



THE SERVICE COMPANIES

The Service Companies Services Agreement

This agreement between Acrobat Outsourcing, a wholly-owned subsidiary of The Service Companies, Inc., with its principal office located at 303 Hegenberger Road, Suite 300, Oakland, CA 94621 ("STAFFING FIRM"), and Alex Korzeniewski Private Event ("CLIENT"), for the Mad Hatter Tea Party theme event on Saturday, January 18, 2020, staff starting time at 1:00 pm at 4553 Beach Wood Drive El Dorado Hills CA 95762.

Bill Rates: Our bill rates include the employee's hourly wage, and all deductions required by State and Federal legislation -- including employer's contribution for FICA taxes, providing Unemployment and Worker's Compensation, liability insurance and fidelity bonding, San Francisco sick leave, health care and commuter ordinances as well as other deductions and benefits paid to our employees. Additionally, all administrative charges are covered, including preparation of W-2 forms at the end of the year.

Position	Bill Rate
Event Help	\$35.00/hr
<i>*The STAFFING FIRM observes the following Holidays:</i> New Year's Day Labor Day Easter Sunday Thanksgiving Day Memorial Day Christmas Day Independence Day <i>On these dates your normal bill rate will increase 1.5X.</i>	

STAFFING FIRM may, on occasion, increase the rates set forth in proportion to any legislatively-mandated new or increased cost which may be required by federal, state, or local law commencing upon the effective date of such new or increased cost, such as FICA State Unemployment Tax. Changes may also include any new or increased cost associated with the passage of a federal or state law mandating any benefits for employees.

Affordable Care Act (ACA)/Health Care Security Ordinance (HCSO): STAFFING FIRM offers medical benefits to all qualified temporary employees in compliance with The Affordable Care Act and the Health Care Security Ordinance for San Francisco. You will be assessed a minimal % ACA surcharge on every invoice. This rate can vary and is currently 3% of the invoice amount.

Five-hour Minimum: We require a five-hour minimum workday. If an employee is scheduled to work a minimum of five hours in one day and the employee is sent home in less than five hours due to a lack of work, the employee will be paid for five hours and THE CLIENT will be billed for five hours. **Show-up:** In the event you cancel the employee's assignment and the employee is already on his/her way to work, or at the location, the five-hour minimum will be applied, and THE CLIENT will be billed for five hours.

Cancellation of Event: There will be a 50% cancellation fee of estimated hours for the Event if cancelled within 36 hours of the scheduled start time. The parties agree that the minimum hours for the Event are 5. For Saturday, Sunday and Monday jobs all cancellations or order changes need to be received by Friday morning at 9 a.m. PST to avoid fees.

Guarantee: STAFFING FIRM guarantees that the assigned employees that they recruit and assign to CLIENT will have the qualifications CLIENT requests. If CLIENT finds any assigned employee's qualifications or general work-related behavior lacking and lets STAFFING FIRM know within one (1) hour, STAFFING FIRM will not charge for the first two (2) hours of the assignment and will make reasonable efforts to replace the assigned employee immediately.

Employee Timesheets: STAFFING FIRM pays its employees weekly. In order to accommodate this and ensure accurate invoicing, we utilize paper time sheets, which will be provided to you by your local staffing manager. These time slips will have the names of the staff reporting to your event or business as well as a place to indicate time in, time out and break time. The time slip requires the initials of the staff as well as the signature of the client to ensure the validity of the recorded time by all parties. After the shift, please return via email or by fax to your local staffing manager, the following business day.

Employee Breaks: Per California labor laws an employee: a. must receive a 10-minute break for every 4 hours that they work provided the shift is at least 5 hours;
b. must receive an uninterrupted 30-minute break after 5 hours, except when the workday will be completed in 6 hours or less and there is mutual employer/employee consent to waive the break period. If working more than 8 hours additional breaks must be provided

Hiring a STAFFING FIRM Employee: Should THE CLIENT wish to hire an employee of STAFFING FIRM as a permanent employee, conversion fees and/or hiring fees will apply. Hiring options include:

1. If THE CLIENT maintains the employee as an employee of STAFFING FIRM for at least 120 days with a minimum of 695 hours worked then THE CLIENT can hire STAFFING FIRM's employee with a Conversion fee of \$0. THE CLIENT must notify STAFFING FIRM if they decide to hire an employee.
2. THE CLIENT may hire any STAFFING FIRM employee working less than 120 Days and 695 hours after paying a Temporary-to-Hire Conversion fee to STAFFING FIRM for each employee. The Temporary-to-Hire Conversion fee is \$5,000.

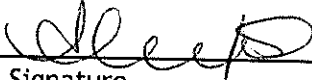
Payment Terms: Qualified CLIENTS who provide good credit references to STAFFING FIRM will be granted terms. ALL invoices are **Due Upon Receipt**.

Finance Charge: CLIENT agrees to pay interest on any unpaid balances after thirty (30) days from the date of the invoice, at the compounded rate of 1.5% per month (Annual Percentage Rate of 18%) or the maximum legal rate, whichever is lower, calculated from the date of the invoice.

Term of Agreement: The Agreement may be terminated by either party upon 30 days written notice to the other party, except that, if a party becomes bankrupt or insolvent, discontinues operations, or fails to make any payments as required by the Agreement, either party may terminate the agreement upon 24 hours written notice. No provision of this Agreement may be amended or waived unless agreed to in writing signed by the parties.

Authorized representatives of the parties have executed this Agreement below to express the parties' agreement to its terms. The provisions of this Agreement will inure to the benefit of and be binding on the parties and their respective representatives, successors, and assigns.

Alexandra Korzeniewski
CLIENT


Signature

Alexandra
Printed Name

Title
1/10/20
Date

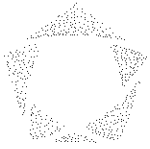
The Service Companies / Acrobat Outsourcing
Michelle Horne
STAFFING FIRM: ACROBAT OUTSOURCING


Signature

Michelle Horne
Printed Name

Operations Manager
Title
1/13/20
Date

Agreement Provided By: Lisa Powers



THE SERVICE COMPANIES

New Client Info Form

Date: 11/10/20

COMPANY INFORMATION:

Company Name: _____ Website: _____

Type of Company:

- ☐ Conference Planner
- ☐ Event Production
- ☐ Food Production or Demo
- ☐ Education
- ☐ Event Facility
- ☐ Caterer
- ☐ Restaurant
- ☐ Corporate Cafeteria
- ☐ Organization: Private Event

LOCATION

Please provide venue name, address and specific meeting room or check in procedure:

Private Home
4553 Beechwood Dr El Dorado Hills, CA 95762

Are there parking options? Street

STAFFING NEEDS

Select the positions you are likely to need at some point:

☐ Concierge/Information Clerk ☐ Registration Cashiers/Customer Service ☐ Materials Production ☐
Room/Line Monitors ☒ Event Help ☐ Other _____

Uniform or Attire:

What dress code would best be suited to the event or assignment?

Something a little nicer than casual - business casual

What dress code would best be suited to the event or assignment?

CONTACTS

Primary Contact (we will email timesheets to this contact before each job)

Printed Name: Alexsandra Korzeniewski Position: _____

Phone: 916 206-9494 Cell: _____ Fax: _____

Address: 4553 Beechwood Dr City: El Dorado Hills Zip: 95762

Email: lexy3737@gmail.com

Invoice Contact

We email invoices to save paper, but if you prefer another method please indicate:

☒ Email is perfect ☐ Prefer fax ☐ Prefer postal mail

~~or~~ same as above info

Printed Name: _____ Position: _____

Phone: _____ Cell: _____ Fax: _____

Address: _____ City: _____ Zip: _____

Email: _____

Other Contacts

If there are others in your office who may place orders on this account please indicate:

1) Printed Name: _____ Position: _____

Phone: _____ Cell: _____ Fax: _____

Email: _____



THE SERVICE
COMPANIES

SERVICE. ABOVE ALL

Credit Card Billing Authorization Form

Credit Card Billing Information	
Company name / DBA:	Alex Korzeniewski
Authorized Signer:	
Credit Card Type:	Visa [] MasterCard [☒] Amex [] Discover/Novus [] Other, please specify:
Credit card number:	5424 1813 9282 5803
Enter CVC Number	Last 3 digits from back of card: 054
Expiration Date:	6/30/23
Billing Address:	4553 Beechwood Dr
City:	El Dorado Hills
State/Province:	CA 95762
Zip/Postal Code:	95762
Country:	USA
Phone Number:	916 206-9494
Fax Number:	
Please select one of the payment options	
Applicant agrees that all information provided is accurate and complete. Applicant also acknowledges that all orders may be immediately terminated at The Service Companies' discretion if any changes are declined or charge backs are claimed against any outstanding invoiced balance. Disputes to amounts invoiced should immediately be reported to AR@acrobatoutsourcing.com	
Changes in the status of this card can also be reported to AR@acrobatoutsourcing.com .	

Authorized Signature:

Date: 1/10/20