

Acknowledgement of Receiving Employee Policy Guide Revision 10 dated 27 May 2020

The **Employee Policy Guide** describes important information about TDI-Brooks International, Inc., B&B Laboratories, Inc., or GEO3, Inc. [collectively or individually known as “the Company”], and I understand that I should contact a HR representative regarding any questions not answered in the Employee Policy Guide. I have entered into my employment relationship with the Company voluntarily and acknowledge that there is no specified length of employment. Accordingly, either I or the Company can terminate the relationship at-will, with or without cause, at any time, so long as there is not violation of applicable federal or state law.

I understand, acknowledge and agree that, except for employment at-will status, any and all policies and practices may be changed at any time by the Company and the Company reserves the right to change my hours, wages and working conditions at any time in its sole discretion. I understand and agree that nothing in this Employee Policy Guide creates, or is intended to create, a promise or representation of continued employment. Furthermore, I acknowledge that this Policy Guide is neither a contract of employment nor a legal document.

I understand, acknowledge and agree that this Employee Policy Guide supersedes any and all prior policies, practices, oral or written representations, or statements regarding the terms and conditions of my employment with the Company. By providing this Employee Policy Guide, the Company expressly revokes any and all previous policies and procedures which are inconsistent with those contained in the Policy Guide I received on the date signed below.

(Initial) _____ As per the Corporate Code of Business Conduct & Ethics I have read, understand and agree to the terms set out in the policy.

(Initial) _____ As per the Illegal Drugs, Alcoholic Beverages, and Firearms sections I agree to abide by the terms of these policies as a condition of my employment.

(Initial) _____ I hereby consent to disclosure by the Company and its agents, including but not limited to any collecting and testing agencies, of my drug and alcohol test results and any related information to the specific requisitioning Client and its affiliate, and its authorized agents, assigns, or representatives or any other entities required by law.

Title of Document:	Employee Policy Guide	Document Number:	001.10_Policy_TDIB_All
Authority:	Vice President	Revision:	10
Custodian/Owner:	Human Resources	Issue Date:	29 May 2020
			Page 35 of 36

I understand, acknowledge and agree that I have read and comply with the policies contained in this Employee Policy Guide, that I am bound by the provisions contained therein, and that my continued employment and advancement is contingent on following those policies.

Signature of Employee: _____

Name of Employee (Print): _____

Title: _____

Company: _____

Date: _____

Witness

(Print Name)

(Signature)

Title: _____

Date Witnessed: _____

A signed printed or scanned copy of this two-page acknowledgment form to be sent to gailmills@tdi-bi.com

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			Page 36 of 36