# <u>SEASONAL NEW HIRE</u>: NeoGov-High Line Personality Training for Employee Role

# Contents

How to Login
Employee Role
Personal Information
Personal Profile
Job and Compensation Information5
Contacts7
Verification of Employment
Pay Information9
Tax Filing9
Federal Withholding
State Withholding11
Pay Stub History11
Print My Pay Stub12
Viewing/Changing/Enrolling Your Direct Deposit15
Sign Off Master Agreement

### How to Login

### (Make sure you are using a laptop or PC, not a tablet or smartphone)

The High Line Self Service link is located on the Waukesha County Connection under the "HR" tab.

You can also access offsite using a laptop or PC by following the URL below:

https://selfservicewauk.waukeshacounty.gov



<u>TEMPORARY/SEASONAL EMPLOYEES (Non-Active Directory).</u> Your **Access Key** is your personal email (ex: <u>bcwauk88@gmail.com</u>). Your temporary **password** will be emailed to your personal email. You will be prompted to change your password at initial login. (NOTE - PASSWORD PARAMETERS: Must be at least 8 characters, a capital letter, a number, AND a special character (cannot use "@" or "~" symbols).

WELCOME TO HIGH LI	NE		
	Access Key: Password:	Forgot your password?	Log in

*If you have followed the instructions above and cannot access high line, please call the help desk at 262-548-7630 or <u>Helpdesk@waukeshacounty.gov</u>.* 

# **Employee Role**

You can access screens by clicking on the fly out "Main Menu" tab. Fly out menu example:

				Example Mertz Employee	· · · · · · · · · · · · · · · · · · ·
Dashboard	Ope			Search	
Home     Personal Information     Personal Profile     Job and Compensation     Contacts	My Personal	Profile			
Verification of Employment	M	First Name : Example		Date of Birth : 01-01-1973	
S Pay Information	an	Middle Name :		Gender : Female	
Tax Filing	Aem	Last Name : Mertz		Ethnicity : US-White	
Pay Stub		Photo Location : detault.bmp			
W-2 Consent					
Direct Deposit					
D Benefits					
Current Benefits Enrolled Dependents	≪ € 1 of 1 → )#	01-01-0001 - 12-31-3999	Change Reason :	CONVERSION Q	
Life Insurance Beneficiary	PERSONAL ADDRESS & CONT	ACT INFORMATION			
Benefit Elections	Address 1 : 6285 Main St	f.	• Home Phone :	(555) 555-5555	
Benefit History	Address 2 :		· Cell Phone :		
Talent and Performance	City : Waukesha		• Personal Email :		<b>E</b>
6 Company Resources	• State, Country : Wisconsin, U	SA Q			
,,,,,	• Zip Code : 99999				

## **Personal Information**

### Personal Profile

Select "Personal Profile" on the fly out "Main Menu" tab to view your basic demographic information. Upon initial login to the system, verify that the information Human Resources has on file is correct. If your address, home phone, cell phone, or personal email is wrong or missing you may submit a change request. To do this, follow the directions below:

		Example Mertz Employee 🛛 🗸 🌃 🛶 🖓 🕞
Dashboard # Home Personal Information Personal Profile Job and Compensation Contacts Verification of Employment Document Sign Offs S Pay Information Tax Filing Pay Stub W-2 Consent Direct Deposit	Main Mariner : Example Middle Name : Market : Ma	Date of Birth : 01-01-1973 Gender : Female Ethnicity : US-White
Benefits     Current Benefits     Enrolled Dependents     Life Insurance Beneficiary     Benefit Elections     Benefit History		Change Reason: CONVERSION     CONVERSION     Cell Phone : (555) 555-5555     * Cell Phone : (555) 555-5555
Talent and Performance Reviews     Company Resources	City: Waukesha     State, Country: Wisconsin, USA     Zip Code: 99999	Personal Email : emertz@email.com

1. Make your changes in the appropriate fields. Changes will appear in blue. (A red asterisk (\*) is a required field)

2. Click green SAVE disk is on the upper right corner of the screen. Clicking the green save disk will prompt you to enter an "Effective Date" and "Change Reason."

16	Organization Name - Personal	lity × 📀	Self Service		× +							-	. (	ס	×
~	→ C A https://wa	aukng2.highli	nehosting.com:7	014/selfServi	ceADF/faces/se	elfService				☆	メ	3	0	A	:
0	Provider Maintenan 🚺 w	cmysites.wauke	esh Ees Employ	ver eServices	IntelliTime Vi	firtual Ti	S Welcome to Health.	🌸 Waukesha County	I 🎼 DEMO	15- PROD Person	ality				>>
								Andrea Violo	Employee	×		IKE DUA	10	?	•
Open Enrollm		THE WAY	S Date Sensiti	First Nan	ge : Andreo	a		Date of Bir	h: 07-14-198	35		5		•	
ent >			If this chan click 'OK'.	ge is to ta	ke effect o	n a spe	ecific date, enter Example: 11-29	the Date and Re	ason then					Ì	
Main Men		- 5 M	Change	Reason :	CONVERS		<b>Q</b>								
<ul> <li></li> <li></li> </ul>	M 🗲 3 of	3 -> PPI	If this is a co	orrection	oniy, leave	the da	ite ana reason a	s is and click OK						1	
-	PERSONAL ADDR	ESS & CC	If you have	made ar	n error, click	CANC	CEL'							1	
	* Address 1 :	10962 M	_												
	Address 2 :		OK	Cancel											
	City :	Brookfie													
	State, Country :	Wisconsi	n, USA	Q										1	
	• Zip Code :	99999												-1	
	POWERED BY HIGH LINE									@ 20	19 High	Line Co	orporatio	n	

Pick an effective date (Date you are making the Change) and the appropriate change reason by clicking on the green magnifying glass and selecting the appropriate reason.
 <u>Hint</u>: when you click the green maginifying glass to select another option, you may need to hit the "Reset" button in the upper right hand corner to see all available options.

Change Reason :			
			Search Rese
Change Reason		Descriptio	on
ANNUAL OPEN EN	Annual Open	Enrollment	

- 4. Click "OK."
- 5. Click "SUBMIT CHANGES" button. (The submit button is typically at the top of the screen.) You must click submit to make changes.
- 6. Verify your changes one last time. Then click, "OK."

After you click "OK," a Personnel Action (PA) will be initiated and your changes will be forwarded to HR for review. Changes will appear in burnt orange until they are approved by HR. Once approved, they will return to black. Example screenshot of pending transaction changes is below. (Depending on the type of transaction, you may receive emails to notify you that the PA has been approved/processed.) This is just for your record. Once received go into self-service to review.

	Example Mertz Employe	e 🗸 🖌 🖓 🕩
Open Enrollment ~	Any field emphasized at burnt strange is ournently being reviewed for approval in Personnel Action 204.       PLEASE SUBMIT YOUR CHANGES ONCE COMPLETED       SUBMIT CHANGES	v ⊚ ↔ ₽
Main Menu 🔹	My Personal Profile	
	Middle Name : Kample Date of simt (1-01-19/3	
	Inst Name : Martz Ethnicity : IIS.Write	
	Photo Location : default.bmp 🕞	
	* Address 1 : 111 Test Street * Home Phone : (555) 555-5555	
	Address 2 : Apt #12 * Cell Phone : (555) 555-5555	
	City: Waukesha     Personal Email: emertz@email.com	
	* State, Country : Wisconsin, USA	
	• Zip Code: 99999	

### Job and Compensation Information

Select "Job and Compensation" on the fly out "Main Menu" tab to view your information. On the "Compensation" tab, it shows your job and compensation history. The information you see on the screen corresponds to the time frame selected. Use the green arrows next to the timeline (in middle of page) to scroll through your job and compensation history. As you scroll through your timeline, you will see your job and compensation information change on the screen. A change reason is noted for each time period.

My Job and Compensation         Job Assignmentity       Start Date       End Date       Description       Next Review       Hire Date         RIMARY       05-22-1995       12-11-2020       05-22-1995         Lift < 41 of 41	Assignmentix*       Start Date       End Date       Description       Next Review       Hire Date         VARY       05-22-1995       12-11-2020       05-22-1995         Ittle:       Social Worker       Ittle:       Description       Next Review       Hire Date         Ittle:       Social Worker       County Department:       HEALTH AND HUMAN SERVICES       FTE:       1.0         Ittle:       Social Worker       County Department:       ALTERNATE CARE       Status:       ACTIVE         Job:       SOCIAL WORKER       Unit:       EXEMPT       Status:       ACTIVE         Job:       SOCIAL WORKER       Minimum:       \$26.02       Annual:       \$71,427.20         Rouge Rate:       \$34.34       Minimum:       \$26.02       Annual:       \$71,427.20         Scale Rate:       Market Value:       \$30.22       Bi- Weekly:       \$2,747.20         Ronge:       O-9       Maximum:       \$34.41       Hourly:       \$34.34					
Job Assignmenti*       Start Date       End Date       Description       Next Review       Hire Date         RIMARY       05-22-1995       05-22-1995       05-22-1995       05-22-1995         Ittle:       Social Worker       01-04-2020 - 12-31-3999       Concertment: MERIT INCREASE OPEN         Title:       Social Worker       County Department : HEALTH AND HUMAN SERVICES       FTE : 1.00         'osifion :       SOCIAL.WORKER-000-TEST       HL Department : ALTERNATE CARE       Status : ACTIVE         Job :       SOCIAL.WORKER       Unit : EXEMPT       Group : FULL-TIME         'compensation       Change Log       Market Value : \$30.22       Annual : \$71,427.20         Scale Rate :       Market Value : \$30.22       Bi- Weekly : \$2,747.20         Range : 0-09       Maximum : \$34.41       Hourly : \$34.34         Compon Ratio : 113.63       Conserver : \$34.34	bb Assignmenti V       Start Date       End Date       Description       Next Review       Hire Date         MARY       05-22-1995       01-04-2020 - 12-31-3999       Description       12-11-2020       05-22-1995         Itile : Social Worker       01-04-2020 - 12-31-3999       Description       MERIT INCREASE OPEN         Title : Social Worker       Country Department : HEALTH AND HUMAN SERVICES       FTE : 1.00         Ition : SOCIAL.WORKER-000-TEST       HL Department : ALTERNATE CARE       Status : ACTIVE         Job : SOCIAL.WORKER       Unit : EXEMPT       Group : FULL-TIME         mpensation       Change Log       Market Value : \$30.22       Annual : \$71,427.20         Scale Rate :       Market Value : \$30.22       Bi- Weekly : \$2,747.20         Range : O-09       Market Value : \$34.41       Houthy : \$34.34         Markinum : \$34.41       Houthy : \$34.34	My Job and Com	pensation			
RIMARY       Q5-22-1995       12-11-2020       Q5-22-1995         Ittle:       Social Worker       O1-04-2020 - 12-31-3999       Corrections: MERIT INCREASE OPEN         Title:       Social Worker       County Department:       HEALTH AND HUMAN SERVICES       FTE:       1.00         'ostition:       SOCIAL.WORKER-000-TEST       LUEPartment:       ALTERNATE CARE       Status:       ACTIVE         Job:       SOCIAL.WORKER       Unit:       EXEMPT       Group:       FULL-TIME         'compensation       Change Log       Market Value:       \$30.22       Annual:       \$71,427.20         Scale Rate :       Market Value:       \$30.22       Bi-Weekly:       \$2,747.20         Range:       O-09       Market Value:       \$30.22       Bi-Weekly:       \$2,747.20         Scale/Step :       : <td< th=""><th>MARY       05-22-1995       12-11-2020       05-22-1995         Itel • 10141 • 101       01-04-2020 - 12-31-3999       Observe Merit INCREASE OPEN         Title : Social Worker       County Department : HEALTH AND HUMAN SERVICES       FTE : 1.00         Itel : Social Worker       County Department : ALTERNATE CARE       Status : ACTIVE         Job : SOCIAL WORKER       Unit : EXEMPT       Group : FULL-TIME         mpensation       Change Log         KGE/SALARY DETAILS       SALARY RANGE DETAILS       WAGE CONVERSIONS         Nage Rate :       Market Value : \$30.22       Bi-Weekly : \$2,747.20         Range : 0-09       Maximum : \$34.41       Hourly : \$34.34         Scale(Step :       mpo- Ratio : 113.63       Hourly : \$34.34</th><th>Job Assignmenti 🔭 Start Date</th><th>End Date Description</th><th>Next Review</th><th>Hire Date</th><th></th></td<>	MARY       05-22-1995       12-11-2020       05-22-1995         Itel • 10141 • 101       01-04-2020 - 12-31-3999       Observe Merit INCREASE OPEN         Title : Social Worker       County Department : HEALTH AND HUMAN SERVICES       FTE : 1.00         Itel : Social Worker       County Department : ALTERNATE CARE       Status : ACTIVE         Job : SOCIAL WORKER       Unit : EXEMPT       Group : FULL-TIME         mpensation       Change Log         KGE/SALARY DETAILS       SALARY RANGE DETAILS       WAGE CONVERSIONS         Nage Rate :       Market Value : \$30.22       Bi-Weekly : \$2,747.20         Range : 0-09       Maximum : \$34.41       Hourly : \$34.34         Scale(Step :       mpo- Ratio : 113.63       Hourly : \$34.34	Job Assignmenti 🔭 Start Date	End Date Description	Next Review	Hire Date	
Itile:: Social Worker   County Department:: HEALTH AND HUMAN SERVICES FTE:: 1.00 HL Department:: ALTERNATE CARE Social.WORKER-000-TEST HL Department:: ALTERNATE CARE Social.WORKER Social.WORKER Change Log MAGE CONVERSIONS Kage Rate:: Salary RANGE DETAILS Market Value:: \$30.22 Bi-Weekly:: \$2,747.20 Maximum:: \$34.41 Houfy:: Salary Salary Range Details Market Value:: \$30.22 Bi-Weekly:: \$2,747.20 Houfy:: \$34.34 Salary Range Details Market Value:: \$30.22 Bi-Weekly:: \$2,747.20 Houfy:: \$34.34 Salary Range Detail: Sa	Image Resert       MERIT INCREASE OPEN         Title : Social Worker       County Department : HEALTH AND HUMAN SERVICES : FT: 1.00.         titon : SOCIAL.WORKER-000-TEST       HL Department : ALTERNATE CARE : Status : ACTIVE         Job : SOCIAL.WORKER       Unit : EXEMPT         Group : FULL-TIME       Group : FULL-TIME         Merge Resert       SALARY RANGE DETAILS         WAGE CONVERSIONS       Minimum : \$26.02         Scale Rate :       Market Value : \$30.22         Range : 0-09       Maximum : \$34.41         Hourty : \$34.34	RIMARY 05-22-1995		12-11-2020	05-22-1995	
Title : Social Worker     County Department : HEALTH AND HUMAN SERVICES     FTE : 1.00       Position : SOCIAL.WORKER-000-TEST     HL Department : ALTERNATE CARE     Status : ACTIVE       Job : SOCIAL.WORKER     Unit : EXEMPT     Group : FULL-TIME         Compensation     Change Log         VAGE/SALARY DETAILS     SALARY RANGE DETAILS     WAGE CONVERSIONS       Wage Rate : \$34.34     Minimum : \$26.02     Annual : \$71,427.20       Scale Rate :     Market Value : \$30.22     Bi- Weekly : \$2,747.20       Range : 0-09     Maximum : \$34.41     Hourly : \$34.34       Scale/Step :     Compare Ratio : 113.63	Title : Social Worker     County Department : HEALTH AND HUMAN SERVICES     FTE : 1.00       ition : SOCIAL.WORKER-000-TEST     HL Department : ALTERNATE CARE     Status : ACTIVE       Job : SOCIAL.WORKER     Unit : EXEMPT       Group : FULL-TIME <b>npensation</b> Change Log         Ge/SALARY DETAILS     SALARY RANGE DETAILS     WAGE CONVERSIONS       Nage Rate : \$34.34     Minimum : \$26.02     Annual : \$71,427.20       Scale Rate :     Market Value : \$30.22     Bi- Weekly : \$2,747.20       Range : O-09     Maximum : \$34.41     Hourly : \$34.34       Scale/Step :     mpa- Ratio : 113.63	41 of 41	01-04-2020 - 12-31-3999			
Title : Social Worker       County Department : HEALTH AND HUMAN SERVICES       FTE : 1.00         osition : SOCIAL.WORKER-000-TEST       HL Department : ALTERNATE CARE       Status : ACTIVE         Job : SOCIAL.WORKER       Unit : EXEMPT       Group : FULL-TIME         compensation       Change Log         VAGE/SALARY DETAILS       SALARY RANGE DETAILS       WAGE CONVERSIONS         Wage Rate : \$34.34       Minimum : \$26.02       Annual : \$71,427.20         Scale Rate :       Market Value : \$30.22       Bi- Weekly : \$2,747.20         Range : 0-09       Maximum : \$34.41       Hourly : \$34.34         Scale/Step :       :       :         compa-Ratio : 113.63       :       :	Title : social Worker County Department : HEALTH AND HUMAN SERVICES FTE : 1.00 ition : SOCIAL.WORKER-000-TEST HL Department : ALTERNATE CARE Status : ACTIVE Job : SOCIAL.WORKER Unit : EXEMPT Group : FULL-TIME mpensation Change Log KGE/SALARY DETAILS SALARY RANGE DETAILS WAGE CONVERSIONS Nage Rate : \$34.34 Minimum : \$26.02 Annual : \$71,427.20 Scale Rate : Market Value : \$30.22 Bi- Weekly : \$2,747.20 Maximum : \$34.41 Hourly : \$34.34 Scale/Step : mpa-Ratio : 113.63					
Prosition : SOCIAL.WORKER -000-TEST       HL Department : ALTERNATE CARE       Status : ACTIVE         Job : SOCIAL.WORKER       Unit : EXEMPT       Group : FULL-TIME         Compensation       Change Log       WAGE CONVERSIONS         WAGE/SALARY DETAILS       SALARY RANGE DETAILS       WAGE CONVERSIONS         Wage Rate : \$34.34       Minimum : \$26.02       Annual : \$71,427.20         Scale Rate :       Market Value : \$30.22       Bi- Weekly : \$2,747.20         Range : O-09       Maximum : \$34.41       Hourly : \$34.34         Scale/Step :       :       :         Company - Ratio : 113.63       :	ition : SOCIAL.WORKER-000-TEST HL Department : ALTERNATE CARE Status : ACTIVE Job : SOCIAL.WORKER Unit : EXEMPT Group : FULL-TIME Mage Rate : \$34.34 SALARY RANGE DETAILS WAGE CONVERSIONS Nage Rate : \$34.34 Minimum : \$26.02 Annual : \$71,427.20 Scale Rate : Market Value : \$30.22 Bi- Weekly : \$2,747.20 Range : O-09 Maximum : \$34.41 Hourly : \$34.34 Scale/Step : mpa-Ratio : 113.63	Title : Social Worker	County Department : HEALTH A	ND HUMAN SERVICES	FTE: 1.00	
Job : SOCIAL.WORKER Unit : EXEMPT Group : FULL-TIME Compensation Change Log MAGE/SALARY DETAILS SALARY RANGE DETAILS WAGE CONVERSIONS Wage Rate : \$34.34 Minimum : \$26.02 Annual : \$71,427.20 Scale Rate : Market Value : \$30.22 Bi- Weekly : \$2,747.20 Range : O-09 Maximum : \$34.41 Hourly : \$34.34 Scale/Step :	Job : SOCIAL.WORKER Unit : EXEMPT Group : FULL-TIME	osition : SOCIAL.WORKER-000-TEST	HL Department : ALTERNAT	ECARE	Status : ACTIVE	
Compensation Change Log          XAGE/SALARY DETAILS       SALARY RANGE DETAILS       WAGE CONVERSIONS         Wage Rate : \$34,34       Minimum : \$26,02       Annual : \$71,427,20         Scale Rate :       Market Value : \$30,22       Bi- Weekly : \$2,747,20         Range : 0-09       Maximum : \$34,41       Hourly : \$34,34         Scale/Step :       Jonpa-Ratio : 113,63       Laster Scale State Scale	Group : FULL-TIME         mpensation       Change Log         Keg/SALARY DETAILS       SALARY RANGE DETAILS       WAGE CONVERSIONS         Nage Rate : \$34.34       Minimum : \$26.02       Annual : \$71,427.20         Scale Rate :       Market Value : \$30.22       Bi- Weekly : \$2,747.20         Range : 0-09       Maximum : \$34.41       Hourly : \$34.34         Scale/Step :       mpa-Ratio : 113.63       Maximum : \$24.02	Job : SOCIAL.WORKER	Unit : EXEMPT			
Compensation         Change Log           WAGE/SALARY DETAILS         SALARY RANGE DETAILS         WAGE CONVERSIONS           Wage Rate :         \$34.34         Minimum :         \$26.02         Annual :         \$71,427.20           Scale Rate :         Market Value :         \$30.22         Bi- Weekly :         \$2,747.20           Range :         O-09         Maximum :         \$34.41         Hourly :         \$34.34           Scale/Step :         Zompa- Ratio :         113.63         Xade Scale Sca	SALARY PARAGE DETAILS         WAGE CONVERSIONS           Vage Rate :         \$34,34         Minimum :         \$26,02         Annual :         \$71,427,20           Scale Rate :         Market Value :         \$30,22         Bi- Weekly :         \$2,747,20           Range :         O-09         Maximum :         \$34,41         Hourly :         \$34,34           Scale/Step :         mpa-Ratio :         113,63         I13,63         I13,63         I13,63		Group : FULL-TIME			
Wage Rate : \$34.34         Minimum : \$26.02         Annual : \$71,427.20           Scale Rate :         Market Value : \$30,22         Bi- Weekly : \$2,747.20           Range : O-09         Maximum : \$34.41         Hourly : \$34.34           Scale/Step :         Dompa- Ratio : 113.63         Hourly : \$4.41	Wage Rate : \$34.34     Minimum : \$26.02     Annual : \$71,427.20       Scale Rate :     Market Value : \$30.22     Bi- Weekly : \$2,747.20       Range :     O-09     Maximum : \$34.41     Hourly : \$34.34       Scale/Step :     mpa-Ratio : 113.63     Hourly : \$34.34	Compensation Change Log	SALARY RANGE DETAILS		WAGE CONVERSIONS	
Scale Rate:         Market Value:         \$30.22         Bi- Weekly:         \$2,747.20           Range:         O-09         Maximum:         \$34.41         Hourly:         \$34.34           Scale/Step:         2000000000000000000000000000000000000	Scale Rate :         Market Value : \$30.22         Bi- Weekly : \$2,747.20           Range :         0-09         Maximum : \$34.41         Hourly : \$34.34           Scale/Step :         mpa- Ratio : 113.63         -         -	Wage Rate : \$34.34	Minimum : \$26.02		Annual : \$71,427.20	
Range:         O-09         Maximum:         \$34.41         Hourly:         \$34.34           Scale/Step:         .	Range:         O-09         Maximum:         \$34.41         Hourly:         \$34.34           Scale/Step:	Scale Rate :	Market Value : \$30.22		Bi- Weekly : \$2,747.20	
Scale/Step : Compa-Ratio : 113,63	Scale/Step : mpa-Ratio : 113,63	Range: O-09	Maximum : \$34.41		Hourly: \$34.34	
Compa- Rafio : 113.63	mpa-Ratio : 113.63	Scale/Step :				
		Compa- Ratio : 113.63				

Page 5

N:\HR\Becky Training Info\Parks Recruitment\2021 Recruiting\New Employee High Line Self Service Training Guide - Seasonal.docx

On the "Change Log" tab, it includes the compensation change history on the same time frame selected. For example as shown below, an employee had an *Across-the-Board* increase and a *Merit Increase* on the same date 01/04/2020. The Change Log shows the Across-the-Board increase changed the employee's hourly rate to \$34.00; and the Merit Increase changed the employee's hourly rate to \$34.34.

My Job	and Con	npensatio	n		
Job Assignment	Start Date	End Date	Description	Next Review	Hire Date
PRIMARY	05-22-1995			12-11-2020	05-22-1995
	🚧 🗲 41 of 4	01-04-202	0 - 12-31-3999 Cho	ange Reason : MERIT INCREA	se open
Title : Social W	orker		County Department : HEALTH AND H	human services	FTE: 1.00
Position : SOCIAL.	NORKER-000-TEST		HL Department : ALTERNATE C	ARE	Status : ACTIVE
Job : SOCIAL.V	VORKER		Unit : EXEMPT		
			Group : FULL-TIME		
CHANGE HISTORY Cha ACROSS-THE-BOAR MERIT INCREASE OF Field Wage Rate 34.0	ange Reason D EN Value 00000				
Compensation Cho	inge Log				
CHANGE HISTORY Change ACROSS-THE-BOARD MERIT INCREASE OPEN	e Reason				
Field Value Wage Rate 34.34000	00				

### Contacts

Select "Contacts" on the fly out "Main Menu" tab to view your listed contacts. Contacts should include anyone that is a emergency contact. This screen is editable.

									Exam	ple Mertz Emplo	yee 🗸 🚧
											" "
											WEE
My Co	ntact	s									
0											
First Name L	.ast Name	Phone #	Extn	Contact Status	Beneficiary	Dependent	Emergency	Spouse	í		
irst Me	ertz			Active	No	Yes	No	No			
				Active		1					
Second Smi	ithson	(555) 555-5555		Active	No	No	No	No			
CONTACT DETAI	ILS										
Contact Priority					Pelation	Spouse			Beneficiary :		
Contact Priority	: 1 ×				Relation : Date of Birth :	Spouse 👻			B <mark>eneficiary</mark> : Dependent :	N	
Contact Priority * First Name Middle	: 1 × : Ronald				Relation : Date of Birth : * Home Phone :	Spouse V	55		Beneficiary : Dependent : Emergency :	N N	
Contact Priority * First Name Middle * Last Name	: 1 ~ : Ronald :			þ	Relation : Date of Birth : * Home Phone : Work Phone :	Spouse ~	55		Beneficiary : Dependent : Emergency : Spouse :	N N N	
Contact Priority * First Name Middle * Last Name Suffix	: 1 ~ : Ronald : : Mertz :	v		ì	Relation : Date of Birth : • Home Phone Work Phone : Work Ext :	Spouse v (555) 555-555	55		Beneficiary : Dependent : Emergency : Spouse :	N N N	
Contact Priority * First Name Middle * Last Name Suffix Contact Status	: 1 : Ronald :	* *		Ì	Relation : Date of Birth : * Home Phone Work Phone : Work Ext : * Cell Phone	Spouse  (555) 555-555 (555) 555-555	55		Beneficiary : Dependent : Emergency : Spouse :	N N N	
Contact Priority * First Name Middle * Last Name Suffix Contact Status Cender	ILS I V Ronald I Mertz I Active Male	* * *		Ì	Relation : Date of Birth : • Home Phone : Work Phone : Work Ext : • Cell Phone Personal Email :	Spouse	35 55		Beneficiary : Dependent : Emergency : Spouse :	N N N	
Contact Priority * First Name Middle * Last Name Suffix Contact Status Cender Address 1	:         1         ~           :         Ronald         .           :         .         .           :         .         .           :         .         .           :         .         .           :         .         .           :         .         .           :         .         .           :         .         .           :         .         .	* * *		Ì	Relation : Date of Birth : • Home Phone Work Phone Work Ext : • Cell Phone Personal Email : SSN :	Spouse  (555) 555-555 (555) 555-555	55		Beneficiary : Dependent : Emergency : Spouse :	9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	
Contact Priority * First Name Middle * Last Name Suffix Contact Status Condact Status Address 1 Address 2	<ul> <li>I *</li> <li>Ronald</li> <li>Mertz</li> <li>Active</li> <li>Male</li> <li>I</li> </ul>	* * *		ì	Relation : Date of Birth : Home Phone : Work Phone : Work Ext : Cell Phone : Personal Email : SSN :	Spouse (555) 555-555 (555) 555-555	55		Beneficiary : Dependent : Emergency : Spouse :	N N N	
Contact Priority * First Name Middle * Last Name Suffix Contact Status Cender Address 1 Address 2 City	ILS           :         1           Ronald           :           :         Mertz           :         .           :         .           :         .           :         .           :         .           :         .           :         .           :         .           :         .           :         .           :         .	* * *		ì	Relation : Date of Birth : Home Phone : Work Phone : Work Ext : Cell Phone : Personal Email : SSN :	(555) 555-555 (555) 555-555	55		Beneficiary : Dependent : Emergency : Spouse :	N N N	
Contact Priority * First Name Middle * Last Name Suffix Contact Status Gender Address 1 Address 2 City State, Country	<ul> <li>1 ~</li> <li>Ronald</li> <li>Mertz</li> <li>Active</li> <li>Male</li> <li>:</li> </ul>	* * *	2	a I	Relation : Date of Birth : Home Phone : Work Phone : Work Ext : Cell Phone : Personal Email : SSN :	(555) 555-555 (555) 555-555	55		Beneficiary : Dependent : Emergency : Spouse :	N N N	

All employees must have at least one emergency contact listed.

- 1. To add a contact, click the green plus 💶 button in the upper left of screen.
- 2. Enter the details for the contact. Anything with an asterisk (\*) is required.
- 3. Review the check boxes (right side) to make sure you have all of the appropriate categories selected for a contact. You will only need to check the Emergency box.
- 4. Click green disk 🛅 (save) in the upper right corner after making all of your changes.

### Verification of Employment

Select "Verification of Employment" on the fly out "Main Menu" tab. To produce a verification of employment letter, click the green "Launch" button in upper left of screen.

8			Example Mertz Employee		0	۲
Open E	<u>0</u> 2 0		Search	~ 🕑		
nrollmen	Request for Verification of Employment					
>	Output :	termin mittent				
Main Ment	Criteria					
>	Current Year : 2019					

### This will produce your output report. Click on the Output ".pdf" to open your report.

8		Đ	ample Mertz Employee		8	•
10			Search	~ 🕑	<b>*</b> >	
oen Er	Lower Keret Concel			1	REVOE	
vrollment	Request for Verification of Employment					
>	Output : 16850 REVOE.pdf	Email Output				
Main N	Criteria					
lenu ^	Current Year: 2019					

### Sample "Request for Verification of Employment" report:

A 1635	50_REVC	E.pdf - Add	be Acroba	at Reader D	¢																l i	l		
File E	Edit Vie	ew Windo	w Help																			22.1		
Hon	ne	Tools	16	6350_REV	OE.pdf ×																	?	S	ig
B	എ			2	٢		2 / 2	k	$\odot$	Θ	$\oplus$	126%	•	H-	*	Ę	3	2	n.				¢	Sh
		Requ	lest	for V	erific	atio	n of E	mplo	yme	nt													1	
									ALC: N			/												
									HI	GH	LI	NE												
									Waul	kesh	a C	ounty												
									64	40 Ma	ain	St.												
							v	Vauke	sha, V	Visco	onsi	n, US/	A 99	999										
								į.	As of /	Augu	ist 22	2, 2019	9											
		Part	I – En	nploye	e Nam	e and	d Addre	SS																
		Mer	tz, Exa	mple																				
		628	5 Main	St., Wa	ukes <mark>ha</mark> , '	Wiscor	isin, <mark>US</mark> A	99999																
		Part	II – Ve	erifica	tion of	Pres	ent Em	plovm	ent															l
		D	ate Hir	red:		July 9	9, 2018																	l
		P	resent	Positio	n:	Solid	Waste Si	perviso	ог														=	
		с	urrent	Base S	alary:	\$62,8	57.60 / Y	ear															2	l
		E	arning	s:																				l
				Ту	pe		Y	ear To I	Date (20	0 <u>19</u> )		Prior	Year	(201	8)	E	Prior	Year	(201	7)				l
				a. Ba	se				\$41,798	8.58			\$25,	,810.4	10				\$0.0	00				
			1	b. Ov	ertime				\$(	0.00				\$0.0	00				\$0.0	00				
				c. Co	mmissi	ons			\$(	0.00				\$0.0	00				\$0.0	00				
				d. Bo	nus				\$(	0.00				\$0.0	00				\$0.0	00				
			3	e. Ot	her		10000		\$(	0.00				\$0.0	00				\$0.(	00				
				f. To	tal				\$41,798	8.58			\$25,	, <mark>810.</mark> 4	10				\$0.0	00				

# **Pay Information**

ax Filing						
o enter yo nformatio ederal Wit	our W4 informati n thholding	on, click Tax	Filing under Pay	<ul> <li>Home</li> <li>Personal Information</li> <li>Pay Information</li> <li>Tax Filing</li> <li>Pay Stub History</li> <li>Print My Pay Stub</li> <li>W-2 Consent</li> <li>W-2 Form</li> <li>Direct Deposit</li> </ul>		Main Menu 🗸
FEDERAL						
Add'l \$ or %	Per Period :	.000000 Numbe	er of Exemptions : 4	Tax Amount :		
				Tax Amount :		
FEDERAL W	4 TAX FILING INFORMA	TION	IF MAKING CHANGES TAX	PARM 2020 W4 - MUST BE SET TO VALUE T	RUE	
Misc. Tax Parm	Description	Field Variable	Reference Text : ^(TRUE F	"ALSE)\$ - 'TRUE'-using 2020 W4 or 'FALSE'		
000004	2020 W4	TRUE				
000006	Filing Status	Н				
000007	Two Jobs	FALSE				
800000	Dependent Amount	2000				
000009	Other Income	0				
000010	Deductions	0				

2021 W4: If you are changing your W4 in 2021 or later, change this to "TRUE"

Filing Status: (H) Head of Household (S) Single (M) Married

FEDERAL				
Add'l \$ or %	Per Period :	.000000 Numb	er of Exemptions : 4	Tax Amount :
				Tax Amount :
FEDERAL W	4 TAX FILING INFORMA	TION	IF MAKING CHANGES TA	X PARM 2020 W4 - MUST BE SET TO VALUE TRUE
Misc. Tax Parm	Description	Field Variable	Reference Text : ^(TRUE)	FALSE)\$ - 'TRUE'-using 2020 W4 or 'FALSE'
000004	2020 W4	TRUE		
000006	Filing Status	Η		
000007	Two Jobs	FALSE		
800000	Dependent Amount	2000		
000009	Other Income	0		
000010	Deductions	0		

- If you have one household income, leave as FALSE
- If you have two household incomes do as follows
  - o If both household annual incomes are similar, type TRUE
  - If household annual incomes are considerably different, type <u>FALSE</u> and use the IRS Multiple Jobs Worksheet to calculate an amount to enter in the "Add'I Tax Per Pay Period" field.
- If you have more than two household incomes type <u>FALSE</u> and use the IRS Multiple Jobs Worksheet to calculate an amount to enter in the "Add'I Tax Per Pay Period" field.

**Dependent Amount:** If you would like to reduce the amount of calculated withholding due to having tax dependents, enter your estimated dependent tax credit in this field (Dependent under 17 = \$2,000 each Dependent 17 or older = \$500 each) **\*Do not include a comma in the number here. Example: Enter 2000 and not 2,000**\*

**Other Income:** If you have a second job that does not provide withholding, you can use this field to enter your annual income for calculating additional withholding.

*Example*: I am a Maintenance mechanic that makes \$50,000 annually with Waukesha County and does side work making \$10,000 annually. I can enter \$10,000 in this field and more withholding will come out of each paycheck to accommodate this extra income.

**Deductions:** If you are able to itemize on your tax return, you can use this field to reduce your withholding.

*Example:* I am single, the standard deduction is \$12,400. I own a home and donate money to charity. On my 2019 tax return I was able to have a total itemized deduction amount of \$18,000. I can enter \$18,000 in this field to use that amount versus the standard deduction in the tax withholding calculation.

Add'I Tax Per Pay Period: If you would like any additional amount to be withheld from each pay period, use this field. If you would like this to be a percentage of your income versus an amount, contact Payroll.

#### **State Withholding**

STATE WITHHOLDING				
Add'I Tax Per Period :	.000000	Add'I Tax For Res :	~	Tax Amount :
		Add'l Tax For Work :	~	Tax Percent :
Reference Text : $^{(S )}_{married}$	M MH)\$ - 'S'-single, ed but w/h at highers	'M'-married, or 'MH'- single rate.		
Description	Field Variable			
Filing Status	S			
Total Allowances	2			

Filing Status: (S) Single (M) Married (MH) Married but withhold at higher single rate

**Total Allowance:** Enter total allowances using the Wisconsin WT-4 (link on self-service).

Add'I Tax Per Pay Period: If you would like any additional amount to be withheld from each pay period, use this field. If you would like this to be a percentage of your income versus an amount, contact Payroll.

### Pay Stub History

Select "Pay Stub History" on the fly out "Main Menu" tab to view your pay history.

						Searc
Vie Me	₩ My	Pay Hist	ory			
Pay#	Pay Period	Period Starting	Period Ending	Pay Issue Date	Net Pay \$	Entity
0117	201925	11-09-2019	11-22-2019	12-04-2019	670.46	WAUKESHA
0116	201924	10-26-2019	11-08-2019	11-20-2019	669.28	WAUKESHA
0115	201923	10-12-2019	10-25-2019	11-06-2019	671.17	WAUKESHA
0114	201922	09-28-2019	10-11-2019	10-23-2019	669.27	WAUKESHA

### Print My Pay Stub



#### To Print My Pay Stub:

- 1. Click "Print My Pay Stub" under the Pay Information Menu, as shown above
  - If you use Google Chrome as your web browser, make sure Pop Ups are enabled
  - Note the "Launch," "Reset," and "Cancel" Buttons at the top left hand side of the screen, above the Payroll Deposits bar. These will allow you to execute your selections

Launch Reset Cancel	RESTUBD
Payroii Deposits	
Output :	DO NOT SELECT
Criteria	
Click on the Magnifying Glass to select a pay period.	Select Pays :

#### 2. Do not select "Email Output"

- **3.** Find the box that says "Select Pays" (shown above). Click on the Magnifying Glass next to it to select the pay period(s) you want formatted into a printable PDF. A new menu will pop up (shown below).
- **4.** Select the pay period(s) you want to view by clicking on them in the list of Available Values. Once they are selected, click the single arrow buttons to create a list under Selected Values. After all the pay periods you want to view and/or convert into PDFs are listed under Selected Values. Click OK.

List of Disburs	ements for EE					8
Select Pays :		Se	arcl	n Reset		
All items cou	int: 15					
Av	ailable Values			Selected Val	lues	
09-11-2019, 08-28-2019, 08-14-2019, 07-31-2019, 07-03-2019, 06-19-2019, 06-05-2019, 05-22-2019, 05-22-2019, 04-24-2019	659.98, Regular P 669.39, Regular P 660.00, Regular P 680.02, Regular P 669.39, Regular P 669.39, Regular P 659.98, Regular P 659.99, Regular P 659.99, Regular P 659.99, Regular P	<b>^</b>		10-23-2019, 10-09-2019, 09-25-2019,	668.39, Regular P 658.99, Regular P 668.39, Regular P	
					Ok Canc	el

- 5. Click Launch in the upper left hand corner, above the blue Payroll Deposits Bar.
  - A new menu may pop up showing that your report is being generated.
  - If a menu pops up asking if you want to open a pdf, click Open. Make sure to allow the pop-ups.



• Some people may automatically be directed to a new web page with the report



**7.** In the Self-Service Menu, you can reopen the pay stub PDF by clicking on the link next to Output at the top of the screen.



8. To rerun the pay stub report, you must first click reset in the upper left hand corner.

Sample "Pay Stub" report: (on next page)

e Tool	s 16354 RE	STUBD.pdf ×								
~ ¬			~		-	~ ~				
(†) 🖻	$\bowtie$	()	1	/ 1		$\Theta \oplus$	107% 👻	Ē ₹	'   早	De On
Em	ployee Name	Employee ID		Department	Ra	te/Salary	Period End	Pay	Date	Net Pay
E	ample Mertz	15326	RECY	VASTE	LID 3	0.22/HR	2019-08-02	2019-(	08-14	\$1,700.81
		EARNINGS		WHOTE			TAX	ES WITHHEI	D	
	Description	Hours R	ate T	his Pay	Y-T-D		Description	T	his Pay	Y-T-D
Perf Award	1.111.0.1				915.10	Social Securi	ity EE		141.00	2,431.00
ay Adjustn	nent	90.00	20.22	2 417 60	48.00	Medicare EE			32.98	1 920 22
tel Pav		00.00	00.22	2,417.00	1 422 08	State Reside	nt Tay Reg Tay		117.28	1,029.33
H Pay - Pe	ension				241.76	Otale Meside	in Tax neg Tax		111.20	1,570.24
/ac \$\$\$					664.84					
						1	OTHER DEDU	JCTIONS (* r	educes tax)	
							Description		his Pay	Y-T-D
						*Pension Gel	DEM Dro		158.35	2,737.78
			100 000			*Dolta EE D	REIVI PIE		100.00	62.16
_	A	DUITIONAL PAYN	IENIS	bio Davi	X T D	*Vision FE P	rem Pre			27.86
	Description	HOUIS   R	ate 1	nis Pay	T-1-D	Dep Life	ioni io		2.55	20.40
						Supplementa	EE Life		3.00	24.00
						*Dep Care F	SA		50.00	850.00
						-				
	_	ACCRUALS	0	_			BENE	FITS (* taxa	ble)	
	Description	Prior	Earned	Taken	Balance		Description	T	his Pay	Y-T-D
	2.1					HDHP ER Pr	rem		565.33	9,610.61
						Delta ER Pre	em Std			559.50
						Vision ER Pr	em			27.86
						HSA ER				2,250.00
						RHS ER	14-		200.22	320.88
						Other Bener	its		389.23	6,183.95
		SUMMARY					NET PA	Y DISTRIBU	TION	
	Earnings	Taxes Ded	uctions	Earned	Benefits	Desc	ription	Bank Acc	count	Amount
This Pay	2,417.60	402.89	313.90	1,700.81	954.56	Pay by Depo	sit	Checking	3 ****	0.00
Y-T-D	41,798.58	6,807.11	,422.20	29,569.27	18,952.84					
	T/	X FILING INFORM	NOITAN	8						
	Filing Status	# Exemptions	Add'l Exem	npt Amt Ade	d'I \$ or % PP					
Federal	Married	4			0.00					
State	02-Married	3			0.00					
						ter				

### Viewing/Changing/Enrolling Your Direct Deposit

Select "Direct Deposit" on the fly out "Main Menu" tab. Your current direct deposit information can be viewed here.

### Direct Deposit

 Please click on the plus sign to add in your accounts in the order and amounts in which you want deposits to go into. Enter the account(s) with a set amount first and the account for the remainder last.

Steps :

Then check the Pay Remaining check box and Prime Deposit check box for where you want the remainder of your pay to go to.
 Click the Save button in the upper right hand corner and enter the date, within the pay period you would like the change to take effect. Changes must be made on this screen by the Wednesday prior to the pay date.

#### PAYMENT METHOD

TIME FRAME Current Since		ORMATION				
03-31-2019	* Priority	* Method	Amount	Percentage	Pay	Pav to Order of
03-30-2019					Remaining	
01-01-0001	888	Pay by Deposit 🛛 🖌			⊻	

You may update your banking information via this screen. This screen is editable. Changes must be made on this screen by the Wednesday prior to the pay date you want the change to take effect.

To add a new account

1. Click on the green mangifying glass next to Bank Transit.

Priority	* Method	Amount	Percentage	Pay Remaining	Pay to Order of
887	Pay by Deposit 🗸			2	
Account Tune	Condinant				
Accountrype	. savings v				
<ul> <li>Bank Transi</li> </ul>	t:				
<ul> <li>Bank Transi</li> <li>Bank Account</li> </ul>	t:				
<ul> <li>Bank Transi</li> <li>Bank Accoun</li> <li>Bank Name</li> </ul>	t : Community First CU				
<ul> <li>Bank Transi</li> <li>Bank Accoun</li> <li>Bank Name</li> <li>State</li> </ul>	Solvings     Solvings				

2. Type your bank transit number (routing number) in the search box and click Search. Highlight your bank transit number and click Ok.

Note: If you do not see yours, email <u>payroll@waukeshacounty.gov</u> and ask to have your bank transit number added as an option.

	Ke
Bank Iransif	Bank
2/3980816	LAREVIEW CREDIT
2/ 598088/	Premier Financial Cu
2/3761136	UW OSHKOSH CFUHIOH
2/37611/4	Citizona Eint
2/3/0110/	Cilizens Firsi
2/59813/8	Educators Credit
2/ 5962102	Shoreline CU
2/3982283	Cloverbell Credit Un
2/3702322	Charles Lills C Li
2/3982326	Gidcler Hills C U
27 5962001	
2/3982924	DODGE CENTRAL CU

3. Enter your account number here.

Priority	* Method	Amount	Percentage	Pay Remaining	Pay to Order of
887	Pay by Deposit 🛛 🗸				
Account Type	: Savings 🗸				
* Bank Transit	: Savings ~ : 275982801	Q			
* Bank Transit Bank Account	: Savings ~ : 275982801	Q			
Account Type * Bank Transit Bank Account Bank Name	2: Savings ~ 275982801 2: Community First CU	Q			
Account Type * Bank Transit Bank Account Bank Name State	Savings     Z75982801     Community First CU     Wisconsin	Q			

4. Click the Green Plus Sign under Banking Information to enter an additional account.

Priority	Method	Amount	Percentage	Pay Remaining	Pay to Order of
887	Pay by Deposit 🛛 🐱			2	
Account Type	: Savings 🗸				
Bank Transi	: 275982801	Q			
<ul> <li>Bank Transi</li> <li>Bank Account</li> </ul>	: 275982801 : [	<b>Q</b> ]			
<ul> <li>Bank Transi</li> <li>Bank Account</li> <li>Bank Name</li> </ul>	: 275982801 : : Community First CU	<b>Q</b>			
<ul> <li>Bank Transi</li> <li>Bank Account</li> <li>Bank Name</li> <li>State</li> </ul>	275982801 Community First CU Wisconsin	<b>Q</b> ]			

5. Your last account should have the highest priority number and have the Pay Remaining and Prime Deposit boxes checked.

In this example, 60% of the pay will first go into the account with priority 886 and the remaining pay will go into the account with priority number 887. You could also pick a flat amount to go into the first account in the Amount box instead of a percent.

* Priority	* Method	Amount	Percentage	Pay Remaining	Pay to Order of	
887	Pay by Deposit 🛛 🗸					
886	Pay by Deposit		60	51111111111111111111111111111111111111		+
<ul> <li>Account type</li> </ul>	: Savings ~					
<ul> <li>Account type</li> <li>Bank Transit</li> </ul>	: 275982801	Q				
<ul> <li>Account Type</li> <li>Bank Transit</li> <li>Bank Account</li> </ul>	: Savings  275982801 : 123456 : Community First CI	Q				
<ul> <li>Account Type</li> <li>Bank Transit</li> <li>Bank Account</li> <li>Bank Name</li> </ul>	: Savings : 275982801 : 123456 : Community First CU	Q				
<ul> <li>Account Type</li> <li>Bank Transit</li> <li>Bank Account</li> <li>Bank Name</li> <li>State</li> </ul>	: Savings • : 275982801 : 123456 : Community First CU : Wisconsin	Q				

In this example, \$300 will first go to the account with Priority 885, then \$200 will go to the account with Priority 886, and the remaining pay will go to the account with the Priority 887 marked Pay Remaining and Prime Deposit.

Priority **	* Method	Amount	Percentage	Pay Remaining	Pay to Order of
885	Pay by Deposit	300.00			
886	Pay by Deposit	200.00			
887	Pay by Deposit 🛛 🗸				
Account Type	: Savings 🗸				
Account Type * Bank Transit	: Savings 👻 : 000000104	Q			
Account Type Bank Transit Bank Account	: Savings V : 000000104 : 3456789	٩			
Account Type Bank Transit Bank Account Bank Name	: Savings V : 000000104 : 3456789 : JP Morgan	٩			
Account Type * Bank Transit Bank Account Bank Name State	: Savings V : 000000104 : 3456789 : JP Morgan : Wisconsin	٩			

- 6. Click the green save disk 🛅 in the upper right corner of the screen.
- 7. Pick the effective date of the change from the calendar <sup>111</sup>, typically TODAY'S DATE.
- 8. Click on the green magnifying glass to select the Change Reason.
- 9. Select the Change Reason "Bank Account Change."

Prime Deposit : 🗹

10. Click "OK."

							5 🖹 🔒
							WEPPM_WAUK
Dire	ect Deposit						
Steps :	<ol> <li>Please click on the plus sign to add in y which you want deposits to go into. Enter the account for the remainder last.</li> <li>Then check the Play Remaining check box want the remainder your pay to go to.</li> <li>Click the Save button in the upper right h pay period you would like the change to it.</li> </ol>	Date Sensitive Cho If this change is to click 'OK'. • Effective as o Change Reason	inge take effect on a spec : 04-02-2019 : BANK INFO CHANC	fic date, enter the	Date and Reas	on then	
	screen by the Wednesday prior to the pay	If this is a correctio	n only, leave the date an error, click 'CANCE	and reason as is c L'	and click 'OK'		
PAYMEN	T METHOD						
Current	IE BANKING INFORMA		a				
03-31-2019	• Priority	Method	Amount	Percentage	Pay Remaining	Pay to Order of	
03-30-2019	888 Pay	by Deposit	100	.00			
01-01-0001	889 Pa	y by Deposit 🔍 🗸			<b>⊻</b>		141
	Account Type :     Bank Transit :     Bank Account :     Bank Name :	Checking V D00000586 55555555 ANK OF AMERICA	Q				

### Sign Off Master Agreement

Select "Sign Off Master Agreement" on your menu. You must read and agree to the "Electronic Signature Agreement" to use an electronic signature in self service. Enter your name and check the "I agree" box to complete the agreement.

Electronic Signature Agreement
If you enter into the online account agreement, you will be entering into an electronic agreement, evidenced by an electronic record. You will also be consenting to the use of an electronic signature to manifest your agreement to the terms and conditions in the account agreement. This consent is limited to that particular transaction and does not apply to any future transactions entered into by you and Waukesha County. You must electronically acknowledge that you have read these disclosures.
If you should not wish to consent to the use of an electronic record, signatures or the electronic delivery of this disclosure, you should contact Waukesha County at 262-548-7044 to discuss and arrange another method for you to view and sign the account agreement from Waukesha County.
You may withdraw your consent at any time. Should you wish to withdraw your consent to the use of an electronic agreement you may do so by contacting Waukesha County at 262-548-7044.
By applying your digital signature below, you are consenting
<ol> <li>To the use of an electronic record</li> <li>To the use of an electronic signature on account opening documents</li> <li>To the electronic delivery of the above E-SIGN terms and conditions. If you do not so consent, email <u>hr@waukeshacounty.gov</u> and indicate in the email that you wish to sign paper copies of the account agreement and are not consenting to the E-Sign terms and conditions.</li> </ol>
in the second
FILL OUT YOUR FIRST NAME AND LAST NAME. THEN CHECK THE SIGN OFF TOGGLE.
First Name :
Last Name :
lagree: