

JACE TRUCKLINES

OPERATOR & COMPANY DRIVER

ACKNOWLEDGEMENT & RECEIPT FORM

Name: _____

Unit Number: _____

Position: _____

By signing below, I hereby acknowledge receipt of the Company Policy Manual. I also acknowledge that I am expected to make myself aware of all the policies and procedures contained in this manual, and that I also agree to follow all the Company polices as outlined in this manual.

Dated on the _____ Day of _____, _____
Day Month Year

JACE TRUCKLINES DIRECTOR

Employee Signature

Employee Name Printed