Rang Healthcare
a division of Rang Technologies, Inc.

BENEFITS HANDBOOK ACKNOWLEDGEMENT

I, _____, acknowledge that I have received the Company's Employee Handbook ("the Handbook"), and understand that violations of the policies contained in the Handbook could result in disciplinary action, up to and including termination.

I further understand that the information contained in the Handbook represents guidelines for the Company and that the Company reserves the right to modify the Handbook or amend or terminate any policy, procedure, or employee benefit program at any time.

I further understand that the contents of the Handbook do not form a written employment contract. Either the Company or I have the right to terminate my employment at any time.

I further understand that no manager, supervisor or representative of the Company, other than the President, has any authority to enter into any agreement guaranteeing employment for any specific period of time. I also understand that any such agreement, if made, will not be enforceable unless it is in writing and signed by both parties.

I further understand that if I have any questions about the interpretation or application of any policies contained in the Handbook, I should direct these questions to my Supervisor or the HR Representative.

_____ _____

Employee Signature Date

_____ _____

Name Printed Social Security Number
(Last 4 Digits Only)