

# **DOCUMENTATION**

## Annotated Bibliography

**Aitken, Peter, Fulton, Jennifer, Plumley, Sue, and Wempen, Faithe. Microsoft Office 97 Professional 6 in 1. Indianapolis: Que Corporation, 1997.**

This book/manual provides detailed instructions in the uses and user setup for Microsoft Outlook, Power Point, Access, Excel, and Word. It also covers some of the differences between the operating systems of Window 95, and Windows NT with respect to each program mentioned above.

**Anderson, Kristin, and Zemke, Ron. Delivering Knock Your Socks Off Service. New York: Performance Research Associates, Inc., 2002.**

The authors explain in detail the attitude required to achieve exceptional customer service. They offer many tools and examples to help the reader fully understand the principles and factors that affect customer perception of the service that they receive from representatives of companies that they do business with.

**Biehl, Bobb. 30 Days to Confident Leadership. Nashville: Broadman and Holman Publishers, 1998.**

Mr. Biehl a manual for developing leadership skills. The layout, with 30 sections, is intended to be covered one section per day. Each section teaches aspects surrounding a central theme for that section. This is a good tool for all managers. The presentation gives useable information in bite sized chunks exclusive of each other.

**Brown, Steven W. 13 Fatal Errors Managers Make and How You Can Avoid Them. New Jersey: Fleming H. Revel Company, 1985.**

The author identifies 13 pitfalls of management as it relates to the manager's effectiveness in his or her eyes as well as the eyes of the company. This would be a good tool for all managers or aspiring managers. It is short and to the point. The pitfalls were compiled from many surveys all over the world. The author has defined 13 major delineations from those results.

**Dixon, Robert L., and Arnett, Harold E. The McGraw-Hill 36-Hour Accounting Course. New York: McGraw-Hill, Inc., 1993.**

The authors state that this book is designed for the person who has had little or no formal training or experience in accounting, or who had only a course or two some time ago and has forgotten most of it, and whose current or possible future occupation calls for a breadth of understanding of the internal or financial affairs of a business enterprise.

**DuBrin, Andrew J. The Practice of Supervision. Dallas: Business Publications, Inc., 1980.**

Mr. DuBrin states five objectives for this book: 1) to provide valid information about the human aspects of supervision; 2) to present current information about achieving results through people; 3) to provide a comprehensive overview of traditional supervisory topics; 4) to provide a useful and interesting format for supervisors and prospective supervisors; 5) to place an emphasis on achieving insight into the human aspects of supervising people and dealing with the organization.

**Friedlob, George T., and Plewa, Franklin Jr. Financial and Business Statements. Hauppauge: Barron's Educational Series, Inc., 1991.**

The authors give a straight forward detailed overview about financial statements and their relevance. There is examples of ratio calculations and explanations of the significance of financial ratios as they pertain to business analysis. This is a good tool for financial managers and upper management.

**Gitomer, Jeffrey. Customer Satisfaction is Worthless. Customer Loyalty is Priceless. Austin: Bard Press, 1998.**

Mr. Gitomer, in very simple and concise format, describes a mindset and attitude necessary for the highest level of customer retention. This ideology is broken down and hammered into the reader. It makes sense and would be very useful for all members of any company that has customers.

**Hanna, Marshall J., Popham, Estelle L., and Tilton, Rita Sloan. Secretarial Procedures and Administration. Cincinnati: South-Western Publishing Co., 1978.**

The authors study the always evolving office environment, and offer advice and techniques to prepare secretaries for job entry as well as advancement. They cover many secretarial functions as well as preparation for potential functions that may be required of a secretary in the future.



**Jaderstrom, Susan, Kruk, Leonard, and Miller, Joanne. Professional Secretaries International Complete Office Handbook. New York: Random House, Inc., 1992.**

The Authors give an extensive manual on many tasks and responsibilities that are put on the shoulders of the secretary or office professional. They outline and describe many tasks from organizing meetings to writing policy manuals and from purchasing office supplies to proofreading documents.

**Johnson, W. Todd. International Direct Marketing Guide. Alexandria: Braddock Communications, Inc., 1990.**

The author analyzes the factors that must be considered when deciding whether or not to compete globally. He urges simplicity, and explains many of the cultural and other differences encountered when entering the global marketplace.

**Judge, William Q. The Leader's Shadow. Thousand Oaks: Sage Publications, Inc., 1999.**

Mr. Judge stated that he wrote this book to challenge conventional leadership thought and to improve leadership development practices by focusing on the complementary, internal aspects of the leadership experience.

**Knox, Frank M. Integrated Cost Control in the Office. New York: McGraw-Hill Book Company, Inc., 1958.**

The author discusses common problems and high costs in many offices. He then offers solutions and methods to control those costs and develop an efficient office. He notes differences in office cost control between small, medium and large businesses. This book is a good tool for office managers.

**Merriam-Webster, Inc. Webster's Business Writing Basics. Springfield: Merriam-Webster, Inc., 2001.**

This is a handbook of grammar, style, and punctuation designed to help business people say things properly. It also offers tips on using e-mail in business as well as proper etiquette for email.

**Mitchell, Mary, and Corr, John. The Complete Idiot's Guide to Business Etiquette. Indianapolis: Alpha Books, 2000.**

The authors provide easy to understand information about business etiquette. The format is clear and covers everything from speech to clothing. The book would be a good tool as a reference for managers and other business people that interact with others.



**Prasad, Benjamin S. Policy, Strategy, & Implementation. New York: Random House, 1983.**

Mr. Prasad discusses theories and real world cases relating to management policies and procedures. At the time of publication, this was one of the first text books in this subject area that had an international business delineation. According to Mr. Prasad, previous text books in this subject largely lumped policies and strategies into categories based on the particular environment of the company or product, rather than having different strategies for domestic and international operations.

**Race, Phil and Smith, Brenda. 500 Tips For Trainers. Houston: Gulf Publishing Company, 1996.**

The authors offer practical suggestions for training methods and forums. They offer topic specific lists of ideas for the trainer on everything from planning and preparation to evaluating the training sessions.

**Reichheld, Frederick F. The Loyalty Effect. Boston: Harvard Business School Press, 2001.**

Mr. Reichheld uses his life and experiences largely as examples in this explanation of the importance and dynamics of customer loyalty. He says that loyalty is the hidden force behind growth, profits, and lasting value.

**Robbins, Stephen P. Managing Today. New Jersey: Prentice Hall, 2000.**

Mr. Robbins focuses on building managerial competencies by discussing areas of management knowledge including decision making, organizing and leading. He analyzes these skills in the contexts of diversity, globalization, quality, ethics, social responsibility, entrepreneurship and organizational learning.

**Rosania, Robert J. The Credible Trainer. Alexandria: The American Society for Training and Development, 2001.**

Mr. Rosania wrote this book as a guide for developing a strategy to achieve a successful career as a trainer. He gives the reader a structure for evaluating ones training skills on a macro level. Rather than focus on the intricacies of specific training techniques, he concentrates information to the cause of developing the trainer's credibility and organizational awareness largely to the benefit of career development.

**Seybold, Patricia B. Customers.com. New York: Times Books, 1998.**

The author focuses on electronic commerce (e-commerce) and strategies involved in evolving your company to utilize this relatively new form of commerce. She uses case studies within the book to illustrate examples. The key point is analyzing current customers and assessing how to serve them better with integration of the internet and e-commerce in your marketing strategy.

**Sindell, Kathleen. Loyalty Marketing for the Internet Age. Chicago: Dearborn Financial Publishing, Inc., 2000.**

The author provides an in depth analysis of building customer loyalty while decreasing marketing costs. This is achieved through e-commerce and a company's internet strategy. She gives solid examples of companies that have successfully brought their customer loyalty to a whole new level through the internet with very little added cost to the organization.





## Automated Food Systems, Inc.

March 17, 2004

Dear Evaluators:

My name is Tina Walser, I am a shareholder of and CFO for Automated Food Systems, Inc. where Shannon Consalus is employed. I came to AFS thirteen years ago with a Bachelors degree in Business Administration specific to Finance. Over the years I have been involved in almost every facet of the business including customer relations, marketing, human resources, engineering/drafting documentation and inventory control in addition to accounting and financial responsibilities.

I have known Shannon and served as her immediate supervisor for almost six years. Shannon initially came to us to fill a basic clerical position however, within two years of her employment she was promoted to the bookkeeping department. Shannon is a quick study and her attention to detail and eagerness to learn new skills made it an easy transition. Now she serves as the Office Manager and handles the bookkeeping, human resources and general company business as well as supervises the clerical office staff.

*Business Account Management (MGMT 3351):* Shannon has been considerably involved with the bookkeeping since January 2000 and has managed the bookkeeping the last two years. She has considerable experience with Peachtree and Accpac Plus accounting software packages. She maintains, compiles and organizes accounting data including Accounts Payable, Accounts Receivable, Payroll, Financial Statements and Budget.

*Business Event Planning (BUAD 3352):* Shannon is responsible for planning and preparation of special events like demonstrations for potential customers. She coordinates all travel of our associates for trade shows, installations and service trips. We occasionally give tours for international guests through various Chamber organizations. Shannon assisted in coordinating a visit to our facility by Governor Rick Perry, which included a press conference.

*Business Communications (BUAD 3353):* Shannon's responsibilities as the office manager and the bookkeeper require excellent communication skills, both verbal and written. Over her six years of employment with AFS she's developed a professional yet warm rapport with our customers and vendors. Not all dealings with vendors and customers are positive, for example, late customer payments or problems with a bill, yet Shannon maintains an exceptional demeanor. She has completed a business-writing seminar and was mentored by the company Vice President of Marketing, Wanda D. Walser, whom has a journalism degree from Texas Tech and is also a published writer. Shannon's written and verbal communication requirements run a full spectrum of

D-6



business situations and she has taken deliberate steps to improve on the skills already there.

Customer Service (BUAD 3354): When Shannon's employment began in 1998, one of her primary responsibilities was to handle incoming orders from customers. This involved taking the order, providing pricing and availability as well as assisting in the packing and arranging the shipment. Shannon is extremely personable and quickly developed a professional and friendly rapport with customers. Replacement parts are critical to our business and the lack of those parts can, in some cases, shut down the customers' plant, costing them thousands of dollars. Shannon's attention to details and her diligence in following each order through to shipment has made her a favorite with our customers. Mistakes can and do happen from time to time and how those errors are handled is critical. Even in those situations, Shannon rises to the occasion, making sure she has a solution in mind before informing the customer of any problems. Through her work with our customers Shannon has provided management with valuable suggestions for making our customer service better. For instance, making changes to the inventory readily available to those taking and filling the orders so availability of stock can be provided to the customer at the time they place their order.

Computer Applications in Business (BUAD 3355): Shannon already had some basic computer skills when she came to us. Since her employment here, she's learned the following applications: Lotus 123, MS Excel, Accpac Plus for Accounting, Pagemaker, MS Word, Peachtree and Powerpoint. We rely on electronic mail (e-mail) heavily and Shannon fully utilizes that. She's also experienced with the internet in relation to upgrades of applications, downloading pertinent information, research and handling certain financial transactions.

Business Human Relations Management (MGMT 3356): Shannon maintains all personnel records and stays abreast of any changes in employment/payday laws. Shannon also manages the office staff so she conducts the interview process, orientation and evaluations of those she is responsible for. She is responsible for gathering all pertinent information from a new hire. She provides them with a tour of the facility, and introduces them to AFS employees. Shannon assisted with the research and compilation of the first written Employee Handbook for AFS. She's maintained updates and has made suggestions based on her experience with personnel and general record keeping. Shannon is also the one who explains the handbook to new hires and is responsible for reporting to upper management when a policy is overlooked. Currently Shannon is working with me to update our existing Handbook.

International Business Relations (MGMT 3358): Although Shannon's responsibilities do not require her to travel, we are an international company and she is responsible for the international bookkeeping. She is versed in currency related issues such as exchange rates and their affects. We have worked with customers in Mexico, Canada, Europe, Asia, South America, South Africa, Egypt, as well as in the US. Shannon assists with exporting and importing of goods and prepares most if not all the documentation for those areas and has experience working with freight forwarding companies both located



in the US and elsewhere. We participate in international trade shows and it is Shannon that manages the travel arrangements. At times this may require research of the area not just for safety, but also to gain a better understanding of the culture so that our employees who will be traveling have some background.

Executive Administrative Procedures (BUAD 3359): Shannon's initial employment required most if not all Receptionist and clerical skills. In 1999, Shannon attended the "How to be a Take Charge Assistant" seminar. Shannon is proficient in telephone techniques, filing, processing and shipping customer orders, mail processing and disbursement, special projects such as organizing customer lists and information to budget proposals, sales and marketing material mailings.

The Leader's Role in Supervision (BUAD 3360): Shannon is a good leader in the office. She is conscientious about her personal relationships with employees. Managing the office has given Shannon experience in leadership and supervision. Often managers apply the same method(s) of communication to everyone, but Shannon is very conscious of each person individually and can adapt quickly to address each person according to their personality. She prefers to work with people one on one instead of applying a general rule to everyone. Shannon frequently makes suggestions to upper management on ways to motivate the employees, whether it be additions to benefits or simple acknowledgement when a job is well done. She is also quick to bring communication errors or weaknesses and recommended solutions to our attention as well. We are small and tend to look at one another as family. Shannon has juggled her obligations as an employee with her personal relationships well. It takes some getting used to when you go from being one of the employees to managing your co-workers. She welcomes constructive criticism and believes positive feedback equally important. She has further set an example to her staff by empowering them through that same positive feedback. Because we are a small business each employee wears several hats. For some this can be overwhelming and risks sacrificing the quality of all tasks for the betterment of one. Shannon recently implemented a task/job request form those outside the office staff to use as instruction for the staff. This has proved invaluable as it helps Shannon balance the workload of her staff because she can see exactly what they are working on as well as when the tasks are required to be complete. This has increased the overall efficiency of the office.

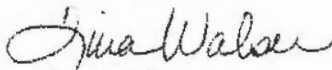
Business Training and Development (BUAD 3362): Shannon has experience in training of the office staff. She is also involved in the beginning stages of developing a training program for our shop workers. This will include safety-training, certifications for certain types of shop equipment, for example forklifts and documentation.

Desktop Publishing (BUAD 3364): Shannon is extremely experienced with desktop publishing. When she first began employment she used Pagemaker. Since then she's become proficient in PowerPoint, Excel & Lotus. She has designed numerous office forms including company letterhead, job request forms, travel preparation sheets, customer notices. She has assisted the Marketing Manager with layout of sales materials

and mailings, she's prepared presentations for end of the year reporting, put a digital program together for Corporate Christmas party to share with our families.

Office Management (MGMT 3365): Shannon began managing our corporate office two years ago. Her responsibilities include maintaining and monitoring 1) employee records, 2) health, general liability, auto and foreign liability insurances, 3) coordinating with CPA on the filing of corporate records, 4) company cell phones and vehicles and 5) general office supplies.

Sincerely,



Tina Walser  
CFO

tlw



Automated Food Systems, Inc.

Aged Payables

As of Apr 13, 2004

Filter Criteria includes: Report order is by Name. Report is printed in Detail Format.

Vendor ID Vendor	Invoice/CM #	Date Due	0 - 30	31 - 60	61 - 90	Over 90 days	Amount Due
432 ACE CASTERS	49670	4/18/04	585.70				585.70
432 ACE CASTERS			585.70				585.70
350 ARIES FREIGHT SYSTEMS	D-842040	4/23/04	581.00				581.00
350 ARIES FREIGHT SYSTEMS			581.00				581.00
129 AST WATERJET INC.	10770	4/4/04	787.50				787.50
	10795	4/17/04	1,269.00				1,269.00
129 AST WATERJET INC.			2,056.50				2,056.50
261 BRADFORD DERUSTIT CO	17183	4/21/04	164.96				164.96
261 BRADFORD DERUSTIT CO			164.96				164.96
205 COASTAL ALLOYS, INC.	8138200	3/31/04	521.32				521.32
	314672	4/10/04	90.52				90.52
	314739	4/22/04	16.80				16.80
205 COASTAL ALLOYS, INC.			628.64				628.64
224 CONTROL VALVES, INC.	I-45880-0	4/15/04	1,387.61				1,387.61
224 CONTROL VALVES, INC.			1,387.61				1,387.61
171 DALLAS/FT WORTH PLAST	90256	4/7/04	579.16				579.16
	90384	4/11/04	38.49				38.49
	90398	4/14/04	5,184.71				5,184.71
	90478	4/16/04	273.00				273.00
171 DALLAS/FT WORTH PLAST			6,075.36				6,075.36
375 DIGITAL VIDEO ASSOCIAT	7102	4/10/04	39.78				39.78
375 DIGITAL VIDEO ASSOCIAT			39.78				39.78
182 ESSENTEK CORPORATION	04028	4/23/04	2,273.25				2,273.25
182 ESSENTEK CORPORATION			2,273.25				2,273.25
126 EXAIR CORPORATION	136286	4/11/04					

Automated Food Systems, Inc.

Aged Payables

As of Apr 13, 2004

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Vendor ID Vendor	Invoice/CM #	Date Due	0 - 30	31 - 60	61 - 90	Over 90 days	Amount Due
126 EXAIR CORPORATION			61.89				61.89
352 FRONTIER BOLT COMPAN	17469	4/14/04	127.05				127.05
	17471	4/14/04	277.00				277.00
	17470	4/14/04	31.23				31.23
	17600	4/24/04	180.64				180.64
	17648	4/28/04	28.92				28.92
352 FRONTIER BOLT COMPAN			644.84				644.84
260 GEA OF TEXAS, INC.	2037702-01	3/31/04	258.75				258.75
	2037801-01	4/2/04	267.67				267.67
	2037801-02	4/3/04	399.35				399.35
	2038036-01	4/11/04	35.36				35.36
	2038031-01	4/15/04	1,972.16				1,972.16
	2038036-02	4/17/04	90.37				90.37
260 GEA OF TEXAS, INC.			3,023.66				3,023.66
377 INDUSTRIAL POWER & HA	88941	4/10/04	672.16				672.16
	89016	4/17/04	8,468.30				8,468.30
377 INDUSTRIAL POWER & HA			9,140.46				9,140.46
198 J&L INDUSTRIAL SUPPLY	766329	5/1/04	310.74				310.74
198 J&L INDUSTRIAL SUPPLY			310.74				310.74
438 L.C. THOMSEN, INC.	149579	4/11/04	359.60				359.60
	149573	4/11/04	136.82				136.82
438 L.C. THOMSEN, INC.			496.42				496.42
264 MACHINISTS TOOLS & SUP	314544	4/23/04	285.50				285.50
264 MACHINISTS TOOLS & SUP			285.50				285.50
392 MARKETING & TECHNOLO	20841	4/7/04	500.00				500.00
392 MARKETING & TECHNOLO			500.00				500.00
413 METROPLEX WELDING SU	DA03040055	5/1/04	17.00				17.00
413 METROPLEX WELDING SU							

D-15

**Aged Accounts Payable  
Report prepared by  
Shannon Consalus.**



Automated Food Systems, Inc.

Aged Payables  
As of Apr 13, 2004

Filter Criteria includes: Report order is by Name. Report is printed in Detail Format.

Vendor ID Vendor	Invoice/CM #	Date Due	0 - 30	31 - 60	61 - 90	Over 90 days	Amount Due
137 P&W MACHINE	36337	4/29/04	375.60				375.60
	36499	4/29/04	215.60				215.60
	36501	4/29/04	540.00				540.00
	36500	4/29/04	346.50				346.50
	36502	4/29/04	480.00				480.00
			1,957.70				1,957.70
349 POLY HI SOLIDUR	2286618	3/1/04		972.40			972.40
	2300498	3/25/04	507.56				507.56
			507.56	972.40			1,479.96
366 R&L PLATING	70460	4/24/04	111.40				111.40
				111.40			111.40
276 RAWLINSON ELECTRIC	632432107	3/31/04	-1,145.90				-1,145.90
	658610801	4/17/04	734.18				734.18
	348844201	4/21/04	636.50				636.50
	658621601	4/22/04	2,408.50				2,408.50
			2,633.28				2,633.28
345 RELIANCE METAL CENTER	122305	3/31/04	661.56				661.56
	123829	4/24/04	2,619.90				2,619.90
			3,281.46				3,281.46
228 REYNOLDS COMPANY	1357799-00	4/11/04	3,150.30				3,150.30
				3,150.30			3,150.30
130 SANDPAPER OF TEXAS	84850	4/10/04	157.85				157.85
	85204	4/22/04	197.50				197.50
			355.35				355.35
369 SENATOR INTERNATIONA	123247	4/17/04	1,320.38				1,320.38
	123143	5/1/04	5,306.53				5,306.53
			6,626.91				6,626.91
231 SHEPHERD CONTROLS	F-69654-0	4/15/04	144.23				
	F-69654-1	4/23/04	554.86				
			D-16				

**Aged Accounts Payable  
Report prepared by  
Shannon Consalus.**

Automated Food Systems, Inc.  
**Aged Payables**  
 As of Apr 13, 2004

Filter Criteria includes: Report order is by Name. Report is printed in Detail Format.

Vendor ID Vendor	Invoice/CM #	Date Due	0 - 30	31 - 60	61 - 90	Over 90 days	Amount Due
243 SIPCO	I-11008-0	4/22/04	1,363.40				1,363.40
243 SIPCO			1,363.40				1,363.40
139 T-ELECTRA/TICA OF DALL	33940	4/10/04	1,450.00				1,450.00
	33956	4/14/04	10,353.68				10,353.68
139 T-ELECTRA/TICA OF DALL			11,803.68				11,803.68
237 UNITED AUTOMATION	434206	4/11/04	202.44				202.44
	434101	4/14/04	136.98				136.98
	200924	4/11/04	-2.00				-2.00
237 UNITED AUTOMATION			337.42				337.42
112 W.W. GRAINGER, INC.	936-231824-9	4/21/04	106.71				106.71
	197-414530-0	4/23/04	53.09				53.09
112 W.W. GRAINGER, INC.			159.80				159.80
321 WATLOW	2186913	3/31/04	822.36				822.36
321 WATLOW			822.36				822.36
140 WATT PUBLISHING CO.	I037351	4/23/04	1,399.00				1,399.00
	M002761	5/1/04	300.00				300.00
140 WATT PUBLISHING CO.			1,699.00				1,699.00
360 WEARGUARD	53554275-1	4/16/04	738.88				738.88
360 WEARGUARD			738.88				738.88
Report Total			64,520.90	972.40			65,493.30





Today photo by DAVID GOODSPEED

Texas Gov. Rick Perry talks shop with some employees of Automated Food Services Feb. 13. In a press conference, he discussed education, homeland security and the economy.

## Gov. Perry visits Duncanville

By MARK ROBINSON  
News Editor

Days after delivering his State of the State address to the Texas legislature, Gov. Rick Perry discussed the economy, education funding and homeland security at a press conference in Duncanville.

The event was held at Automated Food Services Feb. 13.

The company's vice president Wanda Walser introduced the governor by commenting on his dedication to taxpayers and education.

"We believe that government needs to follow our example and focus on priorities, eliminate needless expenditures and rebuild the enterprise to weather the storm," she said. "If government makes the right and hard decision now, Texas families and business can benefit for years to come."

Perry started his speech by commenting on a warning sign on a neighboring machine used by Automated Food Services to make their food products.

The sign said, "This machine pays your salary. Take care of it."

"That can be somewhat of our slogan for what we're talking about today relative to the taxpayer," Perry said. "Take care of the taxpayer, they pay your salary. It's truly a message for government is to take care of the taxpayer because they're the engine that drives this great vessel of this state."

As the country simmers in a Crockpot of a downturn economy, Perry said the buck should not be passed on to the taxpayers.

"There are millions of people just like these two (Walser and her husband, Automated President Glenri) ... in Duncanville who work hard, they pay their taxes and they contribute to the world's 10th largest economy," Perry said. "With the state of Texas facing a tough fiscal challenge, we have some believing it's time for us to raise taxes. I'm here today to deliver a simple message — we should not ask our families and our small businesses to make even more sacrifices so that government can get even bigger."

Perry said the state budget should be put under the microscope and every expenditure should not be immune from inspection.

The governor praised Texas' homeland security commenting that \$150 million of federal funds had been put into state hands for such use.

"I happen to think that our state is as secure as it has ever been relative to the issue of security and safety of our citizens," Perry said.

He added the federal, state and local authorities have worked closely together since Sept. 11, 2001.

As the state lumbers on through a budget crunch, Perry said legislators and his office are on the brink of creating a new education funding process, which would rid Texas of the Robin Hood program.

He said he hopes to be involved in a vigorous debate and have the new plan finished before the next legislative session.

"Obviously, this is a very complex issue that has thwarted some of the brightest minds in Texas for many years," Perry said. "It is there and we

**Newspaper Article on  
Gov. Perry's visit to  
Duncanville, Texas**



# Gov. Rick Perry, pictured with the President and Vice President of Automated Food Systems, Inc., Glenn and Wanda Walser

Photographs of Gov. Rick Perry's visit to Automated Food Systems, Inc. (Pages D-19 to D-20)





# Gov. Rick Perry took pictures with employees of Automated Food Systems, Inc. after the Press Conference



Photographs of Gov. Rick Perry's visit to Automated Food Systems, Inc.

ft to right: Terry Knight, Misa Fazal, Tina Walser, Gov Perry & Shannon Consalus



## Shannon Consalus

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**From:** Shannon Consalus  
**Sent:** Thursday, January 30, 2003 3:27 PM  
**To:** shannon@afstexas.com  
**Subject:** Holiday Inn Express Priority Club

Your Confirmation Number is 66142405  
Please use your confirmation number to reference your reservation should you need to make changes or cancel.

Your Priority Club Rewards number is 182588734 and your pin is 2749.

You can edit your preferences in the Your Account section.

### Reservation Information

Guest: ROBERT WALSER  
Priority Club(r) Rewards Number: 182588734  
Hotel: DEMOPOLIS, AL  
943 Highway 80 West

DEMOPOLIS, AL 36732 UNITED STATES  
Phone number: LOCAL PHONE: 1-334-2899595  
RESERVATIONS:

Arrival Date: Feb 7, 2003  
Number of Nights: 7  
Check-In Time: 03:00 PM

Check-Out Time: 11:00 AM

Number of Rooms: 1  
Number of Persons: 1  
Room Type: 2 Queen Beds, Non-Smoking

Rate Type: Flex/Corporate Rate Change to Group Booking  
Rate: 69.00 USD per room, per night \*  
CONVERT CURRENCY  
Tax: 7% per night and not included in rate effective February 7, 2003 thru February 14, 2003  
Early Departure Fee: 30.00 USD  
Gratuity: EXCLUDES GRATUITY  
Modify or Cancel Policy: If you need to modify or cancel your reservation, please do so before 6:00PM (local hotel time) on February 7, 2003 or your credit card will be billed for the first night.



**Shannon Consalus**

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**From:** Shannon Consalus [shannon@afstexas.com]  
**Sent:** Friday, February 06, 2004 10:51 PM  
**To:** consalus4@aol.com  
**Subject:** FW: Yahoo! Travel Holiday Inn

-----Original Message-----

From: Yahoo!Travel [mailto:yahoo@travelocity.com]  
Sent: Wednesday, January 21, 2004 11:31 AM  
To: SHANNON@AFSTEXAS.COM  
Subject: Yahoo! Travel Reservation Information

Dear Yahoo! Travel Customer:

Thank you for making your travel arrangements through Yahoo! Travel.

RESERVATION INFORMATION

Your Trip ID is: 698177877683  
Itinerary for:  
GLENN WALSER  
CHRIS CONSALUS

Customer Service Center: In the United States call 1-888-342-5878  
(TDD/Hearing Impaired: 1-800-555-7585). Outside the United States call  
1-210-522-1580.

Your Trip Details

---

" HOLIDAY INN SELECT ATLANTA AIR  
" Holiday Inn  
" 4669 AIRPORT BLVD  
" COLLEGE PARK GA 30337  
"Check-in: Fri, Feb 06  
"Check-out: Sat, Feb 07  
"Room: 1 room, 1 night  
" This hotel has been prepaid. Please print  
" this page if you require a paper receipt.

Policy: The rate below is based on double occupancy unless otherwise  
noted. Charges for extra persons and / or children may apply and will be  
due directly to the hotel.

Guaranteed Late Arrival

Any incidental charges such as extra person fees, parking, phone calls,  
room service or energy surcharges will be handled directly between you and  
the property.

Cancellation Policy

\* Bookings are subject to a \$25.00 USD fee for any cancellation or change.  
\* If cancellation occurs within 2 days of check-in, a 1 night charge will  
be assessed. \* Any changes made within 2 days of check-in, may also be  
subject to a 1 night charge. \* For cancellation and change purposes, check  
in date is considered to be 12:01am Central Standard Time of the day on  
which you are scheduled to check in to your hotel. \* For questions  
regarding your hotel reservation, please contact Yahoo! Travel  
Service at 1-888-342-5878

Status: Confirmation Code 65288777  
" Questions about this reservation? Call 888-709-5  
" (210-521-5871 if outside the U.S. or Canada).  
Hotel Price Summary Total: USD 71.55

**Hotel Reservation Email  
Confirmation prepared by  
Shannon Consalus.**

Hotel	Guests	Night	Rate Per Night	Taxes/Fees	Total Price
"	2 adults				
"		Fri, Feb 06	62.43		
"			62.43	9.12	71.55

CHANGES TO YOUR RESERVATION

Should you need to change this reservation, please visit Yahoo! Travel and select 'Current Reservations' or use the following address:

<http://travel.yahoo.com>

You can also call the Yahoo! Travel Customer Service Center for assistance with any changes. For faster service you need to have your Trip ID ready.

Your Trip ID is: 698177877683

Remember that any changes to your reservation could result in a fare change.

HOW TO CONTACT THE CUSTOMER SERVICE CENTER

Telephone within the United States:	1-888-342-5878
TDD/Hearing Impaired telephone service within the United States:	1-800-555-7585
Telephone for customers outside the United States:	1-210-522-1580
Fax number within the United States:	1-800-944-0005
Fax number for customers outside the United States:	1-210-258-2034
E-mail address: Thank you for using Yahoo! Travel.	

EQMWLS

**Hotel Reservation Email  
Confirmation prepared by  
Shannon Consalus.**



Body.txt

Delta confirmation #: POVG5H

Passenger(s):

(1) CONSALUS,CHRISTOPHER KEE SkyMiles ID: 2446061547

(2) WALSER,GLENN E SkyMiles ID: 2446062057

Day/Date	Flight	Status	Carrier	City	Time	Seat	Class	Meal
----------	--------	--------	---------	------	------	------	-------	------

---

Sat 07FEB	7798	OK	Delta	LV ATLANTA	1030A		Coach	Lunch
-----------	------	----	-------	------------	-------	--	-------	-------

Sun 08FEB				AR CAPE TOWN	810A			
-----------	--	--	--	--------------	------	--	--	--

Operated by S AFRICAN

Fri 13FEB	7799	OK	Delta	LV CAPE TOWN	815P		B Elite	Dinner
-----------	------	----	-------	--------------	------	--	---------	--------

Sat 14FEB				AR ATLANTA	815A			
-----------	--	--	--	------------	------	--	--	--

Operated by S AFRICAN

Itinerary copy only. The ticket may/may not be issued.

For further information visit <http://www.delta.com>

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Body.txt

Thank you for choosing Delta.

For your convenience, you will find your e-ticket Receipt and Contract Provisions attached to this e-mail. For additional information on this reservation, or to make changes, please contact Delta at 800-221-1212. You may also check flight information using delta.com or the Delta FLIGHTLINE at 800-325-1999.

Next time you go somewhere, go to delta.com first, for the lowest fares and the fastest way through the airport.

---

ONLINE CHECK-IN - Enjoy the fastest way to the gate. Use delta.com's Online Check-in from 24 hours to 30 minutes before departure.  
<http://www.delta.com/checkin>

CAR RENTAL RESERVATIONS - Provided by HERTZ  
Save on your next car rental! To get a fast quote and their lowest rates, visit:  
<http://offers.hertz.com/reservations>

HOTEL RESERVATIONS - Provided by PlacesToStay.com  
You have your plane ticket, now visit us to complete your stay.  
<http://delta.placestostay.com>

---

You have received this e-mail because you elected to receive your Electronic Ticket receipt sent to you via e-mail. If you would like to take advantage of other Delta e-mail programs featuring special fares, promotions, information and flight updates, please visit:

<http://www.delta.com/emailprograms> or <http://www.delta.com/notifications>

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Quality • Simplicity • Dependability  
**Automated Food Systems, Inc.**

1034 Explorer Street \* Duncanville, Texas 75137 \* United States of America  
 Tel. + 972-298-5719 Fax + 972-709-6191

**SAMPLE ONLY**

"Letter of Shipment"  
 Send the day goods are plu  
 by forward

<b>FACSIMILE TRANSMISSION</b>		From/Von/De <b>Shannon Consalus</b>
SEND TO/AN/A L'ATTENTION DE/ATENCIÓN Company Name/Firmenname/Société/Compañía Designado <b>JAVA Development Trading Co.</b>		Date/Datum/Date/Fecha <b>18 August 1998</b>
Attention/Zu Händen von/A l'attention de/Atención <b>Mr. Chan Chung Kin, Managing Director</b>		Fax number/Fax Nr/N° de fax/No. del fax <b>+972-709-6191</b>
Fax Number/Fax Nr/N° de fax/No. del fax <b>011-852-2806-0377</b>		Total pages <b>1</b> Anzahi der ubermittelten Time: _____
Reference/Referieren/Référence/Referencia de <b>Shipment of Equipment</b>		Nombre des pages Páginas totales
<input type="checkbox"/> Urgent Dringend Urgent Urgente	<input type="checkbox"/> Reply ASAP Rückantwort Réponse urgent attendus Responda cuanto antes	<input type="checkbox"/> Please comment Erläuterung bitte Commentaires attendus Comentar por favor
		<input type="checkbox"/> Please review Überprüfung A vérifier Revista por favore
		<input checked="" type="checkbox"/> For your information Kenntnisnahme Copie pour information De información

Dear Mr. Chan Chung Kin:

Thank you very much for your order. The (2) HOP-100s you ordered left our shipping docks this morning at about 9:00a.m. Central Standard Time. Tomorrow, 19 August 1998, we will be shipping (separate from the equipment) all additional information, which includes: Instructional and Market Entry Videos, (2) HOP-100 Manuals, (5) Marketing Brochures, (5) Corndog Fact Books, and Distributor Guidelines.

Kuehne & Nagel will mail you the (3) original Bill of Lading. You will need atleast one of the three originals in order for them to release the shipment to you.

Again, we thank you for the opportunity to serve you. If we can be of further assistance please contact us. We look forward to hearing from you on your progress.

Best regards,

Shannon Consalus  
 Sales Assistant  
 AUTOMATED FOOD SYSTEMS, INC.



**Automated Food Systems, Inc.**

D-27

---

1034 Explorer Street • Duncanville, Texas 75137 • U.S.A. • Tel. +972

URL:<http://www.afstexas.com>

**Corporate Letterhead  
prepared by  
Shannon Consalus**





MARCH 20, 2000

**ATTN:** CHARLES STONE, CHRIS CONSALUS, & RANDY WALSER  
**FROM:** SHANNON CONSALUS  
**RE:** PASSPORT INSTRUCTIONS

---

In order to obtain a Passport you will need the following:

- 1) A U.S. Passport Application completely filled out in all the white spaces, EXCEPT the applicant's signature. The signing of your application must be witnessed by the person you turn your application in to.
- 2) Proof of citizenship (i.e. Driver's License)
- 3) (2) Passport Photographs, 2" X 2" from chin to top of head  
(McCoys Photography on Wheatland takes Passport pictures)
- 4) An Application Fee of \$60.00 (We can either type you a check ahead of time or reimburse you the amount of your receipt --same for the pictures).
- 5) Finally, please take all of the above referenced items to one of the following authorized locations:

**COUNTY COURT CLERK**  
N. Dallas Govt Ctr  
10056 Marsh Lane, Suite 137  
Dallas, TX 75229

**POST OFC/COUNTY COURT CLERK**  
East Dallas Government Ctr.  
3443 St. Francis  
Fort Worth, TX 76101

**COUNTY COURT CLERK**  
600 Commerce  
Dallas, TX 75202-4606

**POST OFFICE**  
300 E. South Street  
Arlington, TX 76010-9998

**DOWNTOWN POST OFFICE**  
251 W. Lancaster  
Dallas, TX 75228

**\*PASSPORTS ARE VALID FOR 10 YEARS. MAKE PERSONAL CHECKS  
PAYABLE TO: PASSPORT SERVICES. IF YOU NEED FURTHER  
INFORMATION OR HAVE ANY QUESTIONS, PLEASE LET ME KNOW.**

D-28

*Thank you,  
Shannon*

**Corporate Memo in regards  
to obtain Passports for  
international travel prepared  
by Shannon Consalus**

*Shannon Consalus*

# SEMINARS

FRED PRYOR

## **Business Writing For Results**

**Business Writing for Results  
Seminar attended by  
Shannon Consalus  
(Pages D-29 to D-31)**



# TABLE OF CONTENTS



## 1 BE READER-CENTERED

Approaching Reader-Centered Business Writing.....	1
The Power of Perspective.....	2
The Subtleties of Visual Appeal.....	5
Professionalism and Service.....	7
A Closer Look at Word Choice.....	9
Polishing Your Profile.....	10

## 2 BE WRITER-CENTERED

Re-Approach the Writing Process.....	11
Lay the Foundation.....	12
The PRODUCE Model.....	13
PRODUCE Ideas Effectively.....	14
PRODUCE Refined Documents.....	16

## 3 FOCUS ON STYLE

Use the Six Keys to Clear Writing.....	19
Application of Clarity.....	20
Go for Basics.....	21
Engage Your Reader.....	23
Try Power Verbs.....	25
Eliminate Babble.....	27
Write for Results.....	28

## 4 CREATE POLISHED DOCUMENTS

Communicating Goodwill.....	29
Positioning Complaints.....	30
Delivering Good News.....	31
Delivering Bad News.....	32
A Framework for Professional Reports.....	33
Appendix A: Analysis of Reading Ease.....	35
Appendix B: Behavioral Style Summary.....	
Appendix C: Suggested Resources.....	



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**Automated Food Systems, Inc.**

**FAX COVER SHEET**

ATTN: \_\_\_\_\_  
COMPANY: \_\_\_\_\_  
FAX NUMBER: \_\_\_\_\_  
SUBJECT: PAST DUE ACCT. BALANCE

Dear Customer,

The following invoice(s) indicate(s) your account has a total past due balance in the amount of \$ \_\_\_\_\_:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If payment has already been made, we thank you and ask that you disregard this note. If payment has not been made, we ask that you contact us immediately regarding payment status. If you have any questions, comments or problems on the above mentioned invoice(s), please contact our Accounts Receivable department as soon as possible, as we are happy to assist you in clearing your account up.

If we do not receive payment or a reply from you within 7 business days from the date of this letter, we will be forced to take other measures.

We thank you in advance for your prompt and kind assistance in the resolution of your past due account.

Sincerely,

Shannon Consalus  
Accounts Manager

D-32

**Past Due Fax created and  
prepared by  
Shannon Consalus**





# UNITED PARCEL SERVICE

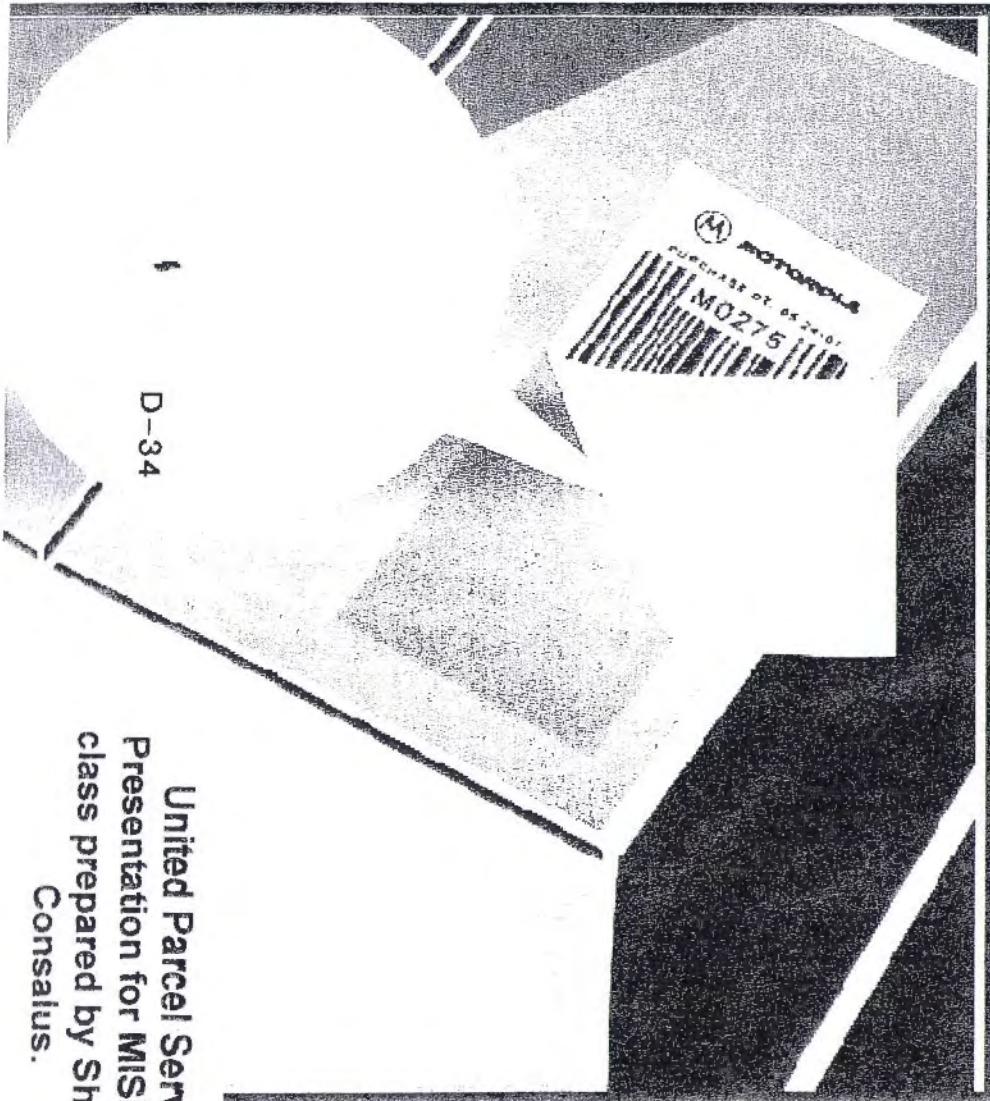
“Best Service, Lowest Rates”

D-33

**United Parcel Service  
Presentation for MIS330**  
Class prepared by  
Shannon Consalus  
(Pages D-33 to D-35)



# “SMART LABEL”



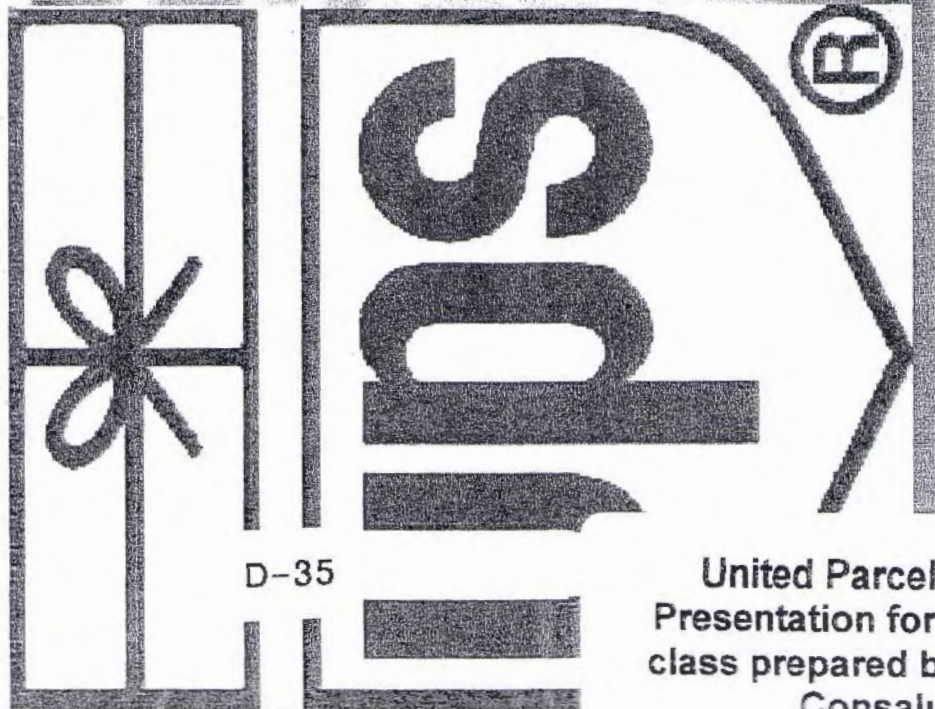
United Parcel Service  
Presentation for MIS330  
class prepared by Shanno  
Consalus.

- Customer Prints Label
- Better Daily Planning
- Reduce loading/unloading time
- Reduce Training Time
- Dispatch Planned prior to pick up





**Out With the Old...  
in With the New**



D-35



United Parcel Service  
Presentation for MISM3301  
class prepared by Shannon  
Consalus.



# UPS DAILY PACKAGE VOLUME

## Average Daily Package Volume (in thousands):

### U.S. domestic package:

Next day air	1,174
Deferred	855
Ground	9,873
<sup>D-36</sup> Total U.S. domestic package	<u>11,902</u>



### International package:

Domestic	760
Port	467
Total International package	<u>1,227</u>
Validated	<u>13,129</u>

United Parcel Service  
 Presentation for MISM3301  
 class prepared by Shannon  
 Consalus.



1. Tell me about yourself.
2. What interests you about our company?
3. What do you see as your goal here?
4. Why did you leave your last job?
5. Why have you changed jobs so frequently?
6. What do you dislike about your current job?
7. What is your favorite part of your current job? And why?
8. Why did you chose the current field you're in?
9. How does this position fit into your overall career goals?
10. On the basis of the information you've received so far, what do you see as the major challenges of this position and how would you meet them?
11. Have you ever had a great idea but been told that you could not implement it? How did you react? What did you do?
12. How do you react to criticism?
13. Are you organized?
14. Describe the best boss and the worse boss you have ever had.
15. Describe your ideal job.
16. What is the biggest conflict you have ever been involved in at work? How did you handle that situation?
17. What characteristics should a good employee have? What characteristics do you find intolerable?
18. How do you feel about a female boss?
19. Can you work under pressure?
20. How do you handle pressure?
21. How do you hope to benefit from this job?
22. What is your feeling about working for a small sized, family run company?
23. How far do you feel you can go in this company?

# APPLICATION FOR EMPLOYMENT

PRE-EMPLOYMENT  
QUESTIONNAIRE  
AN EQUAL  
OPPORTUNITY EMPLOYER

## PERSONAL INFORMATION

NAME (LAST NAME FIRST)			SOCIAL SECURITY NO.	
PRESENT ADDRESS	APT. NO.	CITY	STATE	ZIP
PERMANENT ADDRESS	APT. NO.	CITY	STATE	ZIP
ARE YOU 18 YEARS OR OLDER? <input type="checkbox"/> YES <input type="checkbox"/> NO		PHONE		

LAST

## DESIRED EMPLOYMENT

POSITION		DATE YOU CAN START	SALARY DESIRED
ARE YOU EMPLOYED NOW? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF SO MAY WE INQUIRE OF YOUR PRESENT EMPLOYER? <input type="checkbox"/> YES <input type="checkbox"/> NO		
EVER APPLIED TO THIS COMPANY BEFORE? <input type="checkbox"/> YES <input type="checkbox"/> NO	WHERE?	WHEN?	
EVER WORKED FOR THIS COMPANY BEFORE? <input type="checkbox"/> YES <input type="checkbox"/> NO	WHERE?	WHEN?	
REASON FOR LEAVING			
NAME OF LAST SUPERVISOR AT THIS COMPANY			
WHO REFERRED YOU TO THIS COMPANY?			
<input type="checkbox"/> EMPLOYMENT AGENCY	<input type="checkbox"/> NEWSPAPER ADVERTISING	<input type="checkbox"/> FRIEND	
<input type="checkbox"/> STATE EMPLOYMENT OFFICE	<input type="checkbox"/> COLLEGE PLACEMENT SERVICE	<input type="checkbox"/> WALK IN	<input type="checkbox"/> OTHER

FIRST

MIDDLE

## EDUCATION

SCHOOL LEVEL	NAME AND LOCATION OF SCHOOL	NO. OF YEARS ATTENDED	DID YOU GRADUATE?	SUBJECTS STUDIED
GRAMMAR SCHOOL				
HIGH SCHOOL				
COLLEGE				
TRADE, BUSINESS OR CORRESPONDENCE SCHOOL				

## GENERAL

SUBJECTS OF SPECIAL STUDY OR RESEARCH WORK

---

SPECIAL TRAINING

---

SPECIAL SKILLS

---

Employment Application us  
by Shannon Consalus  
(Pages D-39 to D-41)



### FORMER EMPLOYERS

LIST BELOW LAST THREE EMPLOYERS, STARTING WITH THE MOST RECENT ONE FIRST.

NAME OF PRESENT OR LAST EMPLOYER			
ADDRESS	CITY	STATE	ZIP
STARTING DATE	LEAVING DATE	JOB TITLE	
WEEKLY STARTING SALARY	WEEKLY FINAL SALARY	MAY WE CONTACT YOUR SUPERVISOR?	<input type="checkbox"/> YES <input type="checkbox"/> NO
NAME OF SUPERVISOR	TITLE	PHONE	
DESCRIPTION OF WORK			
REASON FOR LEAVING			

NAME OF PREVIOUS EMPLOYER			
ADDRESS	CITY	STATE	ZIP
STARTING DATE	LEAVING DATE	JOB TITLE	
WEEKLY STARTING SALARY	WEEKLY FINAL SALARY	MAY WE CONTACT YOUR SUPERVISOR?	<input type="checkbox"/> YES <input type="checkbox"/> NO
NAME OF SUPERVISOR	TITLE	PHONE	
DESCRIPTION OF WORK			
REASON FOR LEAVING			

NAME OF PREVIOUS EMPLOYER			
ADDRESS	CITY	STATE	ZIP
STARTING DATE	LEAVING DATE	JOB TITLE	
WEEKLY STARTING SALARY	WEEKLY FINAL SALARY	MAY WE CONTACT YOUR SUPERVISOR?	<input type="checkbox"/> YES <input type="checkbox"/> NO
NAME OF SUPERVISOR	TITLE	PHONE	
DESCRIPTION OF WORK			
REASON FOR LEAVING			

**REFERENCES**

BELOW, GIVE THE NAMES OF THREE PERSONS YOU ARE NOT RELATED TO, WHOM YOU HAVE KNOWN AT LEAST ONE YEAR.

	NAME	ADDRESS	BUSINESS	YEARS ACQUAINTED
1				
2				
3				

**SERVICE RECORD**

BRANCH OF SERVICE	DISCHARGE DATE RANK

HAVE YOU BEEN CONVICTED OF A FELONY WITHIN THE LAST 5 YEARS?

YES

NO

IF YES, EXPLAIN. (WILL NOT NECESSARILY EXCLUDE YOU FROM CONSIDERATION)


**AUTHORIZATION**

"I CERTIFY THAT THE FACTS CONTAINED IN THIS APPLICATION ARE TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE AND UNDERSTAND THAT, IF EMPLOYED, FALSIFIED STATEMENTS ON THIS APPLICATION SHALL BE GROUNDS FOR DISMISSAL.

I AUTHORIZE INVESTIGATION OF ALL STATEMENTS CONTAINED HEREIN AND THE REFERENCES AND EMPLOYERS LISTED ABOVE TO GIVE YOU ANY AND ALL INFORMATION CONCERNING MY PREVIOUS EMPLOYMENT AND ANY PERTINENT INFORMATION THEY MAY HAVE, PERSONAL OR OTHERWISE AND RELEASE THE COMPANY FROM ALL LIABILITY FOR ANY DAMAGE THAT MAY RESULT FROM UTILIZATION OF SUCH INFORMATION.

I ALSO UNDERSTAND AND AGREE THAT NO REPRESENTATIVE OF THE COMPANY HAS ANY AUTHORITY TO ENTER INTO ANY AGREEMENT FOR EMPLOYMENT FOR ANY SPECIFIED PERIOD OF TIME, OR TO MAKE ANY AGREEMENT CONTRARY TO THE FOREGOING, UNLESS IT IS IN WRITING AND SIGNED BY AN AUTHORIZED COMPANY REPRESENTATIVE."

DATE

SIGNATURE



## EMPLOYEE NON-DISCLOSURE AGREEMENT

FOR GOOD CONSIDERATION, and in consideration of being employed on a regular basis by AUTOMATED FOOD SYSTEMS, INC. (Company), the undersigned employee hereby agrees and acknowledges:

1. That during the course of my employ there may be disclosed to me certain trade secrets of the Company; said to trade secrets consisting but not necessarily limited to:

a) Technical information: Methods processes, formulae, compositions, systems, techniques, inventions, machines, computer programs and research projects.

b) Business information: Customer lists, pricing data, sources of supply, financial data and marketing, production, or merchandising systems or plans.

2. I agree that I shall not during, or at any time after the termination of my employment with the Company, use for myself or others, or disclose or divulge to others including future employers, any trade secrets, confidential information, or any other proprietary data of the Company in violation of this agreement.

3. That upon the termination of my employment from the Company:

a) I shall return to the Company all documents and property of the Company, including but not necessarily limited to drawings, blueprints, reports, manuals, correspondence, customer lists, computer programs, and all other materials and all copies thereof relating in any way to the Company's business, or in any way obtained by me during the course of employment. I further agree that I shall not retain any copies, notes or abstracts of the foregoing.

b) The Company may notify any future or prospective employer or third party of the existence of this agreement, and shall be entitled to full injunctive relief for any breach.

c) This agreement shall be binding upon me and my personal representatives and successors in interest, and shall inure to the benefit of the Company, its successors and assigns.

Signed this \_\_\_\_\_ day of \_\_\_\_\_.

\_\_\_\_\_  
Company

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

## **MEDICAL EXPENSE REIMBURSEMENT PLAN**

**PURPOSE.** The purpose of this Plan is to encourage and help provide medical care for each participating employee (spouses and dependents are excluded). It is the intention of Automated Food Systems that this Plan qualify as an accident and health plan within the meaning of Section 105(e) of the Internal Revenue Code of 1954, as amended (the Code), and that the benefits payable under the Plan be eligible for exclusion from gross income under Section 105(b) of the Code. This Plan will operate in conjunction with the group insurance coverage AFSI has chosen.

**EFFECTIVE DATE.** The effective date of this Plan shall be January 1, 1998. The records of the Plan shall be kept on a calendar year basis. Limitations may be updated annually to reflect any changes in insurance plan.

**ELIGIBILITY.** All full-time employees of Automated Food Systems, Inc. are eligible for this Plan except contracted labor employees (temporary employees).

**PARTICIPATION.** Each employee who is eligible to participate in the Plan under Section 3 (an "Eligible Employee") shall become a participant in the Plan (a "Participant") on the effective date of the Plan if on the effective date he or she is at least 21 years old and has completed at least one year of at least 1,000 hours of employment with Automated Food Systems, Inc. Each other Eligible Employee shall become a Participant on the first day of the month after he or she has attained age 21 and completed at least one year of at least 1,000 hours of employment with Automated Food Systems, Inc. A Participant who is discharged from employment with Automated Food Systems, Inc. for cause or who voluntarily terminates employment shall forfeit all rights to reimbursement under this Plan.

**BENEFITS.** Automated Food Systems, Inc. shall pay to each Participant such amounts as he or she has expended while a Participant for medical care for himself or herself. Amounts expended for medical care means amounts paid for (A) medical charges (including perscriptions) covered under group insurance plan, up to the out-of-pocket amount including the deductible, (B) medical charges for dental, eye and foot treatment which are normally not covered by our group insurance.

**LIMITATION.** No Participant shall be entitled to receive more than \$5,000.00. This amount also includes payment of one-half of the deductible, after first half has been paid, for a child dependent(s) who is also covered on the group insurance plan. Amounts payable or reimbursable under insurance or any other plan shall not be reimbursed hereunder.



**Employment Eligibility Verification**

Please read instructions carefully before completing this form. The instructions must be available during completion of this form. **ANTI-DISCRIMINATION NOTICE:** It is illegal to discriminate against work eligible individuals. Employers **CANNOT** specify which document(s) they will accept from an employee. The refusal to hire an individual because of a future expiration date may also constitute illegal discrimination.

**Section 1. Employee Information and Verification.** To be completed and signed by employee at the time employment begins.

Print Name: Last	First	Middle Initial	Maiden Name
Address (Street Name and Number)		Apt. #	Date of Birth (month/day/year)
City	State	Zip Code	Social Security #
I am aware that federal law provides for imprisonment and/or fines for false statements or use of false documents in connection with the completion of this form.		I attest, under penalty of perjury, that I am (check one of the following): <input type="checkbox"/> A citizen or national of the United States <input type="checkbox"/> A Lawful Permanent Resident (Alien # A _____) <input type="checkbox"/> An alien authorized to work until ___/___/___ (Alien # or Admission #) _____	
Employee's Signature			Date (month/day/year)

**Preparer and/or Translator Certification.** (To be completed and signed if Section 1 is prepared by a person other than the employee.) I attest, under penalty of perjury, that I have assisted in the completion of this form and that to the best of my knowledge the information is true and correct.

Preparer's/Translator's Signature	Print Name
Address (Street Name and Number, City, State, Zip Code)	
Date (month/day/year)	

**Section 2. Employer Review and Verification.** To be completed and signed by employer. Examine one document from List A OR examine one document from List B and one from List C, as listed on the reverse of this form, and record the title, number and expiration date, if any, of the document(s)

List A	OR	List B	AND	List C
Document title: _____		_____		_____
Issuing authority: _____		_____		_____
Document #: _____		_____		_____
Expiration Date (if any): ___/___/___		___/___/___		___/___/___
Document #: _____		_____		_____
Expiration Date (if any): ___/___/___		_____		_____

**CERTIFICATION -** I attest, under penalty of perjury, that I have examined the document(s) presented by the above-named employee, that the above-listed document(s) appear to be genuine and to relate to the employee named, that the employee began employment on (month/day/year) \_\_\_/\_\_\_/\_\_\_ and that to the best of my knowledge the employee is eligible to work in the United States. (State employment agencies may omit the date the employee began employment.)

Signature of Employer or Authorized Representative	Print Name	Title
Business or Organization Name		Date (month/day/year)
Address (Street Name and Number, City, State, Zip Code)		

**Section 3. Updating and Reverification.** To be completed and signed by employer.

A. New Name (if applicable)	B. Date of rehire (month/day/year) (if applicable)
C. If employee's previous grant of work authorization has expired, provide the information below for the document that establishes current employment eligibility.	
Document Title: _____	Document #: _____
Expiration Date (if any): ___/___/___	

I attest, under penalty of perjury, that to the best of my knowledge, this employee is eligible to work in \_\_\_\_\_ document(s), the document(s) I have examined appear to be genuine and to relate to the individual.

Signature of Employer or Authorized Representative



# Form W-4 (2004)

**Purpose.** Complete Form W-4 so that your employer can withhold the correct Federal income tax from your pay. Because your tax situation may change, you may want to refigure your withholding each year.

**Exemption from withholding.** If you are exempt, complete only lines 1, 2, 3, 4, and 7 and sign the form to validate it. Your exemption for 2004 expires February 16, 2005. See **Pub. 505, Tax Withholding and Estimated Tax.**

**Note:** You cannot claim exemption from withholding if: (a) your income exceeds \$800 and includes more than \$250 of unearned income (e.g., interest and dividends) and (b) another person can claim you as a dependent on their tax return.

**Basic instructions.** If you are not exempt, complete the **Personal Allowances Worksheet** below. The worksheets on page 2 adjust your withholding allowances based on itemized

deductions, certain credits, adjustments to income, or two-earner/two-job situations. Complete all worksheets that apply. **However, you may claim fewer (or zero) allowances.**

**Head of household.** Generally, you may claim head of household filing status on your tax return only if you are unmarried and pay more than 50% of the costs of keeping up a home for yourself and your dependent(s) or other qualifying individuals. See line E below.

**Tax credits.** You can take projected tax credits into account in figuring your allowable number of withholding allowances. Credits for child or dependent care expenses and the child tax credit may be claimed using the **Personal Allowances Worksheet** below. See **Pub. 919, How Do I Adjust My Tax Withholding?** for information on converting your other credits into withholding allowances.

**Nonwage income.** If you have a large amount of nonwage income, such as interest or dividends, consider making estimated tax payments using

**Form 1040-ES, Estimated Tax for Individuals.** Otherwise, you may owe additional tax.

**Two earners/two jobs.** If you have a working spouse or more than one job, figure the total number of allowances you are entitled to claim on all jobs using worksheets from only one Form W-4. Your withholding usually will be most accurate when all allowances are claimed on the Form W-4 for the highest paying job and zero allowances are claimed on the others.

**Nonresident alien.** If you are a nonresident alien, see the **Instructions for Form 8233** before completing this Form W-4.

**Check your withholding.** After your Form W-4 takes effect, use **Pub. 919** to see how the dollar amount you are having withheld compares to your projected total tax for 2004. See **Pub. 919**, especially if your earnings exceed \$125,000 (Single) or \$175,000 (Married).

**Recent name change?** If your name on line 1 differs from that shown on your social security card, call 1-800-772-1213 to initiate a name change and obtain a social security card showing your correct name.

## Personal Allowances Worksheet (Keep for your records.)

A Enter "1" for **yourself** if no one else can claim you as a dependent . . . . . A \_\_\_\_\_

B Enter "1" if:   
 • You are single and have only one job; or   
 • You are married, have only one job, and your spouse does not work; or   
 • Your wages from a second job or your spouse's wages (or the total of both) are \$1,000 or less. . . . . B \_\_\_\_\_

C Enter "1" for your **spouse**. But, you may choose to enter "-0-" if you are married and have either a working spouse or more than one job. (Entering "-0-" may help you avoid having too little tax withheld.) . . . . . C \_\_\_\_\_

D Enter number of **dependents** (other than your spouse or yourself) you will claim on your tax return . . . . . D \_\_\_\_\_

E Enter "1" if you will file as **head of household** on your tax return (see conditions under **Head of household** above) . . . . . E \_\_\_\_\_

F Enter "1" if you have at least \$1,500 of **child or dependent care expenses** for which you plan to claim a credit . . . . . F \_\_\_\_\_

**(Note: Do not include child support payments. See Pub. 503, Child and Dependent Care Expenses, for details.)**

G **Child Tax Credit** (including additional child tax credit):   
 • If your total income will be less than \$52,000 (\$77,000 if married), enter "2" for each eligible child.   
 • If your total income will be between \$52,000 and \$84,000 (\$77,000 and \$119,000 if married), enter "1" for each eligible child plus "1" **additional** if you have four or more eligible children. . . . . G \_\_\_\_\_

H Add lines A through G and enter total here. **Note: This may be different from the number of exemptions you claim on your tax return.** ▶ H \_\_\_\_\_

For accuracy, complete all worksheets that apply.   
 • If you plan to **itemize or claim adjustments to income** and want to reduce your withholding, see the **Deductions and Adjustments Worksheet** on page 2.   
 • If you have **more than one job** or are **married and you and your spouse both work** and the combined earnings from all jobs exceed \$35,000 (\$25,000 if married) see the **Two-Earner/Two-Job Worksheet** on page 2 to avoid having too little tax withheld.   
 • If **neither** of the above situations applies, **stop here** and enter the number from line H on line 5 of Form W-4 below.

Cut here and give Form W-4 to your employer. Keep the top part for your records.

Form <b>W-4</b>	<b>Employee's Withholding Allowance Certificate</b>	OMB No. 1545-0010 <b>2004</b>
▶ Your employer must send a copy of this form to the IRS if: (a) you claim more than 10 allowances or (b) you claim "Exempt" and your wages are normally more than \$200 per week.		
1 Type or print your first name and middle initial _____ Last name _____		2 Your social security number _____
Home address (number and street or rural route) _____		3 <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Married, but withhold at higher Single rate. <i>Note: If married, but legally separated, or spouse is a nonresident alien, check the "Single" box.</i>
City or town, state, and ZIP code _____		4 If your last name differs from that shown on your social security card, check here. You must call 1-800-772-1213 for a new card. ▶ <input type="checkbox"/>
5 Total number of allowances you are claiming (from line H above or from the applicable worksheet on page 2) _____		5 _____
6 Additional amount, if any, you want withheld from each paycheck _____		6 \$ _____
7 I claim exemption from withholding for 2004, and I certify that I meet <b>both</b> of the following conditions for exemption: • Last year I had a right to a refund of <b>all</b> Federal income tax withheld because I had <b>no</b> tax liability <b>and</b> • This year I expect a refund of <b>all</b> Federal income tax withheld because I expect to have <b>no</b> tax liability. If you meet both conditions, write "Exempt" here . . . . . ▶ 7 _____		
Under penalties of perjury, I certify that I am entitled to the number of withholding allowances claimed on this certificate, or I am entitled to claim exempt status.		
Employee's signature (Form is not valid unless you sign it.) ▶ _____		Date ▶ _____
8 Employer's name and address (Employer: Complete lines 8 and 10 only if sending to the IRS.) _____		9 Off (o) _____





**JOHN ALDEN HEALTH  
EMPLOYEE ENROLLMENT FORM  
FOR TEXAS**

TO AVOID DELAYS IN PROCESSING, ALL AREAS MUST BE COMPLETED IN INK BY EMPLOYEE.

This enrollment is for: **Group No.** \_\_\_\_\_

New Group       Adding Spouse

New Enrollee       Adding Dependent Coverage      No. of Children \_\_\_\_\_

Coverage Change

Requested Effective Date: Month: \_\_\_\_\_  First or  Fifteenth

Company Name		Your work address	
Address of your company's main location			
Employee's name: last:		first:	MI:      Social Security No.:
Employee's address		County	City
State	ZIP	Home phone (    )	Work phone (    )
<input type="checkbox"/> Single <input type="checkbox"/> Married: date of legal marriage _____		<input type="checkbox"/> Divorced: date of legal divorce _____	
Date of birth	State of birth	Height:      ft      in	Weight      Sex
Date employed full-time	Occupation	Hours worked per week for this company	
Current monthly income from this company \$ _____		Current status <input type="checkbox"/> At work <input type="checkbox"/> COBRA <input type="checkbox"/> Disability <input type="checkbox"/> Retired	

**Selected Coverage** If waiving any coverages, complete the waiver section of this form.

1.  All coverages provided by employer     Life & AD&D (no medical)     Dental only  
 Life, AD&D, and Dental (no medical)     Life amount \$ \_\_\_\_\_     Disability amount \$ \_\_\_\_\_

2. Life Insurance beneficiary's name \_\_\_\_\_ Age \_\_\_\_\_ Relationship \_\_\_\_\_  
 Address \_\_\_\_\_

**Eligible Dependents To Be Enrolled**

Are you enrolling every eligible dependent?  Yes  No Complete the waiver section for any family members that are not to be insured.

Name of Dependent (Last, First, M.I.)	Relationship	Sex	Birth Date	State of Birth	Social Security No.	Height	Weight
					- -	ft in	
					- -	ft in	
					- -	ft in	
					- -	ft in	

Please explain if any child listed above is not (a) your natural child, (b) your stepchild (or another child) permanently residing with you, (c) your legally adopted child or a child who is the subject of a suit for adoption by you, (d) your grandchild who qualifies as your dependent for federal income tax purposes, (e) an unmarried child between the ages of 19 and 25 who is financially dependent on you, (f) your unmarried child of any age who is medically certified as disabled and dependent on you, or (g) a child for whom you must provide medical support as required by court order.

**Required information About Other Coverage and Prior Coverage(s)**

**Important:** This section should be completed to establish your eligibility for credit to waive all or part of a pre-existing condition limitation period. You may be asked to provide a certificate of creditable coverage and/or a copy of both sides of your ID card from your prior carrier(s).

1. Have you and all dependents you are enrolling been covered by this employer's major medical plan(s) for the past 12 months?  Yes  No

2. Have you or your dependents been covered under any major medical plan or other plans at any time in the past 12 months?  Yes  No

a. If yes, who was covered?  Employee     Spouse     Children    b. Name of carrier: \_\_\_\_\_

c. Phone number: (    ) \_\_\_\_\_    d. Policy/ID Number: \_\_\_\_\_    e. Effective date: \_\_\_\_\_

f. Termination date: \_\_\_\_\_ Reason:  Left employment    Date: \_\_\_\_\_     Employer canceled  
 Nonpayment of premium     Divorce    Date: \_\_\_\_\_     Other: \_\_\_\_\_

g. Dental coverage included?  Yes  No      Ortho coverage included?  Yes  No  
 Major services (i.e. root canal, periodontics, etc.) covered?  Yes  No

3. Do you or your dependents have any health insurance coverage that will remain in force after your effective date with this plan?  Yes  No. a. If yes, name of carrier: \_\_\_\_\_    h. Phone number: (    ) \_\_\_\_\_

c. Name of covered person(s): \_\_\_\_\_

4. Are you or your dependents on  COBRA     Continuation     Medicare? If so, n  
 Effective date: \_\_\_\_\_ Reason: \_\_\_\_\_