When your personal time is used up and you are not at work, you will not be paid for the time missed from work.

Arrangements for personal time off must be made with the employee's supervisor as far in advance as possible. At least 2 weeks' notice is required for scheduling more than 2 days personal time off. All personal time off must be made on a request form provided and approved by your supervisor.

If conflicts arise due to overlapping time off requests, management will make a decision on a case-by-case basis. A reasonable effort will be made to give you the time off you request, however, due to departmental workload, there may be times of the year when extended personal time off cannot be accommodated.

A physician's note may be required for employees missing 5 or more days of work due to illness.

A Leave of Absence is an approved period of inactive employment. Although part or all of an approved Leave of Absence may be unpaid, your benefits will continue in effect during this period provided you pay all required premiums (for the full amount of the premium) on a timely basis. If your absence is subject to the Family Medical Leave Act your benefit premiums will continue to be paid by F. S. Sperry for up to 12 weeks.

Maternity leave is considered a leave of absence as defined above; except that an employee may first use all accumulated personal time prior to any leave of absence.

Employees are entitled to up to 3 days of paid bereavement leave for the death of an immediate family member. An immediate family member includes an employee's parent, stepparent, spouse, child, stepchild, brother, stepbrother, daughter, stepdaughter, son-in-law, or daughter-in-law.

F. S. Sperry supports your right to vote and urges you to do so. Full-time and salaried employees will be allowed up to one hour off with pay for voting in state and federal elections, providing you get your supervisor's approval in advance.

Employees who are required to be absent for military duty will be accorded all benefits provided by law. Any employee who is required to take a leave of absence for military duty must provide military orders related to the expected absence.

F. S. Sperry seeks to accommodate reasonable requests for leave for religious observance. If it is not possible for employees to attend religious services or experiences outside of their working hours, you may request prior authorization for time off to attend such services. A maximum of two hours with pay may be allowed full-time employees, per occasion. This is not to exceed 2 occasions per year.

## **Travel**

Employees may be asked to travel for company business. For overnight travel, the company will pay \$100 per diem rate for each day you are traveling. Hotels, meals, and incidentals are included in your per diem. A taxi to and from the airport, where a hotel limousine is not available, will be reimbursed if it means that you would save money instead of renting a car.

If employees are required to use their own vehicle for company business, they will be reimbursed at a fixed rate based on the distance traveled. For trips over 10 miles you will be reimbursed at the rate of 27 cents per mile. These rates will be reviewed and adjusted periodically. Related parking expenses for a company-approved trip will be reimbursed with presentation of a receipt. Receipts should be turned in during the pay period in which they occur. Traffic and parking violations will not be reimbursed. Expenses other than in-town job-related travel by staff members must be pre-approved.

If you must entertain prospective clients or others while on a trip, you are expected to keep the expenses reasonable. You will be reimbursed for these expenses if they are reasonable.

If you use your personal vehicle for a company errand or trip, you must be prepared to take all legal or civil responsibility for your driving as well as ensure that your vehicle is in a safe driving condition. The company will not be responsible for any accident, theft or other occurrence when you are using your own vehicle. The mileage reimbursement you receive includes gas and wear and tear as well as insurance for the miles that you use your car. You may not use your vehicle for a company errand or trip if you do not have insurance to cover any potential accident, theft, or other vehicle related occurrence. By using your own vehicle, you agree to indemnify the company from any liability due to your own driving. You are not to use your vehicle or a rental vehicle for a company errand or any other company travel unless you are fully insured, so as not to cause the company any liability.

## **Personal Phone Calls, Mail, & E-mails**

Management reserves the right to monitor e-mail and to have all passwords and access codes for files created on company time or for the company's benefit.



If any unauthorized employee accesses another employee's files, company records, e-mail or voice mail without specific authorization, they may be subject to a warning or termination depending upon the severity of the access.

Limit the number of personal calls made or taken during business hours. Keep your conversations under 3 minutes so as not to tie up the business lines.

If you want someone to know your personal phone number at home, please provide him or her with that information. F. S. Sperry does not release such personal information to outside callers.

Long-distance personal calls should not be made on business lines. Obtain your supervisors' approval if you need to make a personal long distance call on the business line. You will be expected to reimburse F. S. Sperry for the call.

All personal mail must be directed to your home. Personal business activities are not to be conducted during working hours.

Cell phone calls and texting should be kept to a minimum. Any correspondence related to the company should be conducted through emails rather than texts and cell phone calls. Calls should be made using the company phone lines, unless there is a valid reason to use your cell phone.

## Performance Reviews

Your performance will be reviewed during and at the end of your probationary period as well as throughout your employment. If your performance is found satisfactory following the probation period, you may become a fully participating staff member eligible for group benefits, as outlined in the employee categories.

All employees should know how they are performing on the job and what steps they might take to improve their job performance. Each employee's performance will be reviewed on regular intervals. At the time of review, the employee will meet with their immediate supervisor to discuss strengths and weaknesses, career development, goals, and objectives. A written review will be placed in the employee's personnel file after that discussion. The employee will be asked to sign this document to acknowledge the discussion with their supervisor. A copy will also be given to the employee for their personal files.

Pay increases are not part of the review process unless indicated by your supervisor. All pay increases are based on merit.

If a review is required due to poor or nonperformance of all or part of the employee's job, or due to noncompliance with company policies, an employee may be placed on probation for a period of time to be determined by their supervisor.

## Disciplinary Process

Employees are expected to conduct themselves in accordance with generally acceptable work behaviors. Disciplinary action will depend on the circumstances surrounding the violation and will include termination if necessary. Your employment is not guaranteed for any specified length of time. F. S. Sperry reserve the right to terminate employees with or without cause.

## Termination/Resignation

Your employment is not guaranteed for any specified length of time. You have the right to terminate your employment with or without cause and F. S. Sperry reserves the right to terminate employees with or without cause.

If you should decide to voluntarily leave F. S. Sperry, you are expected to provide 2 weeks' notice before terminating your employment. If you do not give this notice, your supervisor may require immediate departure. Any keys or other property of F. S. Sperry must be turned in upon termination. If company property is not returned before employment is terminated, the estimated value of the property will be deducted from the employee's final check.

After employment at F. S. Sperry, former employees may not utilize proprietary knowledge, software, software routines, customer lists, or other assets of the company, which are the properties of F. S. Sperry, for the benefit of other companies or non-F. S. Sperry staff.

When you leave F. S. Sperry you will be asked to participate in an exit interview. The exit interview gathers a variety of information and assists F. S. Sperry in addressing employee problems and concerns and explaining various benefits that may extend beyond the date of separation.

## Compensation

### Reporting Time Worked

The Federal Government requires that F. S. Sperry maintain accurate time tracking for hourly employees. All employees are expected to keep track of their hours worked. Any unauthorized employee who alters the report of another employee's time worked will be subject to disciplinary action up to and including termination.

### Regular Pay

Employee benefits are a significant part of your total compensation.

Paychecks are distributed each Friday for field personnel and on the 15<sup>th</sup> and the last day of the month for salaried personnel. When the distribution day falls on a holiday, paychecks will be distributed on the preceding business day.

### Overtime

Overtime is defined as time worked beyond a forty hour workweek. Hourly waged employees will be compensated on a time and a half basis for overtime.

Employees are to complete their daily and weekly assignments during regular office hours. Non-exempt employees are eligible for overtime for all hours worked in excess of 40 in any work week. It is expected that an employee will comply with any requests to work overtime. F. S. Sperry will also try to give you as much notice as possible when overtime will be mandated. All overtime designated by your manager is approved overtime. If an employee works overtime without approval, the overtime must be paid, however the employee may be subject to disciplinary action up to and including termination.

Exempt employees will not be paid on an overtime basis and may be asked to work extra hours as business demands.

## Bonuses & Incentives

Bonus or Incentive pay is additional compensation paid to an employee, or group of employees, in addition to their normal rate of pay. This additional compensation may be granted under specific, limited circumstances and is not guaranteed.

## Garnishment of Wages

F. S. Sperry honors wage garnishments. Employees will be notified when garnishment orders are received.

## Employee Benefits

Willfully making a false statement for the purpose of obtaining or denying benefits may result in criminal prosecution and termination of employment.

## Social Security & Medicare

Through Social Security, you and your family are protected against loss of work income due to retirement, disability or death. Medicare protects you against the increasing medical expenses associated with aging. All employees participate in the Social Security program. You and F. S. Sperry both contribute on your behalf.

## Unemployment Compensation.

Worker's compensation is a benefits program created by state law that provides medical, rehabilitation, income, death, and other benefits to employees and dependents due to injury, illness, and death resulting from a compensable work-related claim covered by law. This plan, administered by the state and Federal governments, is financed entirely by employers through payroll taxes.

## Supplemental Workers' Compensation Pay

If you are injured on the job, you may be eligible for Worker's Compensation benefits, as stipulated by state law. Workers' Compensation provides for medical, surgical and hospital treatment, as well as weekly compensation for lost work time. If you are injured on the job, you must notify your supervisor immediately or as soon as possible after the injury occurs in order to be eligible for Workers' compensation benefits. All benefits are spelled out in detail under the Workmen's Compensation Law of Tennessee.

## Life Insurance

Each full-time employee is entitled to \$15,000 in life insurance payable to the beneficiary of his or her choice. The company will pay for the cost for this insurance. The employee and eligible family members have the option of getting additional coverage at the employee's cost.

## Cafeteria Plan

F. S. Sperry has established a Cafeteria Plan (Section 125) for the benefit of its employees. This plan gives you significant tax benefits and results in higher take home pay than companies not offering a Cafeteria Plan. Under the company Cafeteria Plan, your portion of the health insurance premiums will be deducted pre-tax, thereby reducing your taxes and increasing your take home pay. At your option, money for other qualifying expenses can also be deducted from your paycheck prior to taxes being calculated.

## Health Insurance

Every full-time employee will be able to sign up for health insurance through the company group plan after the probationary period. The employee will pay \$50 per month (deducted in total from the first check each month) for health insurance coverage. F.S. Sperry pays the balance of the insurance cost for the employee. However the employee is responsible for any additional premiums which would include insurance for spouse, children, or family coverage. Employees are advised to read all information in the insurance booklet provided by the insurance company in order to be aware of all benefits to which they are entitled.

## Tuition Reimbursement

F. S. Sperry encourages its employees to attend professional information gatherings such as seminars, workshops or classes that are related to their work at F. S. Sperry. Management may be willing to pay for these experiences. Please let your supervisor know if you are aware of an educational experience that will enhance your work at F. S. Sperry.

## Retirement Plan

Employees who are eligible for the 401K plan will receive an annual accounting of their benefit as well as a Summary Plan description which will be mailed to the home address of record. In addition, eligible employees will receive a 100% match up to 4% of his/her annual salary.

## COBRA

You and your eligible dependents have the right to elect to continue your medical coverage after you leave F. S. Sperry. This right is guaranteed under federal law. To continue coverage, you must pay the total premium for a plan (both your share and the company share) and the administrative fee.

## Miscellaneous

### Gifts and Tips

Employees are not to accept gifts, tips, gratuities, or special favors from customers or vendors. Employees are prohibited from soliciting money, gifts, or special favors from other employees or their families.

F. S. Sperry realizes that there may be certain solicitations, such as school fundraisers, that employees would like to make available to their colleagues. Contact your supervisor before bringing any solicitation to your workplace.

### Information Posting

F. S. Sperry has a bulletin board where important notices are posted. It is your responsibility to read the bulletin board on a regular basis and be aware of posted items.

### Outside Employment

If an F. S. Sperry employee is involved in other employment, it is essential that their primary commitment is given to F. S. Sperry. This commitment includes honoring your work schedule at F. S. Sperry. While employed at F. S. Sperry, an employee may not utilize talents and/or knowledge gained through employment at F. S. Sperry, company equipment, software or other assets of the company for the benefit of other companies or non-F. S. Sperry staff without the express permission of Barry Cox - President.

### Inclement Weather

F. S. Sperry functions best when all employees are at work so it is important to report to work as scheduled. If hazardous weather conditions exist, F. S. Sperry expects you to use good judgment and your supervisor will take that into consideration if you do not arrive on time.

# Safety

Safe work practices and good housekeeping habits are responsibilities each of us share. We provide our clients and ourselves a safer environment by keeping areas clear and hazard free and not taking unnecessary risks.

Keep desk and file drawers closed to prevent walking into them or tripping. Keep sharp tools in a safe place with blades covered. Keep the arm of the paper cutter in a downright and locked position after use. All cables and cords should be positioned so that no one can trip on them. If you must position them across any open area, they must be covered or taped to the floor to prevent someone from tripping on them.

Before leaving your workstation at the end of the day, turn off your computer monitor. Do not place anything over the vents of your monitor, computer, or any other electrical equipment. Even a noncombustible item placed over venting on an electrical device could cause them to overheat and possibly catch on fire.

All hallways or corridors in your area must be at least 36 inches wide and free of all obstacles. Do not place anything on the floor where someone else could trip on it. Ensure that all fire extinguishers and other safety devices in your area are in proper working order and properly date coded.

F.S. Sperry also has a detailed safety manual which should be read and referred to regarding any questions related to work being performed in the shop or onsite at a customer's location.

## Staff Meetings

If you are concerned that attending a staff meeting will interfere with your normal work duties, you should discuss your concerns with your supervisor.



# Employee Manual Receipt Acknowledgment

I acknowledge that I have received a copy of the Employee Manual and that I have read and understand the contents of the manual.

**Signature:** \_\_\_\_\_

**Printed Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_