



School District of  
Indian River County

"A CommUNITY Partnership Toward Educational Excellence"

PAYROLL DEPARTMENT

## Cancellation Form

PLEASE PRINT

NAME: \_\_\_\_\_

ID# \_\_\_\_\_ FACILITY: \_\_\_\_\_

**Please cancel my:**

Direct Deposit - \_\_\_\_\_ Bank & Account  
\_\_\_\_\_ Bank & Account  
\_\_\_\_\_ Bank & Account

United Way

Education Foundation

Other \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

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