



Communication Allowances Certification

This agreement is a contractual agreement with Texas A&M AgriLife and myself in conjunction with the receipt of a communications allowance for personal communication devices.

I certify that my job duties necessitate the provision of:

and that the majority use of the equipment is for business. Since the device and plan are in my name, the equipment will also be for personal use.

I further certify that if I should discontinue use of any of the above device(s) due to theft, loss, change in job duties, etc. that I will notify my department within five working days of the change. One consequence will be the discontinuance of my monthly communication allowance.

Additionally, I understand that any salary supplement that I receive for communication devices is considered taxable compensation subject to required tax withholdings and are **NOT** part of my base salary.

Employee Date

Witness Date

*Only for employees whose cell phone allowance is to be paid on grant funding, please indicate their current payroll sources for Contracts and Grants Review:

Part Account Support

Part Account Support

Department Payroll Contact Date

Privacy Notice: State Law requires that you be informed of the following: (1) you are entitled to request to be informed about the information about yourself collected by use of this form (with a few exceptions as provided by law); (2) you are entitled to receive and review that information; and (3) you are entitled to have the information corrected at no charge to you.

Send completed form to: AgriLife HR / Payroll Office, MS 2147, College Station, TX 77843-2147