



TOWSON UNIVERSITY  
FACULTY/CONTINGENT FLAT RATE PAYMENTS

SS#or EMPL# \_\_\_\_\_ Department Name \_\_\_\_\_

	Dollar Amount	Payroll #	Dollar Amount	Payroll #	Dollar Amount
01		10		19	
02		11		20	
03		12		21	
04		13		22	
05		14		23	
06		15		24	

		18			
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TOTAL	
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Assignment Description \_\_\_\_\_

\_\_\_\_\_  
Authorized Signature

\_\_\_\_\_  
Telephone #