

UNIFORM PURCHASE FORM

<u>Item</u>	<u>Male/ Female</u>	<u>Size</u>	<u># of Items</u>	<u>Price Per Unit</u>	<u>Total Price</u>
<u>Total</u>					

As a crew member of City Cruises, I accept the above payment for purchase of uniform items and allow the indicated amount to be deducted from my pay.

Employee Name (Print)

Witness Name (Print)

Signature

Signature

Date

Date