



UNIFORM RENTAL/LAUNDRY PAYROLL DEDUCTION AUTHORIZATION
McNeese State University

Employee Name: _____ Department: _____ ID# _____

PAYROLL AUTHORIZATION:

I hereby authorize McNeese State University to withhold from my wages for my uniform rental and/or laundry service that I agreed to with Unifirst from each payroll check. This authorization will remain in force until such time as I revoke this payroll authorization. I understand that I am responsible for the cost of uniforms that are maliciously damaged (as determined by supervision) lost and/or not returned at the end of a contract. I authorize McNeese State University to withhold the replacement costs of such from my wages (replacement costs are available in HR). This authorization is effective _____.

 Employee Signature & Date

PLEASE INDICATE NUMBER OF UNIFORMS AND TYPE RECEIVED BELOW

UNIFORM RENTAL AND CLEANING COSTS: (Rental fee, Launder/Press/Pickup/Delivery)

Replacement @ \$18.00/ea Men's Uniform Pants _____ # @.22 each per week	Replacement @ \$18.00/ea Ladies' Uniform Pants _____ # @.22 each per week	Replacement @ \$15.00/ea Men's Short Sleeve Uniform Shirt _____ # @.19 each per week
Replacement @ \$15.00/ea Men's Long Sleeve Uniform Shirt _____ # @.21 each per week	Replacement @ \$15.00/ea Ladies' Uniform Smock w/Collar _____ # @ .22 each per week	Replacement @ \$19.00/ea Action Back Coverall _____ # @.44 each per week
Replacement @ \$17.00/ea Dress Uniform Shirt _____ # @ .25 each per week	Replacement @ \$17.00/ea Men's Executive Button-Down Oxford Shirt _____ # @ .25 each per week	Replacement @ \$30.00/ea Work Jacket _____ # @ .00 each per week
Replacement @ \$18.00/ea Men's Professional Double Pleated Uniform Pants or Jeans _____ # @.25 each per week	Replacement @ \$18.00/ea Ladies' Professional Double Pleated Uniform Pants _____ # @ .25 each per week	Replacement @ \$15.00/ea Ladies' Uniform Smock with no collar _____ # @ .23 each per week
Replacement @ \$18.00/ea Men's Pro-Knit Pull Over Polo with three button front _____ # @ .25 each per week	HR USE ONLY: Total Charge bi-weekly: _____	PAYROLL USE ONLY: Invoice total: _____

DISCONTINUE PAYROLL AUTHORIZATION:

I wish to discontinue the authorization above effective _____.

 Employee Signature & Date

Uniforms Returned: #Shirts _____ # Pants _____ # Jackets _____ # Other _____

Good Condition: Yes _____ No _____

 McNeese State University Representative Signature & Date