

MINERAL COUNTY BOARD OF EDUCATION

DIRECT DEPOSIT REQUEST FORM

I, _____, **95300**□□□□, a regular
Employee Name Employee ID

employee of the Mineral County Board of Education, request that

SELECT THIS OPTION ONLY IF YOU WANT A SPECIFIC AMOUNT DEPOSITED, (i.e. – you want \$100 to go to a savings account), **OTHERWISE SKIP TO “REQUIRED” SECTION:**

\$ _____ of my payroll check be deposited directly into my
(Specify Amount)

CHECKING or SAVINGS ACCOUNT _____
(Please indicate checking or savings) (Bank Account Number)

AT: _____
(Name of Financial Institution)

REQUIRED:

SELECT ONE OF THE FOLLOWING OPTIONS:

Please deposit the net amount into my CHECKING or SAVINGS
(Please indicate checking or savings)
ACCOUNT _____ AT _____
(Bank Account Number) (Name of Financial Institution)

Please pay the net amount via physical (paper) paycheck.

PLEASE BEGIN THIS WITH MY _____ CHECK.
(Month/Day/Year)

Employee Signature Date

School or Payroll Location

**PLEASE ATTACH
VOIDED CHECK HERE.**