

**LUXOTTICA RETAIL KEY HOLDER'S AGREEMENT**  
PLEASE READ, SIGN AND PLACE IN ASSOCIATE'S PERSONNEL FOLDER

Store # \_\_\_\_\_

Employee Name \_\_\_\_\_

Title \_\_\_\_\_

Exception	Yes	No
-----------	-----	----

Temporary Keyholder?	Beginning Date	_____
----------------------	----------------	-------

Ending Date	_____
-------------	-------

I, the undersigned, acknowledge receipt of the store key.

I also agree not to lend, transfer, give possession of, misuse, modify or alter the above key.

I further agree not to cause, allow or contribute to the making of any unauthorized copies of the above key.

I agree not to share or divulge any alarm codes or CIAO! passwords.

I understand and agree that violation of this agreement may result in disciplinary action up to and including termination.

Printed \_\_\_\_\_

Name \_\_\_\_\_

Signature \_\_\_\_\_

Lux ID# \_\_\_\_\_

Date \_\_\_\_\_