

BOARD OF COOPERATIVE EDUCATIONAL SERVICES

Hamilton-Fulton-Montgomery Counties
2755 State Highway 67
Johnstown, NY 12095
(518) 736-4310, ext. 4688

EMPLOYEE STATISTICS

2020 - 2021

(Circle one) Mr. Mrs. Miss Ms.

NAME (Last, First, M.I.): _____

ADDRESS (Street/PO Box): _____

CITY/STATE/ZIP _____

TELEPHONE NUMBER: _____

Please *circle* your choice for the distribution of your gross salary.

PLEASE NOTE: THE CHOICE MADE NOW IS IRREVOCABLE FOR THIS SCHOOL YEAR

10-Month Option:

Payments spread over 10 months. First payroll will be a 1-week check dated 9/4/20, followed by a 1-week check dated 9/11/20, followed by 21 bi-weekly checks ending on 6/25/21.

****Bulk Pay Option:***

Payments spread over 10 months. First payroll will be a 1-week check dated 9/4/20, followed by a 1-week check dated 9/11/20, followed by 21 bi-weekly checks ending on 6/25/21. A final bulk check at the end of the school year will be equivalent to five (5) bi-weekly checks and will be dated 6/24/21.

****Deferred Pay Option:***

Payments spread over 12 months. First payroll will be a 1-week check dated 9/4/20, followed by a 1-week check dated 9/11/20, followed by 25 bi-weekly checks ending on 8/20/21.

* *If you choose either the bulk pay or deferred pay option, you are **required** to have a **Payroll Election Form** on file with the HFM BOCES Payroll Department. A copy of the form has been enclosed for your use.*

DATE: _____ SIGNATURE: _____

PLEASE RETURN THIS FORM TO JAYETTE MILLER, PAYROLL CLERK, BY AUGUST 24, 2020.