

**La Conner Schools**  
**VOLUNTARY DEDUCTION ELECTION FORM**

Employee Name: \_\_\_\_\_

| Description   | Dollar Amount         | Initial for Change |
|---|-----------------------|--------------------|
| <p><b>Food Service:</b></p> <p><input type="checkbox"/> Please deduct the designated amount from each paycheck and deposit it into my food service account.</p> <p><input type="checkbox"/> Please stop this deduction as of _____.</p> <p><small>*NOTE – Negative meal account balances are not allowed for staff or students. The district is not allowed to lend credit to staff or students. All staff should pay for their meals in advance or at the time the meal is served. Negative balances as of the 15<sup>th</sup> of each month will be deducted from the employee’s next paycheck.</small></p> | \$ _____<br>per month |                    |
| <p><b>La Conner Scholarship Fund:</b></p> <p><input type="checkbox"/> Please deduct the designated amount from each paycheck to donate to the La Conner Scholarship Fund.</p> <p><input type="checkbox"/> Please stop this deduction as of _____.</p>   | \$ _____<br>per month |                    |
| <p><b>Other:</b></p> <p><input type="checkbox"/> Please deduct the designated amount from each paycheck payable to _____. If this is a new deduction, also attach a voided check or deposit slip.<br/>           Example: Credit union, second bank,</p> <p><input type="checkbox"/> Please stop this deduction as of _____.</p>  | \$ _____<br>per month |                    |

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date

**Please submit this form to the business office by the 10<sup>th</sup> of the month.**