ADDENDUM TO OFFER LETTER

DATE

NAME

ADDRESS

CITY, STATE 92025

Dear NAME:

This is an addendum to your offer letter dated DATE. Employees hired April 1, 2019 or later will be paid on the pay date which typically occurs approximately two weeks after the end of the pay period. University employees are typically paid on the 15th and the last day of the month.

Please indicate your acknowledgement of this pay date information by signing below and returning this addendum to:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Hiring Manager Date

I acknowledge this information about the date and timing of pay.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Employee Name Date