Section I. MANAGEMENT COMMITMENT AND INVOLVEMENT

POLICY STATEMENT

The management of this organization is committed to providing employees with a safe and healthful workplace. It is the policy of this organization that employees report unsafe conditions and do not perform work tasks if the work is considered unsafe. Employees must report all accidents, injuries and unsafe conditions to their supervisors. No such report will result in retaliation, penalty or other disincentive.

Employee recommendations to improve safety and health conditions will be given through consideration by our management team. Management will give top priority to and provide the financial resources for the correction of unsafe conditions. Similarly, management will take disciplinary action against an employee who willfully or repeatedly violates workplace safety rules. This action may include verbal or written reprimands and may ultimately result in termination of employment.

The primary responsibility for the coordination, implementation and maintenance of our workplace safety program has been assigned to:

Name: Jim Hanley Title: Safety Coordinator Telephone: 610-779-3216

Safety Consultant: Steve Wolszczenski Phone: 484-599-0757 Email: steve.emo@comcast.net

Senior management will be actively involved with employees in establishing and maintaining an effective safety program. Our safety program coordinator, myself or other members of our management team will participate with you or your department's employee representative in ongoing safety and health program activities, which include:

- * Promoting safety committee participation
- * Providing safety and health education and training
- * Reviewing and updating workplace safety rules

This policy statement serves to express management's commitment to and involvement in providing our employees a safe and healthful workplace. This workplace safety program will be incorporated as the standard of practice for this organization. Compliance with the safety rules will be required of all employees as a condition of employment.

| Signature of CEO/President | Date | |
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