

TYREX FAMILY CARING CULTURE PROGRAM



The TyRex Family Care Package

TyRex Culture- A commitment to being **SPECIAL** by Design[®], not just business successful! We are a business family composed of individuals who include their Company, their Community, and their fellow Employees in their Caring Business Philosophy.

TFPCC#003 (III)

File Name: Z:\TyRex\Admin\ACTION PLANS\TyRex Family 2017\TyRex Family Care Package Program\2017 TyRex Family Care Package Program Master.docx

File Date: 07/10/17

Last Update: 2/7/19

John's Message

As leaders, mentors, and coaches of the TyRex Family, Matt, Andrew, and I desire to express and demonstrate our commitment to TyRex family leadership with our pledge to lead a group of successful companies who individually, collectively, and collaboratively choose to be **ONE** family. We believe it not only takes an entire business family commitment to be business successful, but it also takes a **SPECIAL by Design®** business philosophy by individuals and their TEAMS with strong commitments to company and community while being residents of both.

The TyRex Family Caring Culture Program is about family and the commitments to all members of our business family. It is an expression of caring that comes from our heart and spirit that can be found in our Business (Family) Singularity of **ONE** Philosophy.

RecognizeGood®/TyRex Family Partnership



TyRex's **Business in Community (Binc)** initiative is about the strength from its triangle structure. The initiative is the balance achieved by recognizing the importance and contribution of each participant. It is in the strength sourced from these relationships that provide the business sustainability and cultural foundation for the longevity of **ONE**, relationships which at their core represent **Trust, Respect AND Mutual Appreciation**.

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Outline

- I. TyRex Family Care Package Program Purpose
- II. Donating Employee
- III. Nominating Employee
- IV. Recipient Employee
- V. Appendix
 - A. Request to Donate Earned Accrued Vacation Hours
 - B. Request for TyRex Family Care Package

Profit Purpose AND Family

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I. TyRex Family Care Package Program Purpose

TyRex Family-

A TyRex Earned Accrued Vacation Donation Program has been established to assist employees facing Medical Hardship/Special Circumstances. The purpose of the TyRex Family Care Package Program allows our Full-Time Regular status employees to voluntarily transfer excess earned accrued vacation to a Vacation Leave Fund, which will be converted to dollars. The Vacation Leave Fund will be available to assist eligible employees who may have exhausted all other paid leave options or have special circumstances which could greatly benefit from receiving a care package from a business family who cares.

This is from individual donations and not the company.

Eligibility

Full-Time Regular and Part-Time status employees are eligible to receive a TyRex Care Package. Essentially, the TyRex Family Care Package program is available to all employees who are active participating members of our TyRex Business Family. Temporary status employees who may be nominated to receive a TyRex Family Care Package will be handled either through their Temp Agency or by special provisions.

Additional Guidelines are as follows:

Donating Employee:

- May not specify who will be the recipient of donated leave
- Must complete a **Time-Off Request Report Form** and submit it to Human Resources
- Each individual should consult with their tax advisor for any possible tax implications.

Nominating Employee:

- May nominate a Full-Time Regular and Part-Time Status Employee.
- Temporary Employee nominations should be handled directly with TyRex Human Resources. No Request Nomination Form is required.
- Must complete a **Request to Nominate Form** and submit it to Human Resources

Recipient Employee:

- Will be contacted by Human Resources to obtain Employee's approval or refuse acceptance of the TyRex Family Care Package
- Will remain Anonymous
- Each individual should consult with their tax advisor for any possible tax implications.

The donated leave will be transferred to TyRex Corporate accounting when converted and held in a special escrow account. As part of the TyRex Family's birthdays, anniversaries, and volunteer hours monthly event, an announcement related to the number of donated hours and donated dollars for the TyRex Family Care Package Program will be presented. Nothing specific to any recipient employee will be revealed. Donating Employees will be acknowledged but not their specific number of vacation hours donated.

So, what describes and defines a **SPECIAL by Design® business family? In short, it is serving with others in meaningful relationships with leadership that truly cares about the well-being of every individual of the TyRex Family.**

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II. Donating Employee

Donation Request Procedures- Donating Employee

Procedures

First off, **THANK YOU** for being so generous in pursuing the donation of earned accrued vacation hours. Rest assured that these hours will not go unused or unappreciated by your TyRex Family. In turn, they will be available to those in our TyRex Family who have come across an unforeseen hardship. With that being said, we thank you on their behalf for your truly personal commitment to gratitude fulfilled.

Donating Employee:

A **Time-Off Request Report Form** must be submitted to Judy Rock, Human Resources Representative. In order for the timely transfer of leave, forms must be submitted in the most immediate manner possible.

Employees may elect to donate an **unlimited** number of earned accrued vacation hours. Donated earned accrued vacation hours are politely requested to a minimum of 4 hours or more.

Each request shall provide the following information concerning the potential leave recipient:

- Your Name, Employee Contact Information, Employment Status, and Hours being donated.

The Donating employee will be notified via a **letter of gratitude** denoting their number of hours contributed and remaining accrued vacation hours as of a specific date.

III. Nominating Employee

Procedures

Nominating an Employee for the TyRex Family Care Package

When nominating a fellow employee to receive a TyRex Care Family Package, the nominating party must complete the **Request to Nominate/TyRex Family Care Package Form** and submit it to the Human Resources Representative. All nominations will remain anonymous.

Reasons for nominating an employee include but are not limited to the following:

- Employee Illness
- Family Emergency
- Other/FMLA Related Circumstance

If the request is approved or denied, the nominating employee will not be notified of the decision as it is the TyRex Family's request to keep the care package recipients name and need confidential.

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IV. Recipient Procedures

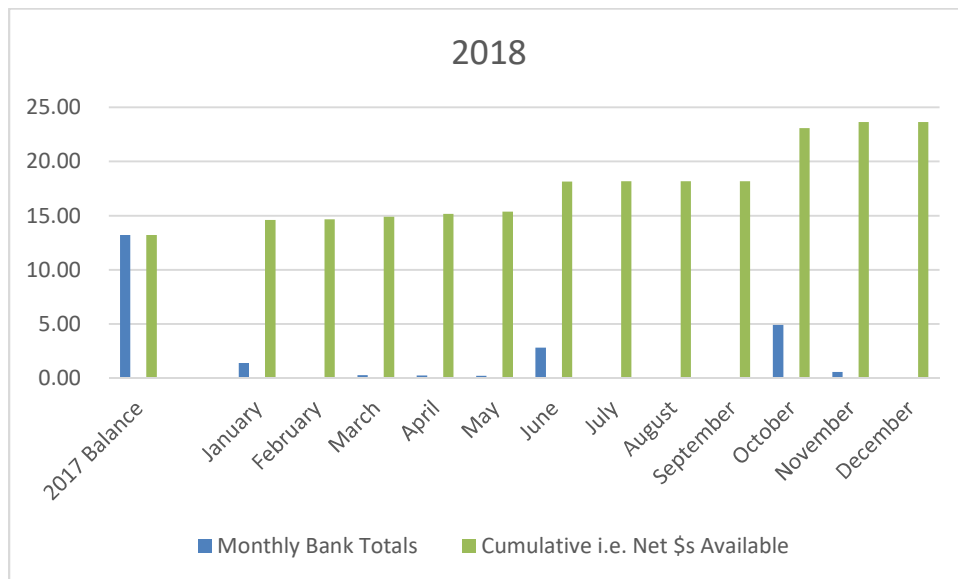
Procedures

Nominated and Approved Recipient Employees will be contacted by Human Resources to discuss eligibility requirements. The employee must accept or deny the TyRex Family Care Package. The amount of funds to be distributed will be determined by the TyRex Leadership Team. Funds will be distributed to the recipient employee in accordance with TyRex Accounting procedures. The TyRex Family Care Package may be considered compensation and may be accompanied by a 1099 form if applicable. The recipient of TyRex Family Care Package will remain Anonymous.

The amount of funds distributed to the recipient employee will range from \$50 - \$500 per request.

Again, if the request is approved, the nominating employee will not be notified of the decision as it is the TyRex Family's request to keep the care package recipient's name and need confidential. As part of the TyRex Family's birthdays, anniversaries, and volunteer hours monthly event, an announcement related to the number of donated hours and donated dollars for the TyRex Family Care Package Program will be announced.

2018 TyRex Family Care Package Bank



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V. Appendix

- A. Request to Donate Earned Accrued Vacation Hours**
- B. Request for TyRex Family Care Package Form**

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A. Request to Donate Earned Accrued Vacation Hours

**Request to Donate Earned
Accrued Vacation Hours**

TyRex Family Care Package

| | |
|---------------|---------------|
| Employee Name | TyRex Entity: |
| Job Title | Department |

TO BE COMPLETED BY EMPLOYEE:

| | |
|--|---------------------------|
| TyRex Family Care Package | Donation of Accrued Hours |
| <i>Request to Donate Paid-Time Off Accrued Hours</i> | |

| | |
|-------------------------------------|--|
| Total Donated Hours _____ | <i>By signing this form, you are aware that you have opted out of utilizing your time off hours and have opted to voluntarily donate your time off hours to be entered into a general TyRex Employee Care Package Donation Account that will be used as TyRex Management sees fit. You are aware that these hours will no longer be considered yours and will not be refunded back to you.</i> |
| Employee Signature: _____ | Date: _____ |
| Supervisor Signature: _____ | Date: _____ |
| Department Manager Signature: _____ | Date: _____ |

TO BE COMPLETED BY TYREX ENTITY FINANCIAL PARTNER AND TYREX PAYROLL MANAGER

Accrued Vacation Hours: _____ **As of** _____

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 Last Updated: 1/8/2019

B. Request for TyRex Family Care Package Form

Request to Nominate Employee for a TyRex Family Care Package Form

Please Clearly Print

| | | |
|--|---------------------------------|---|
| TO BE COMPLETED BY MANAGER OR CO-WORKER OF NOMINEE | | |
| Nominee Name (Last, First, MI) | | |
| TyRex Company Name: | Work Phone | email: |
| <p>Nominee (Employee) Status: Full-Time Regular and Part-Time Status Employees are Eligible</p> <p>Check the Reason for the Request:</p> <p><input type="checkbox"/> Employee or Family Illness</p> <p><input type="checkbox"/> Family Emergency</p> <p><input type="checkbox"/> Other Hardship Circumstance</p> | | |
| Acknowledgement that Nominee Chooses to participate in the Program HR COMMENTS: | | Acknowledgement that Nominee Chooses to NOT participate in the Program |
| SIGNATURE OF TYREX MANAGER OR CO-WORKER | | |
| NAME (PLEASE PRINT): | | TYREX ENTITY: |
| SIGNATURE: | | DATE: |
| HUMAN RESOURCES SECTION | | |
| AMOUNT OF FUNDS TO BE DISTRIBUTED: | APPROVED: YES NO | |
| HUMAN RESOURCES SIGNATURE: | DATE: | |
| TYREX EXECUTIVE LEADERSHIP SIGNATURE: | DATE: | |
| ACCOUNTING VERIFICATION SIGNATURE: | DATE: | |

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To receive TyRex Dinocoin credit for reading this TyRex Family Publication, **The TyRex Family Care Package (TFPCC#003 (III))**, please give us your opinion on how this publication will affect TyRex's company culture in a positive way and bring us to our Tier ONE culture.

1. BinC stands for what?

A: _____

2. What are the reasons for nominating an employee?

A: (1) _____ (2) _____ (3) _____

3. Has the \$ amount of our TyRex Family Care Package Bank increased or decreased since 2017?

A: _____

4. Is there a form to fill out for donating vacation hours? (yes or no)

A: _____

5. True or False: You can nominate yourself for the TyRex Family Care Package?

A: _____

Signature Print Name TyRex Entity Date

Please return this signed document to the TyRex HR TEAM of Judy Rock or Chantal Robinson to receive your TyRex Dinocoins.

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