



Drug-Free Workplace Policy Employee Acknowledgement

This is a formal notice of Weigand-Omega Management, Inc.'s intent to take disciplinary action, up to and including termination of employment, against any employee who violates Weigand-Omega Management, Inc.'s Drug-Free Workplace Policy.

Weigand-Omega Management, Inc.'s Drug-Free Workplace Policy prohibits the use, sale, distribution, manufacture or possession of all controlled substances as listed in Schedules I through V of Section 202 of the Controlled Substance ACT (21 U.S.C. 812).

Company policy also prohibits the performance of work or presence at any company building, facility, equipment or work area/site while under the influence of a controlled substance.

I understand and agree that:

- I have received a copy of Weigand-Omega Management, Inc.'s Drug-Free Workplace Policy.
- I have carefully and thoroughly read Weigand-Omega Management, Inc.'s Drug-Free Workplace Policy.
- I understand the requirements of Weigand-Omega Management, Inc.'s Drug-Free Workplace Policy and agree, without reservation, to follow this policy.

Employee's Signature: _____ Date: _____

Authorized Witness: _____