

**Morongo Unified School District
PAYROLL WARRANT DISTRIBUTION AUTHORIZATION**

Name: _____ Last four SSN #: _____

Please check appropriate box: Initiate Revise Cancel

Certificated
 Classified

Contract Employee
 Hourly Employee

Payroll warrants will be distributed by one of the two methods described below. Each employee must make his/her initial selection, sign this form and return it to the personnel office. Any new employee who wishes to change his/her selection must complete a new form and submit it directly to the payroll office. Employees should note that it takes at least 15 days to alter records. You may access your monthly pay stubs and W-2's online at <https://employeeselfservice.sbcss.k12.ca.us> - you need your current NET pay information to register.

I hereby request that my payroll warrant be:

_____ **MAILED** (by U.S. Mail) to me at the following address

_____ ***ELECTRONICALLY TRANSFERRED (EFT) to my bank (please attach a voided check).***

Note: Your first pay warrant after electing direct deposit will be a **paper check**. A stub will be mailed to the employee's address of record.

Institution Name: _____

Depository institution 9 digit transit/ABA No.: _____

Account Number: _____ Checking ____ Savings ____

**** PLEASE NOTE ** If you elect Direct Deposit (EFT), after your first "test" warrant, you will NOT receive pay stubs. You can retrieve pay stubs off the BEST NET website listed above. ****

The first pay warrant after electing (or changing) direct deposit (EFT) will be mailed to your address on file with personnel.

Signature: _____ Date: _____