2015 Year W-2 Changes

Group Term Life Insurance (GLI)

Due to DBAS on December 14, 2015

 # ____ District Name _____

Employee Name	Social Security Number	Amount To Be Moved	Group Term Life (GLI)
		$	$
		$	$
		$	$
		$	$
		$	$
		$	$
		$	$
		$	$
		$	$
		$	$
		$	$
		$	$
		$	$
		$	$
		$	$
		$	$
		$	$
		$	$
		$	$
		$	$
		$	$
		$	$
		$	$
		$	$
Total		$	$

Signature: _____ Name, Title: _____

Return to: Ann Redd-Oyedele, Ann_Redd@sccoe.org – DBAS Mail Code 252