## SPRING / FALL PAY DISTRIBUTION FORM

Employee N	lame:						
Employee Ic	dentification Number:				_		
Semester:	Spring	Fall	<u>OR</u>	Contract Dates:			_
I would like i	my pay distributed in tl	ne following r	mannei	7:			
PLEASE CH	HECK ONE						
(1) One	One payment at the end of the contract						
(2) Two	Two Payments (1 at the halfway point and 1 at the end of the contract)						
(3) Biw	Biweekly payments for the length of the contract						
Amount of c	ontract:		_	Signature _			
	Date						_
•	questions regarding yo <u>alisbury.edu</u> .	ur payments	, conta	ct Cheryl Morris a	at 410-543-60	046 or	
REMINDER							
contract for a contract, the	ct cannot be processed an employee without a ey will send the contract aid in a timely manner	W4 form an t back to the	d direc	t deposit, either o	n file already	or attached to the	J
Do you have	e a current W4 form or	file in Payro	II?		Yes	No	
Do you have	e a current Direct Depo	osit form on fi	le in Pa	ayroll?	Yes	No	
	questions regarding the	ese forms, co	ontact I	Kimberly Causey	at 410-677-5	377 or	