## BERKSHIRE LOCAL SCHOOL DISTRICT

14259 CLARIDON TROY RD. P.O. BOX 364 BURTON, OH 44021 Fax: (440)834-2058 Attn: Payroll

## **Direct Deposit Email Notification Form**

## Authorization to Start/Stop/Modify

Please complete this form if you would like to start, stop, or change Direct Deposit Email Notification and return to the payroll department. Signing up for Email Notification does replace the receipt of paper notification.

Employee Name:  Email Address for Direct Deposit Notification:	
Current Email Address:	
New Email Address:	
I hereby <u>AUTHORIZE</u> the Payroll Department of the Berkshire Local School District to send my Direct Deposit Notification via email at the stated email address. I understand that this will replace paper notification.	
Signature	
I hereby request that my Email Direct Deposit Noti	fication be <i>DISCONTINUED</i> .
Signature	 Date