

MINERAL COUNTY BOARD OF EDUCATION

DIRECT DEPOSIT REQUEST FORM

I, \_\_\_\_\_  
Employee Name

95300□□□□,  
Employee ID

A REGULAR EMPLOYEE OF THE MINERAL COUNTY BOARD OF EDUCATION,  
REQUEST THAT MY PAYROLL CHECKS BE DEPOSITED DIRECTLY INTO MY  
ACCOUNT AT: \_\_\_\_\_

Name of Local Bank or Credit Union

PLEASE BEGIN THIS WITH MY \_\_\_\_\_ CHECK.  
Month/Day/Year

\* \_\_\_\_\_  
Bank Account Number

\*PLEASE ATTACH A VALID VOIDED CHECK

- CHECKING
- SAVINGS

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
School or Payroll Location

PLEASE ATTACH  
VOIDED CHECK HERE