

Employee Exit Review:

This form is to be filled out with employee and filed in employee's personnel folder.

Employee name (print): Melongo Annabel

Employee home phone: [REDACTED]

Supervisor name (print): Vincent B. Davis Operations Director

Did company, or employee terminate employment? Company
*-If terminated employment, a letter of resignation is **required** (attach to form)*

Balance of vacation or personal days Vacation 0 Personal 0

Are all expenses reported and turned in for final review? Yes No

Company Owned Items:

Items listed below are the property of Save A Life Foundation, Inc. and may be protected by copyright laws. All items are to be returned and verified prior to final termination of employment.

Office-phone pass code: 1020000 Verified: Yes No

Windows/computer password: yes Verified: Yes No

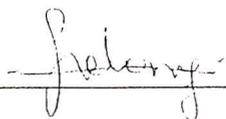
Company I/D badge returned: Yes No N/A

Company credit card returned: Yes No N/A

Company cell phone returned: Yes No N/A

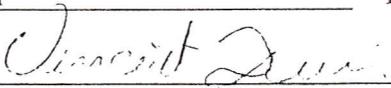
Company laptop computer returned: Yes No N/A

Company manuals returned: Yes No N/A

Employee signature 

Melongo Annabel

Date 27/04/06

Supervisor signature  Date 4/27/06

Accounting Department signature  Date 4/27/06

The following are all SALF Passwords in my possession as of April 27, 2006

The passwords are located in H/IT/administration.