**个人缴存基数变更申请表**

辽 阳 市

住房公积金

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| 单位名称 | |  | | | 单位公积金账号 | | |  | | |
| 经办人姓名 | |  | | | 经办人移动/固定电话 | | |  | | |
| 序 号 | 个人公积金账号 | | 姓 名 | 证件号码 | 单位  比例 | 个人  比例 | 月缴  存基数 | 单位月  缴存额 | 个人月  缴存额 | 月缴  存额 |
| 1 |  | |  |  |  |  |  |  |  |  |
| 2 |  | |  |  |  |  |  |  |  |  |
| 3 |  | |  |  |  |  |  |  |  |  |
| 4 |  | |  |  |  |  |  |  |  |  |
| 5 |  | |  |  |  |  |  |  |  |  |
| 6 |  | |  |  |  |  |  |  |  |  |
| 7 |  | |  |  |  |  |  |  |  |  |
| 8 |  | |  |  |  |  |  |  |  |  |
| 9 |  | |  |  |  |  |  |  |  |  |
| 10 |  | |  |  |  |  |  |  |  |  |
| 11 |  | |  |  |  |  |  |  |  |  |
| 12 |  | |  |  |  |  |  |  |  |  |
| 13 |  | |  |  |  |  |  |  |  |  |
| 14 |  | |  |  |  |  |  |  |  |  |
| 15 |  | |  |  |  |  |  |  |  |  |
| 16 |  | |  |  |  |  |  |  |  |  |
| 17 |  | |  |  |  |  |  |  |  |  |
| 18 |  | |  |  |  |  |  |  |  |  |
| 19 |  | |  |  |  |  |  |  |  |  |
| 20 |  | |  |  |  |  |  |  |  |  |
| 经办人签字： | | | | | 单位公章 | | | | | |

年 月 日