

UB MEMORANDUM

To: **The Office of Payroll**

From: _____

Date: _____

Subj: _____

Please set up the following memo payment as explained below.

Name	Position #	Empl ID	Record #	Contract Amt	Memo Payment Amt	Pay Period End Date Due
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Check here if this payment is for the full amount listed on the contract

Or

Check here if this is a partial payment

According to the established memo payment schedule.

Authorized Signature

Date

Title