

# MINERAL COUNTY BOARD OF EDUCATION

## PARTIAL DIRECT DEPOSIT REQUEST FORM – SPECIFIC AMOUNT

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

95300□□□□,  
Employee ID

A REGULAR EMPLOYEE OF THE MINERAL COUNTY BOARD OF EDUCATION,  
REQUEST THAT A PORTION OF 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

Write the exact amount

CHECKING \_\_\_\_\_ Specify Amount  
 SAVINGS \_\_\_\_\_ Specify Amount

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

**\*PLEASE ATTACH A VALID DEPOSIT TICKET**

\_\_\_\_\_  
Date

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

PLEASE ATTACH  
DEPOSIT TICKET HERE.