

**SALMON RIVER CENTRAL SCHOOL
FORT COVINGTON, NEW YORK**

Since salary payment, other than on a regular basis, requires legal authorization by the employee, we are requesting that you complete the section below to indicate your choice of payment for the school year.

This choice remains in effect for future years unless changed by the employee at the start of the school year.

____ I prefer to receive 1/25th of my contract salary, bi-weekly, through June, 2009. This choice allows for the larger check at the end of June

____ I prefer to receive 1/21 of my contract salary, bi-weekly, through June, 2009.

Signature _____

Date _____