

ACES Xavier Educational System
101 E Northland Avenue
Appleton, WI 54913
920-735-9380
Fax 920-735-1781

Tax Sheltered Annuity (TSA) 403(b)
PAYROLL ELECTRONIC WITHDRAWAL AUTHORIZATION

I hereby authorize ACES Xavier Educational System, Inc. to withdraw

\$_____ from my semi-monthly paycheck for deposit into the following

TSA fund company: _____.

This authority is to remain in full force and effect until either I revoke it by giving 10 days written notice to the company designated above, or upon termination of my employment with such employer.

Employee Signature

Date

Print Employee Name

Social Security #

Individual Account #

Employee Address, City Zip

Withdrawal Start Date

Return the completed form to Human Resources for processing.