U.S.D. 410 Durham - Hillsboro - Lehigh Authorization Agreement for Direct Deposit of Payroll

I hereby authorize U.S.D. 410 to initiate credit entries to my account(s) indicated below for payment owed to me, and further authorize the Financial Institution(s) named below to credit the same to such account(s).

Type of Account (Checking or Savings)	Amount of Each Check in This Account	Your Financial Institution's Routing Number	Your Account Number			
Your Financial Institution's	Name					
Your Financial Institution's	City, State, and Zip Code					
me of its termination, in suc	ch time and in such manne otify U.S.D. 410 of any cha	U.S.D. 410 has received writter as to afford U.S.D. 410 a reas ange in banks or accounts to ins	sonable time to act on			
Your Name (please print)		Your Social Security Number				
Your Signature		Today's Date				
	TAPE YOUR VOIDED CHE	ECK OR DEPOSIT SLIP HERE				

Direct Deposit Slips Via E-Mail

We can send your direct deposit slip to any e-mail address you would like us to. Choosing this method of receiving your direct deposit slips allows the district to save the cost of printing the slips, stuffing them into envelopes, sorting the envelopes, and delivering them to you. You will receive the direct deposit slip as an e-mail message (not an attachment) at least one business day prior to pay day. You may print it out and/or keep it saved for reference on your computer. As you can see by looking at the example below, the e-mail message does not list your social security number. It does list your bank account number(s); however, unlike the example, we have chosen for all but the last four digits to be represented with X's, and neither your bank's name nor routing number are shown. We ask you to take advantage of this exciting opportunity by completing the blanks at the bottom of this page and returning it to the U.S.D. 410 Central Office. Please call Jerry Hinerman at 947-3184 or send him an e-mail message at jerry.hinerman@usd410.net with any questions.

Employee Test Sample School I									
Check Info	11117 017	(1) -1 1) 1-	11/2	L 6300A	I' NI 1		0004		
NET PAY:	XX3 47	Check Date: Post Date:	11/15/2005 11/15/2005		Form Number	2 00004			
Description		Units	s Rate	Earn/Fringe	Withhold	Cal - YTD	Fsc - YTD		
Regular Salary with KPE	RS			1,200.00		2,400.00	2,400.00		
Employee Social Security	•				-74.40	-148.80	-148.80		
Employee Medicare					-17.40	-34.80	-34.80		
Kpers Retirement					-74.40	-148.80	-148.80		
State Withholding Tax					33.25	66.50	66.50		
Federal Withholdings					-117.08	-234.16	-234.16		
Employer Social Security				74.40		148.80	1/18.80		
Employer Medicare				17.40		34.80	34.80		
Current Totals:				1,291.80	316.53				
YTD Totals									
				rent	Cal YTD		FSC YTD		
Earmigs			1,200		2,400.00		2,400.00		
Withholdings			-316		-633.06		-633.06		
Totals			XX	3 4"/	1,766 94		1,766 94		
Direct Deposit Info									
Account #							Amt. Deposited		
23452343							883.47		
Leave Info									
Leave Type				Used			Remaining		
Please send my	direct de	posit slip to me	via e-mai	l.					
Signature:	_								
Name:									
□ Mail Address.	_								
E-Mail Address:	_								