



**Timeclock Acknowledgement**

I hereby verify that my time entries for all hours I have worked the prior week(s) have been recorded accurately, and that I have been provided all meal and rest breaks to which I am entitled in accordance with state law and company policy.

I understand that I may be subject to disciplinary action, up to and including termination of employment, if I violate this Policy.

**Employee Name (print)**

**Employee Signature Date**