[PLACE ON DEPARTMENTAL LETTERHEAD]

[DATE]

William L. Roper, MD, MPH

Dean, UNC School of Medicine

Vice Chancellor for Medical Affairs

CEO, UNC Health Care System

Dean Roper:

I would like to recommend a faculty compensation contingent supplemental payment for the faculty members listed on the attached spreadsheet. This recommendation is being made per the Department Compensation Plan and covers the time period [DATE] through [DATE]. The payment amounts on the attached spreadsheet are consistent with the approved Department of [NAME] Clinical Compensation Plan and School of Medicine Clinical Faculty Compensation Plan.

Sincerely,

[DEPARTMENT CHAIR SIGNATURE LINE]

Approved: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[DEPARTMENT CHAIR NAME],

Department of [NAME]

 UNC School of Medicine