



**Southeastern Local Schools**  
**2024-2025 Supplemental Pay Voucher**

Please complete the following information and submit this pay voucher along with any supporting documentation to the building principal's office or athletic director for signature and processing. Payment cannot be made until a completed & signed voucher is submitted to the Treasurer's office along with any supporting documentation or new hire information (if applicable).

Please Print

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Social Security Number: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email Address: \_\_\_\_\_

**Direct Deposit is mandatory. If you are new or your banking information has changed you must fill out a *Direct Deposit Form*.**

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

For Office Use Only

Position: \_\_\_\_\_ BOE Approval Date: \_\_\_\_\_ Amount: \_\_\_\_\_

Circle One: MV / JH / HS Pay Code: \_\_\_\_\_ Split: No or Yes \_\_\_\_\_  
With Whom?

Principal/AD Signature \_\_\_\_\_ Date \_\_\_\_\_ Days: \_\_\_\_\_ Hours: \_\_\_\_\_

**Needed Information**

		Rec'd
	New Hire Packet	
	Finger Prints	
	Direct Deposit	

		Rec'd
	Contract	
	Hours	