Employee Clothing Order Form

Name:_____ Department:_____

Option – Circle which item(s) you would like to purchase:

Women's Blue ½ Zip
$50.00

Size: _____

Women's Black Full Zip
$38.00

Size: _____

Men's Blue ½ Zip
$50.00

Size: _____

Men's Black Full Zip
$38.00

Size: _____

Black Staff T-Shirt
$10.00

Men's Women's Size: _____

Grey Staff T-Shirt
$7.00

Men's Women's Size: _____

Final amount due for purchase: $ _____ .

I agree that the *final amount due for purchase* on this form will be paid via payroll deduction. I understand that if my employment ends prior to the entire amount being paid, that the remaining balance will be deducted from my final paycheck.

The payroll deduction will be processed on the first payroll after the shirt is received by the employee.

Employee Signature: _____ Date:_____

HR/Payroll Signature:_____ Date:_____

For HR Use Only: _____ Shirt Received

Revised 12/17/15