



Plano ISD Payroll Deduction Agreement

I understand Plano ISD will be deducting an equal amount from my payroll check from **December** 2009 through May 2010 to be applied to my PASAR account. I understand the option selected below will be the monthly deduction for each of the nine months, **December** 2009 through May 2010.

The monthly installments will be as I have selected below based on number of students I have enrolled in PASAR (can ONLY select ONE option below):

____\$122 per month for ONE student _____ employee's signature

____\$216 per month for TWO students _____ employee's signature

____\$309 per month for THREE students _____ employee's signature

____\$404 per month for FOUR students _____ employee's signature

My signature below indicates agreement to the conditions outlined above.

SOCIAL SECURITY NUMBER

PRINTED NAME

DATE

SIGNATURE

Print your PASAR Students' Names:

1) _____
Last Name First Name

2) _____
Last Name First Name

3) _____
Last Name First Name

4) _____
Last Name First Name