



BERLIN BOROUGH SCHOOL DISTRICT

SAVINGS PLAN

I hereby empower and direct the Secretary of the Board of Education of the Borough of Berlin in the County of Camden, State of New Jersey to deduct and withhold an amount equal to 10% of each salary installment (even dollar) or my elected deduction for the academic year beginning September 1, ____ and ending June 30, ____.

It is my understanding that these deductions will be deposited in my own personal savings account by direct deposit on the payday.

This form will need to be filled out each school year in order to participate in this savings program.

Bank Name

Other Deduction Amount

Bank Routing #

Signature of Employee

Savings Acct. #

Date

Together Everyone Achieves More