

**South Windsor Public Schools
Payroll Office
1737 Main Street
South Windsor, CT 06074**

**Authorization for Electronic Delivery of Payroll Statement
(Request for Paperless)**

By completing and signing the following authorization form, you are requesting that the South Windsor Public Schools Payroll Department set up a secure electronic delivery of your Payroll Direct Deposit Advice.

Employee Name: _____

Email Address: _____@_____

Please print clearly so your email is entered correctly

Employee Signature: _____

Date: _____

PLEASE RETURN FORM TO:

Payroll Office