

1 **Charlo Public School District**

2
3 **FINANCIAL MANAGEMENT**

7330F

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5 **PAYROLL PROCEDURES / SCHEDULES**

6 **(Deferred Wage Payment Election Form)**

7 By my signature I hereby acknowledge that I have read and understand the School
8 District's policy on deferred wages. Furthermore, by my signature on this form I am
9 electing to defer payment of my wages on an annualized basis consisting of
10 _____ payments. I understand that any change from an annualized
11 election of payment requires that I notify the District prior to the beginning of duty
12 for the fiscal year in which the change is being given.

13 _____
14 Signature

Position

15 _____
16 Printed name

Date signed

17
18
19 Policy History:

20 Adopted on: 03/18/2008

21 Reviewed on:

22 Revised on: