

Rpt Type	Reporting Group (Dept.)	System	Plan	Report Period	Employer Name												Page	
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Member Information					Earnings Information													
					Earning Period	Status	Compensation		Member Contributions		Employer (DB) Contributions		Hours/ Days		Begin Date		End Date	
SSN: Name:																		
Gender: Birth: Type: Name Chg: Y or N																		
Address: Add Chg: Y or N																		
City: State: Zip:																		
Investment Program: Rate Option: Tax Status:																		
Choice/Transfer Date: Plan Choice:																		
SSN: Name:																		
Gender: Birth: Type: Name Chg: Y or N																		
Address: Add Chg: Y or N																		
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Investment Program: Rate Option: Tax Status:																		
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Investment Program: Rate Option: Tax Status:																		
Choice/Transfer Date: Plan Choice:																		
					Page Total													
					Plan Total													
					System Total													

1. Insert this form into the prelist where you need extra pages.
2. Change preprinted page numbers on the prelist as needed.
3. Enter page, plan and system totals on this page as needed.