



CIS HealthCare Inc.
P.O Box 6854, Largo Maryland 20792
Phone: 240-508-3244 or 301-364-3302, Fax: 301-364-3306
Sibedwo@yahoo.com

Acknowledgement of Receipt of Policies and Procedure

This is to confirm that I _____
have been given CIS & H Inc Employee Manual, my job description and the policies and
procedure manual. I further confirm that I have read and understood all the terms and
conditions stated therein. I also agreed to abide to all the rules and regulations as
indicated therein.

Signature _____ Date _____

