

# fitbit Pedometer and Walking Program Authorization and Purchase Form

I, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_  
(name) (employee #), (Co.)  
want to participate in the Healthy Directions fitbit Pedometer and  
Walking Program.

I understand that ABX Air Human Resources Department will be able  
to see my step count in order to provide the wellness discount, should  
I meet the requirements set forth in the program.

I authorize the Payroll Department to take a onetime deduction to pay  
for my pedometer(s) ordered. The deduction will come out of the  
next available payroll cycle.

I understand that the first pedometer order will be \$10. I understand  
that I am responsible for the maintenance and care of that  
pedometer, and if I lose or break it, I am responsible for purchasing  
an additional pedometer in order to continue participation in the fitbit  
Pedometer and Walking Program for the quarter.

I understand that I can purchase extra pedometers for my family  
members at the price of \$75 each.

I want to order \_\_\_\_\_ number of pedometers for a total  
of \$\_\_\_\_\_.

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Email address to be used on fitbit program

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Signature

Date

Please return this form to 2061-H or mail to the 'fitbit' at 145 Hunter  
Drive, Wilmington, OH 45177.

Questions: Call Dawna @ 937-366-2150