



Office Use Only

MSM Employee Council Presents "MSM Day with the Atlanta Hawks"

Payment and Payroll Deduction Form

Information :

Title: ☐ Dr. ☐ Mr. ☐ Mrs. ☐ Ms. Degree: ☐ M.D. ☐ Ph.D. ☐ M.P.H. ☐ M.S.C.R. ☐ Other _____Employment Category: (please check one) ☐ Faculty ☐ Staff ☐ Resident ☐ Student

Name: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Home Phone _____ Department: _____ Campus Phone: _____

E-mail Address: _____

Tickets:

Tickets: \$66 (200 Level): _____ \$75(100 Level): _____ \$133 (Premium 100 Level): _____ Total Tickets: \$ _____
#tickets #tickets #ticketsPre-game Reception: \$10 per person: _____ Total Pre-game Reception: \$ _____
#ticketsT-shirt: \$8 _____
#t-shirts

____S ____M ____L ____XL ____2XL ____3XL Total T-shirts: \$ _____

Grand Total (ticket+reception+t-shirt): \$ _____

Payroll Deduction Information: (Deadline for submission of form is January 12, 2018)

Term Deduction

Total Amount \$ _____ via payroll deduction divided in 4 pay periods (NO EXCEPTIONS).

Start: (Mo/Day/Yr.) 1/19/2018End (Mo/Day/Yr.) 3/02/2018

Repayment: I understand that this payment must be repaid to Morehouse School of Medicine. I further understand that if my employment ends for any reason prior to the complete repayment that, the final amount will be taken from my last paycheck.

Signature: _____ Date: _____

This form must be submitted electronically to Payroll@msm.edu or it will not be processed.

NO HAND DELIVERED FORMS WILL BE ACCEPTED IN PAYROLL OR FORMS EMAILED TO ANY OTHER EMAIL ACCOUNT. ALL SALES ARE FINAL, NO REFUNDS OR EXCHANGES. If you have questions please call 404.752.1871.