**Statement of Work (Mexico)**

Pursuant to the terms of the Engagement Agreement dated \_\_\_\_\_\_\_\_\_\_, 2023 (the “**Agreement**”), by and between **SATELLITE TEAMS, INC** (**“*ST*”**), and **Client’s Legal Name** (**“*Client*”**), the Client shall engage the following PRTs at the rates and conditions set forth below. The initial term of this SOW shall be one year and shall automatically renew unless terminated by either party with ninety (90) days’ notice. Any termination of this SOW will result in the termination of the PRT.

1. **Services**:
	1. Screening, recruitment, and hiring of the below PRT on the Client’s behalf
	2. Providing employment, payment, benefits, and payment of taxes related to the employment of such PRT,
	3. Providing the Client with information related to compliance with local employment laws
2. **PRT Name:** Name of Employee
3. **PRT Position and Job Description:** Position of Employee (pls attach Job Description as Exhibit E)
4. **Start Date:** June , 2023
5. **PRT Single Rate**:
6. Recruitment Fee (Section 3.2 of the MSA): $0,000
7. Monthly Rate: $0,000
8. The Client may increase the PRT’s salary during the period of his or her employment. Here, the Client must inform ST in writing within twenty-four (24) hours about the salary increase to facilitate the amendment of the PRT’s contract of employment and to make the necessary adjustment in the payroll.

6) **PRT Hours**: PRT will work for up to 40 hours per week. PRT shall provide the Client with as much notice as possible and shall obtain pre-approval before exceeding 40 hours in the week.

7) **PRT Overtime Rate**: if the Client requests or approves in writing that PRT shall complete more than 8 hours of work in any given workday, the excess hours shall be compensated at a rate under the following calculation:

 ST Single Rate of $0,000 / 160 hours in a month = $00.00

$00.00x No. of hours in excess of 8 hours per day

The hours worked by the PRT will be monitored by ST using a timekeeping software. Only overtime work which is accordingly approved and endorsed by the Client shall be considered and will be paid as such.

**8) PRT Maternity Leave Benefits:**

A female PRT is entitled to paid maternity leaves through the Mexican Institute of Social Security (IMSS).

1. All female PRTs are eligible for paid maternity leave of ninety (90) calendar days. In the case of the adoption of a minor child, paid maternity leave is for six (6) weeks from the adoption date.
2. Upon returning to work and while nursing, the female employee is entitled to two (2) additional thirty (30) minutes rest periods per day to feed the child for a period of up to six (6) months. If such additional breaks cannot be taken during the shift, the employee’s work schedule may be reduced by one (1) hour during the nursing period.
3. ST will not bill the Client the regular monthly fee during the period that the eligible PRT shall properly avail of the maternity benefit.

9) **PRT Equipment**: ST shall offer the Client the ability to purchase special equipment for PRT, with an email agreement on the equipment, pricing, and other terms being sufficient. Any amounts paid by ST for such equipment will be reimbursed by the Client.

10) **Add-on Services**: The client may purchase the recurring Add-on Services, concerning the Hired PRTs under this SOW by written agreement between ST and Client. Upon purchase, such Add-on Services are incorporated into and form a part of this Agreement.

**ロBASIC $99/mo**

Inclusions:

US Phone Number

WIFI Backup (9GB)

**ロPRO $199/mo**

Inclusions:

US Phone Number

WIFI Backup (9GB)

Battery Backup (3-4 hours charging)

Remote Technical Support

VPN Service

**ロENTERPRISE $299/mo**

Inclusions:

US Phone Number

WIFI Backup (15GB)

Battery Backup (7-8 hours charging)

Remote Technical Support

VPN Service

Configured Laptop Lease

Backup Office Availability

**11) Productivity Tracker:** The Client acknowledges that ST has the right to exercise control and supervision over the PRT's performance of a particular work by means of periodically checking and assessing his or her progress through the use and installation of a productivity tool into the device, laptop, or computer desktop assigned to or used for work for the purpose of ensuring its timely delivery. Among others, the productivity tool will look into the time spent by the PRT on the different websites while working; the total time devoted on different projects and tasks; start time, end time, and total time of work delivered in a given day; keyboard and mouse activity levels; and intermittent screenshots of computer screen/s which, by default will be blurred, to observe and maintain privacy.

Within the limits of this agreement, the Client unconditionally and unequivocally permits Satellite Teams, Inc. to proceed with the installation of the said productivity tool as above mentioned. Nothing in this agreement authorizes Satellite Teams, Inc. to do any monitoring activities outside of the PRT's hours of work. It should be understood that, while the application is installed into the devices and is used during office hours, the PRT shall have the authority to start and stop the application from running therein. In fine, the discretion to manage the time and function of the program during office hours shall be dependent upon the PRT. ST commits upon itself the strict responsibility to act within the bounds of the productivity check.

The Client shall be given the option to opt out or disallow the installation of this productivity tool if the device, laptop, or computer to be used by the PRT shall be issued by it or if it simply would not wish to have the PRTs deployed monitored. **ロOpt-in ロOpt-out**

12) **Billing**: Payments are on an auto debit basis using ACH transfer or credit card payment. All credit card payments will be assessed with a transaction fee of 4%. The Client will provide authorization by filling out the ACH form (Exhibit A).

Invoices will be sent out on the 15th of each month for your review and assessment. If the 15th falls on a non-banking day, the invoice will be sent on the banking day preceding the 15th of that month. Should there be issues with your billing statement, please notify Satellite Teams no later than the 3 banking days from when the invoice was sent. A new invoice will be reissued for final processing. All auto debit payments will be processed 5 banking days from when the original invoice was sent.

13) **Client Requirements**

* 1. **PRT Wage and Hour Requirements:**
		1. Client shall permit PRT to take requested meal and rest breaks
		2. Client must provide an unpaid rest period of not less than 24 consecutive hours every six days.
	2. **PRT Disciplinary Rules:** All incidents must be communicated to ST within 48 hours from the date of the occurrence. The proper due process will be observed (Exhibit B).
	3. **Performance Feedback Process**: For performance-related concerns, the Performance Feedback Loop Questionnaire (Exhibit C) must be filled out, outlining the details of the performance concern. The Client will give the PRT at least 30 days to remediate performance, supported by a documented performance improvement plan
	4. **Client Holiday Schedule:** The PRT will follow the holidays that the Client observes. The Client will not require the PRT to work during any of these holidays. If the PRT shall be instructed otherwise, such holiday work shall be entitled to the same Overtime Rate as calculated in provision 7.

Example: New Year’s Day: January 1

 Martin Luther King Jr. Day: 3rd Monday in January

Memorial Day: Last Monday in May

Independence Day: July 4

Labor Day: 1st Monday in September

Thanksgiving Day: 4th Thursday in November

Christmas Day: December 25

* 1. **Vacation Leaves:** The client will need to approve any vacation days that the PRT will take. Scheduled vacation days need to be requested by the PRT at least 2 weeks before the first vacation day, unless otherwise approved by the Client.

14) **Termination of SOW (Section 3.4 of MSA):** The Client may terminate this SOW within 90 days of the written notice unless such termination relates to an act considered as serious misconduct under both Client’s and ST’s disciplinary policies, in which case, such termination shall be effective immediately.

15) **Severance Pay:** Termination without cause / unjustified dismissal will require the Client to pay severance to the employee based on Mexican Federal Labor Laws (Exhibit D). The dismissed employee will be entitled to the following severance pay:

1. Three (3) months' salary

1. Pro-rated Aguinaldo:

= # of Months Worked in a Year x (Daily Rate x 30)

     12

1. Cash conversion of unused vacation days

= (1 leave credit earned per month x # of Months Worked in a Year) x Daily Rate

1. Vacation bonus for unused vacation days

 = cash conversion of unused vacation days x 25%

1. Twenty (20) days per year of service for fifteen (15) years or more seniority.

Example: PRT has a monthly rate of $2,500, worked from January – July, with only 2 leaves taken, with a tenure of 8 years

Salary Calculation: Monthly Salary \* 3 months

   = $2,000 x 3

 **= $6,000**

Pro-Rate Aguuinaldo Calculation: # of Months Worked in a Year x (Daily Rate x 30)

     12

 = 7 months (Jan-July) x ($66.67 x 30)

   12

 = 7 x $166.67

 **= $1166.70**

Cash Conversion Calculation: 7 leave credits earned from Jan to July less 2 leaves taken

 = 5 leaves to be paid out

 = 5 leaves x $ 66.67 daily rate

 **= $333.35**

Vacation Bonus Calculation: Cash conversion of unused vacation days x 25 %

 = $333.35 x 25%
 **= $83.34**

Total Severance: $6,000+ $1166.70 + $333.35 + $83.34

 **=$7,583.34**

The undersigned has read, understood, and agreed to the terms and conditions herein, including any attachments hereto. Signing this Agreement warrants that he or she is duly authorized to do so and bind the respective party.

|  |  |  |
| --- | --- | --- |
|  | **Client** | **Satellite Teams, Inc.** |
| **Name** |  |  |
| **Title** |  |  |
| **Signature** |  |  |
| **Date** |  |  |

**EXHIBIT A**

**Recurring Payment Authorization Form**

Schedule your payment to be automatically deducted from your bank account or charged to your credit card. Just complete and sign this form to get started.

**How Recurring Payments Work:**

You authorize regularly scheduled charges to your checking/savings account or credit card. You will be charged the amount indicated below each billing period. A receipt for each payment will be emailed to you and the charge will appear on your bank statement as an “ACH Debit.”

Invoices will be sent out on the 15th of each month for your review and assessment. If the 15th falls on a non-banking day, the invoice will be sent on the banking day preceding the 15th of the month. Should there be issues with your billing statement, please notify Satellite Teams no later than the 3 banking days from when the invoice was sent. A new invoice will be reissued for final processing. All auto debit payments will be processed 5 banking days from when the original invoice was sent.

**Please complete the information below:**

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ authorize Satellite Teams, Inc. to charge my credit card or

 (full name)

account, indicated below for <insert $> on the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ of each <insert frequency> for payment of

 (day or date)

Billing Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone# \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City, State, Zip \_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

  **Checking/ Savings Account**  **Credit Card**

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| --- | --- | --- |
|  \_\_ Checking \_\_ SavingsName on Acct \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Bank Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Account Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Bank Routing # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Bank City/State \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |   |  \_\_ Visa \_\_ MasterCard  \_\_ Amex \_\_ DiscoverCardholder Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Account Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Exp. Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_All credit card payments will be assessed with a transaction fee of 4%. |

SIGNATURE DATE

I understand that this authorization will remain in effect until I cancel it in writing, and I agree to notify Satellite Teams in writing of any changes in my account information or termination of this authorization at least 15 days prior to the next billing date. For ACH debits to my checking/savings account, I understand that because these are electronic transactions, these funds may be withdrawn from my account as noted above for periodic transactions. In the case of an ACH Transaction being rejected for Non-Sufficient Funds (NSF) I understand that Satellite Teams may at its discretion attempt to process the charge again within 5 days, and agree to an additional $25 charge for each attempt to return NSF which will be initiated as a separate transaction from the authorized recurring payment. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. I certify that I am an authorized user of this credit card/bank account and will not dispute these scheduled transactions with my bank or credit card company; so long as the transactions correspond to the terms indicated in this authorization form.

**EXHIBIT B**

**DISCIPLINARY ACTION POLICY**

Maintaining service integrity is vital to the day-to-day business. The behavior of each employee reflects and impacts the success of the organization. Satellite Team’s Disciplinary Action Policy facilitates effective & consistent dealings with issues in a fair and just manner.

**Progressive Disciplinary Steps**

**I**n appropriate circumstances, the company may pursue the following steps for disciplinary action. If an employee fails to respond to dialogues or informal counseling, the following action will provide the framework for disciplinary measures.

 1st occurrence - Initial Written Warning

 2nd occurrence - Final Written Warning

 3rd occurrence - Recommendation for Dismissal

**Time Frame to Initiate Disciplinary Action Process**

The disciplinary action process must be initiated within 48 hours from the date of receipt of an incident report or the Performance Feedback Loop Questionnaire stating the acts or omissions in violation of the Rules.

Notice to Explain (NTE) for all transgressions from Initial Written Warning to Recommendation for Dismissal should provide the employee a maximum of five (5) days to respond.

**Prescriptive Period**

A prescriptive period of six (6) months shall apply to all stages of warnings. All sanctions will refresh after a period of six (6) months based on the date of the last disciplinary action occurrence.

**EXHIBIT C**

**PERFORMANCE FEEDBACK LOOP QUESTIONNAIRE**

This short questionnaire was designed to facilitate a feedback loop on how the employee has performed upon engagement.

Company:

Name of Evaluator:

Name of the employee to be evaluated:

1. Are you satisfied with the employee’s demonstrated skills, strengths, behavior, and outcomes

in relation to the targets agreed upon at the beginning of his/ her engagement in the organization?

* + Yes
	+ No. Please give specifics (i.e. targets set vs. targets achieved)

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1. If your answer is NO to Question # 1, please give specifics

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1. Recommended action
* No Change to Employee’s Status
* Commendation
* Performance Improvement Plan
* Initiate Due Process for Disciplinary Action (up to Termination)

4. Would you like our assistance in speaking with the employee?

* Yes
* No

5. Would you have a need or requirement for additional talent/staff?

* Yes, connect me with my Account Relationship Manager
* No, we currently have no requirement

**EXHIBIT D**

Employees are given protection from dismissal unless they have explicitly violated the following or performed illegal actions, in accordance with the Mexican Labor Law. This includes:

* Misrepresentation of qualifications for a job
* Dishonesty at work
* Threats or acts of violence at work
* Causing intentional damage to an employer’s property
* Causing serious damage to an employer’s property through negligence
* Compromising the safety of the workplace
* Committing immoral acts at work
* Revealing the employer’s trade secrets or other confidential matters
* Being absent from work more than three times in 30 days without permission or cause
* Insubordination
* Failure to follow safety procedures
* Coming to work drunk or under the influence of nonprescription drugs
* Being sentenced to prison
* Bullying and acts of sexual harassment

If an employee has violated one of the causes listed above, an employer will likely have grounds for termination. However, there are procedural requirements that must then be followed for a terminated employee. If the employer fails to follow procedure, the dismissal will be automatically voided and deemed unjustified.

**EXHIBIT E**

Attach Job Description Here