Employee Name Social Security Number Wek Lozaion Preston Original Agreement Preston With respect to services rendered by the Employee hereafter, the Employer and the Employee hereby agree the compensation for such services shall be reduced by:		ct Provider	3(b) Product P	Name of Company - 403		rerbank Charter School ary Reduction Authoriz nuity Contract or 403(b	Sala
Original Agreement With respect to services rendered by the Employee hereafter, the Employer and the Employee hereby agree the compensation for such services shall be reduced by: Equal amounts of \$				Social Security Number		oloyee Name	Empl
With respect to services rendered by the Employee hereafter, the Employer and the Employee hereby agree th compensation for such services shall be reduced by: Equal amounts of \$per pay period beginning the, 20 pay period. Amounts equal to% of compensation per pay period beginning the, 20 pay period. Amounts equal to% of compensation per pay period beginning the, 20 pay period. Amounts equal to% of compensation per pay period beginning the, 20 pay period. Amounts equal to% of compensation per pay period to \$ The Sheltered Annuity or 403(b)(7) custodial account of Company listed above. Immediate the the amount of such reduction for the 403(b) Tax Sheltered Annuity or 403(b)(7) custodial account of Company listed above. Decrease from \$per pay period to \$beginning the20 pay period. Change to% of compensation per pay period beginning the20 pay period. Suspend-Name of CompanyEffective Date of Change or Suspension				Position		k Location	Work
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