

# COMPENSATION FOR PARTICIPATING EMPLOYEES

To: **Christian Brothers Employee Retirement Plan**  
 1205 Windham Parkway  
 Romeoville, IL 60446-1697

Location \_\_\_\_\_

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Employer Name \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Month of \_\_\_\_\_ 20 \_\_\_\_\_

No.	Social Security No.	Name of Employee (Alphabetical Order / Last Name)	Compensation (Total Earnings)
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
TOTAL			\$

6.5% of Total compensation

\$ \_\_\_\_\_

Signature \_\_\_\_\_

Position \_\_\_\_\_ Date \_\_\_\_\_ 20 \_\_\_\_\_