1975 MADISON
1975 MADISON AVE
New York, NY 10035
Tel: (646) 386-9700
Fax: (212) 913-9531

APPLICATION FOR RENTAL

NOTICE: All adult applicants (18 years or older) must complete a separate application for rental.

BUILDING/APARTMENT:	RENT:	SECURITY DEPOSIT:	AGENT:
Apt # 215			
START DATE:	**LEASE LENGTH:**	**BROKER:**	**BROKER PHONE:**

APPLICANT INFORMATION

FIRST NAME	M.I.	LAST NAME	SUFFIX	SSN
Raenita	Lechelle	Spriggs		***-**-****

HOME PHONE	WORK PHONE	CELL PHONE	EMAIL
(619) 370-4644		( )	spriggsrae@gmail.com

STREET ADDRESS	CITY	STATE	ZIP

LANDLORD/MANAGING AGENT NAME	LANDLORD/MANAGING AGENT PHONE	LANDLORD/MANAGING AGENT FAX	LANDLORD/MANAGING AGENT EMAIL

MONTHLY RENT	DATE IN	DATE OUT	REASON FOR LEAVING
			We would like a bigger apartment.

BACKGROUND INFORMATION

HAVE YOU EVER BEEN CONVICTED OF A FELONY?
NO

DO YOU HAVE ANY CRIMINAL CHARGES PENDING, AWAITING DISPOSITION OR LOOMING IN ANY WAY?
NO

BANK INFORMATION

CHECKING ACCOUNT BANK NAME	ACCOUNT NUMBER	PHONE NUMBER
		( )
SAVINGS ACCOUNT BANK NAME	**ACCOUNT NUMBER**	**PHONE NUMBER**
		( )
OTHER ACCOUNT BANK NAME	**ACCOUNT NUMBER**	**PHONE NUMBER**
		( )

EMPLOYMENT & INCOME INFORMATION

OCCUPATION - PRESENT	EMPLOYER/COMPANY	SUPERVISOR NAME	SUPERVISOR PHONE	SUPERVISOR FAX	SUPERVISOR EMAIL	SALARY	START DATE
PhD Student	Columbia University	Robbie Parks			robbie.parks@columbia.edu	$48,000.00/Yr.	
OCCUPATION - ☐ ADD'L ☐ PREVIOUS	**EMPLOYER/COMPANY**	**SUPERVISOR NAME**	**SUPERVISOR PHONE**	**SUPERVISOR FAX**	**SUPERVISOR EMAIL**	**ANNUAL SALARY**	**START DATE**
			( )				

BUSINESS/CPA REFERENCES (if self-employed)

NAME	ADDRESS	PHONE	RELATIONSHIP
		( )	

I warrant that all statements above set forth are true. I further represent that I am not renting a room or an apartment under any other name, nor have I ever been dispossessed from any apartment, nor am I now being dispossessed. I hereby give my permission to conduct inquiries concerning my income, credit history, residence, banking relationships, character and reputation for the purpose of verifying information, provided by me, on any apartment rental/purchase application. If this application is approved, I further authorize Owner or its agent(s) to conduct further credit inquries. I understand there are no limitations or restrictions regarding what may be discussed or revealed. I am aware that a credit history, OFAC search, and landlord/tenant court record search will be done in conjunction with my application. I hereby hold On-Site Manager, Inc., Owner, and its agents free and harmless of any liability for providing written or verbal information and/or discussing the quality of my tenancy with current and former landlords property managers, supervisors, or employers. No representations or agreements by Salespersons, Brokers or others are to be binding on Owner, and/or any party connected with its business organization unless included in the written lease proposed to be executed. By submitting this application, I represent that Owner makes no guarantee regarding the status of this application or the availability of any apartment. If a lease is approved and executed, this completed application form becomes a part of that certain lease.

NEW YORK CITY TENANT FAIR CHANCE ACT

Pursuant to the laws of the federal government, New York State, and NYC Admin. Code § 20-807 et seq., we are required to provide you with the following disclosure:

1) The application information you provide will be used by this community's owner or designated agent (the "Owner") to obtain a tenant screening report on you, and the Owner may use this report to determine your suitability for housing.

2) If your application is denied or other adverse action is taken against you on the basis of information contained in the tenant screening report, the Owner must tell you that such action was taken and provide you with the contact information of the screening company that provided the tenant screening report.

3) You may obtain a free copy of the report and dispute inaccurate or incorrect information on the report directly with the screening company at: Attn: On-Site c/o RealPage, 2201 Lakeside Boulevard, Richardson, TX 75082; 1-877-222-0384; www.on-site.com/renter-relations/.

4) You are entitled to one free tenant screening report from each national consumer reporting agency annually, in addition to a credit report which can be obtained from www.annualcreditreport.com.

An electronic signature was received on June 19, 2026 by RAENITA / L / SPRIGGS.

Signed by Raenita Lechelle Spriggs
Fri Jun 19 2026 03:32:05 PM EDT
Key: 2E7AE8A2; IP Address: 10.33.14.4

Raenita Lechelle Spriggs *(Applicant)* *Date*

The following charge(s) will appear on your card statement as *"ClickPay"*

Application Fee for Raenita Lechelle Spriggs - Charge Details			
Name on Card	**Account Number**	**Reference Number**	**Authorized**
Raenita Spriggs	XXXXXXXXXXXX3822	16725843	$20.00
This card has been authorized for the amount above and will be charged when the application is processed.			

AUTHORIZATION TO RELEASE RECORDS

EMAIL TO: verifications@on-site.com

I authorize the below parties to verify any and all requested information and to provide written support as necessary to On-Site.com.

(PRINT Applicant Name) *(Applicant Signature)* *Date*

Please ensure that the below information is completed IN FULL. Inform your references that On-Site.com will be contacting them, and indicate the importance of a prompt response.

California Required Notices

This report does not guarantee the accuracy or truthfulness of the information as to the subject of the investigation, but only that it is accurately copied from public records, and information generated as a result of identity theft, including evidence of criminal activity, may be inaccurately associated with the consumer who is the subject of the report.

An investigative consumer reporting agency shall provide a consumer seeking to obtain a copy of a report or making a request to review a file, a written notice in simple, plain English and Spanish setting forth the terms and conditions of his or her right to receive all disclosures, as provided in CA Civil Code Section 1786.26.

This report was prepared using software provided by RP On-Site LLC, which can be contacted at: 2201 Lakeside Blvd., Richardson, TX 75082; 1-877-222-0384; or https://www.on-site.com/request-rental-report-or-submit-dispute/.

Avisos obligatorios en el estado de California

El presente informe no garantiza la exactitud ni la veracidad de la información con respecto al tema de investigación, sino únicamente que es una copia exacta de los registros públicos y es posible que la información generada como consecuencia del robo de identidad, incluidos los registros de antecedentes delictivos, se haya asociado por error con el consumidor objeto del presente informe.

Una agencia de investigación de verificación de crédito proporcionará al consumidor que desee obtener una copia de un informe o que solicite la revisión de un archivo un aviso por escrito en inglés y español, escrito en un lenguaje simple y claro, que establezca los términos y condiciones de su derecho a recibir todas las divulgaciones conforme a la Sección 1786.26 del Código Civil de California.

Este informe se preparo con el software proporcionado pro RP On-Site LLC, que puede contractarse en: 2201 Lakeside Blvd., Richardson, TX 75082; 1-877-222-0384; or https://www.on-site.com/request-rental-report-or-submit-dispute/.

Rental Report for Raenita Lechelle Spriggs

The property's screening criteria result	
8.9 / 10 **APPROVE**	This application meets your requirements based on your Property's Screening Criteria. On-Site makes no independent assessment of an applicant's qualifications.

Score for Raenita Lechelle Spriggs: 9.4 / 10		
	Importance	**Result**
Total monthly income to rent ratio exceeds 3.0	Extremely	
Gross monthly income after rent and estimated debt exceeds 25.0% of the monthly income	Extremely	
Maximum percentage of past due negative accounts is less than 25.0%	Very	
Unpaid collections and grossly delinquent past due balances do not exceed $50.00	Very	
May have been through a bankruptcy	Extremely	

Credit Quick Summary		
Custom scoring for this report:		
Medical collections not considered Do not consider mortgages in default.	Student loans not considered	Do not consider foreclosures.
Total monthly income (reported by Applicant)	$4,006.67	
Total combined monthly income to rent ratio	4.85 (based on rent of $4,150.00)	
Estimated monthly debt and rent payments	$2,377.00 (59% of monthly income)	
Total number of accounts	3	
Accounts with no late payments	3 (0 unpaid past due)	
Accounts paid 30-59 days past due	0 (0 unpaid past due)	
Accounts paid 60-89 days past due	0 (0 unpaid past due)	
Accounts paid more than 90 days past due	0 (0 unpaid past due)	
Total outstanding balance	$9,521.00 ($0.00 past due)	
Outstanding revolving debt	$436.00 (1% of limit) ($0.00 past due)	
Outstanding loan balance	$9,085.00 ($0.00 past due)	
Bankruptcies, foreclosures, and legal items	0	
Collection total balance (includes past due)	$0.00	

Identity	From Application	From Equifax
Name:	Raenita Lechelle Spriggs	RAENITA L. SPRIGGS
SSN:	***-**-****	***-**-****
Birth Date:	10/**/1995	10/**/1995

Addresses	From Application	From Equifax
	2035 5th Avenue Apt 16M New York, NY 10035 - US	2035 5TH AVE. 16M NEW YORK, NY 10035 (Applicant) Reported 6/2026 6966 PARKSIDE AVE. SAN DIEGO, CA 92139 (Applicant) Reported 6/2026 60 HAVEN AVE. RS4390 NEW YORK, NY 10032 (Applicant) Reported 5/2026 2630 S CORNING ST.. LOS ANGELES, CA 90034 (Applicant) Reported 12/2022 430 SEARS AVE. SAN DIEGO, CA 92114 (Applicant) Reported 6/2021

Employment	From Application	From Equifax
Applicant:	PhD Student Columbia University $48,080.00/Yr. Total monthly Income: $4,006.67	

Restricted Person Search

Requested For	Requested	Returned
Raenita Lechelle Spriggs	6/20/2026	6/20/2026

Results
No Records Found

Risk Models

From Equifax

Risk Model Name	Score	Score Factors
Credit Score (Applicant)	776	Lack of sufficient credit history on bankcard or revolving accounts Lack of sufficient relevant first mortgage account information The balance amount paid down on your open student loan accounts is too low You have either very few loans or too many loans with recent delinquencies

Description
This credit score is a widely used risk model that uses credit report data to predict the likelihood of default. The credit score range is between 300 and 850 (the higher the score, the less risky the consumer).

Credit Accounts

From Equifax

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
WYNDHAM RESORT DEVEL (Applicant)	1/2020	4/2026					$9,085.00
	Monthly Payment	**High Credit**	**Type**	**Comments**			
	$282.00	$15,578.00	INSTALLMENT	VARIABLE/ADJUSTABLE RATE Rate/Status 1: Pays account as agreed			

Payment History

0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5/ 26	3/ 26	1/ 26	11/ 25	9/ 25	7/ 25	5/ 25	3/ 25	1/ 25	11/ 24	9/ 24	7/ 24												

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
NAVY FEDERAL CREDIT (Applicant)	9/2024	5/2026					$436.00
	Monthly Payment	**High Credit**	**Type**	**Comments**			
	$20.00	$3,067.00	REVOLVING	Rate/Status 1: Pays account as agreed			

Payment History

0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6/ 26	4/ 26	2/ 26	12/ 25	10/ 25	8/ 25	6/ 25	4/ 25	2/ 25	12/ 24	10/ 24													

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
WYNDHAM RESORT DEVEL (Applicant)	1/2018	11/2018					$0.00
	Monthly Payment	**High Credit**	**Type**	**Comments**			
		$13,454.00	INSTALLMENT	ACCOUNT CLOSED BY CREDIT GRANTOR Rate/Status 1: Pays account as agreed			

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
DEPT OF ED (Applicant) Tradeline filtered due to setting: Student loans not considered	9/2018	4/2026				$0.00	$11,231.00
	Monthly Payment	**High Credit**	**Type**	**Comments**			
		$9,833.00	INSTALLMENT	STUDENT LOAN - PAYMENT DEFERRED Rate/Status 1: Pays account as agreed			

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
DEPT OF ED (Applicant) Tradeline filtered due to setting: Student loans not considered	9/2018	4/2026				$0.00	$6,632.00
	Monthly Payment	**High Credit**	**Type**	**Comments**			
		$9,447.00	INSTALLMENT	STUDENT LOAN - PAYMENT DEFERRED Rate/Status 1: Pays account as agreed			

Rental Report for Raenita Lechelle Spriggs, 6/20/2026 for 215 at 1975 MADISON

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
DEPT OF ED (Applicant) Tradeline filtered due to setting: Student loans not considered	8/2013	4/2026				$0.00	$3,482.00
	Monthly Payment	**High Credit**	**Type**	**Comments**			
		$3,500.00	INSTALLME	STUDENT LOAN - PAYMENT DEFERRED Rate/Status 1: Pays account as agreed			

Account Name	Opened	Last Active	30-59	60-89	90+	Past Due	Balance
DEPT OF ED (Applicant) Tradeline filtered due to setting: Student loans not considered	8/2014	4/2026				$0.00	$3,058.00
	Monthly Payment	**High Credit**	**Type**	**Comments**			
		$3,150.00	INSTALLME	STUDENT LOAN - PAYMENT DEFERRED Rate/Status 1: Pays account as agreed			

Para información en español, visite www.consumerfinance.gov/learnmore o escribe a la Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.

A Summary of Your Rights Under the Fair Credit Reporting Act

The federal Fair Credit Reporting Act (FCRA) promotes the accuracy, fairness, and privacy of information in the files of consumer reporting agencies. There are many types of consumer reporting agencies, including credit bureaus and specialty agencies (such as agencies that sell information about check writing histories, medical records, and rental history records). Here is a summary of your major rights under FCRA. **For more information, including information about additional rights, go to www.consumerfinance.gov/learnmore or write to: Consumer Financial Protection Bureau, 1700 G Street N.W., Washington, DC 20552.**

- **You must be told if information in your file has been used against you.** Anyone who uses a credit report or another type of consumer report to deny your application for credit, insurance, or employment – or to take another adverse action against you – must tell you, and must give you the name, address, and phone number of the agency that provided the information.
- **You have the right to know what is in your file.** You may request and obtain all the information about you in the files of a consumer reporting agency (your "file disclosure"). You will be required to provide proper identification, which may include your Social Security number. In many cases, the disclosure will be free. You are entitled to a free file disclosure if:
  - a person has taken adverse action against you because of information in your credit report;
  - you are the victim of identity theft and place a fraud alert in your file;
  - your file contains inaccurate information as a result of fraud;
  - you are on public assistance;
  - you are unemployed but expect to apply for employment within 60 days.

In addition, all consumers are entitled to one free disclosure every 12 months upon request from each nationwide credit bureau and from nationwide specialty consumer reporting agencies. See www.consumerfinance.gov/learnmore for additional information.

- **You have the right to ask for a credit score.** Credit scores are numerical summaries of your credit-worthiness based on information from credit bureaus. You may request a credit score from consumer reporting agencies that create scores or distribute scores used in residential real property loans, but you will have to pay for it. In some mortgage transactions, you will receive credit score information for free from the mortgage lender.
- **You have the right to dispute incomplete or inaccurate information.** If you identify information in your file that is incomplete or inaccurate, and report it to the consumer reporting agency, the agency must investigate unless your dispute is frivolous. See www.consumerfinance.gov/learnmore for an explanation of dispute procedures.
- **Consumer reporting agencies must correct or delete inaccurate, incomplete, or unverifiable information.** Inaccurate, incomplete, or unverifiable information must be removed or corrected, usually within 30 days. However, a consumer reporting agency may continue to report information it has verified as accurate.
- **Consumer reporting agencies may not report outdated negative information.** In most cases, a consumer reporting agency may not report negative information that is more than seven years old, or bankruptcies that are more than 10 years old.
- **Access to your file is limited.** A consumer reporting agency may provide information about you only to people with a valid need – usually to consider an application with a creditor, insurer, employer, landlord, or other business. The FCRA specifies those with a valid need for access.
- **You must give your consent for reports to be provided to employers.** A consumer reporting agency may not give out information about you to your employer, or a potential employer, without your written consent given to the employer. Written consent generally is not required in the trucking industry. For more information, go to www.consumerfinance.gov/learnmore
- **You may limit "prescreened" offers of credit and insurance you get based on information in your credit report.** Unsolicited "prescreened" offers for credit and insurance must include a toll-free phone number you can call if you choose to remove your name and address form the lists these offers are based on. You may opt out with the nationwide credit bureaus at 1-888-5-OPTOUT (1-888-567-8688).
- The following FCRA right applies with respect to nationwide consumer reporting agencies:

  CONSUMERS HAVE THE RIGHT TO OBTAIN A SECURITY FREEZE

  You have a right to place a "security freeze" on your credit report, which will prohibit a consumer reporting agency from releasing information in your credit report without your express authorization. The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent. However, you should be aware that using a security freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely approval of any subsequent request or application you make regarding a new loan, credit, mortgage, or any other account involving the extension of credit.

  As an alternative to a security freeze, you have the right to place an initial or extended fraud alert on your credit file at no cost. An initial fraud alert is a 1-year alert that is placed on a consumer's credit file. Upon seeing a fraud alert display on a consumer's credit file, a business is required to take steps to verify the consumer's identity before extending new credit. If you are a victim of identity theft, you are entitled to an extended fraud alert, which is a fraud alert lasting 7 years.

  A security freeze does not apply to a person or entity, or its affiliates, or collection agencies acting on behalf of the person or entity, with which you have an existing account that requests information in your credit report for the purposes of reviewing or collecting the account. Reviewing the account includes activities related to account maintenance, monitoring, credit line increases, and account upgrades and enhancements.

- **You may seek damages from violators.** If a consumer reporting agency, or, in some cases, a user of consumer reports or a furnisher of information to a consumer reporting agency violates the FCRA, you may be able to sue in state or federal court.
- **Identity theft victims and active duty military personnel have additional rights.** For more information, visit www.consumerfinance.gov/learnmore.

States may enforce the FCRA, and many states have their own consumer reporting laws. In some cases, you may have more rights under state law. For more information, contact your state or local consumer protection agency or your state Attorney General. For information about your federal rights, contact:

TYPE OF BUSINESS:	CONTACT:
1.a. Banks, savings associations, and credit unions with total assets of over $10 billion and their affiliates b. Such affiliates that are not banks, savings associations, or credit unions also should list, in addition to the CFPB:	a. Consumer Financial Protection Bureau 1700 G Street, N.W. Washington, DC 20552 b. Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue, N.W. Washington, DC 20580 (877) 382-4357
2. To the extent not included in item 1 above: a. National banks, federal savings associations, and federal branches and federal agencies of foreign banks b. State member banks, branches and agencies of foreign banks (other than federal branches, federal agencies, and Insured State Branches of Foreign Banks), commercial lending companies owned or controlled by foreign banks, and organizations operating under section 25 or 25A of the Federal Reserve Act. c. Nonmember Insured Banks, Insured State Branches of Foreign Banks, and insured state savings associations d. Federal Credit Unions	a. Office of the Comptroller of the Currency Customer Assistance Group 1301 McKinney Street, Suite 3450 Houston, TX 77010-9050 b. Federal Reserve Consumer Help Center P.O. Box 1200 Minneapolis, MN 55480 c. FDIC Consumer Response Center 1100 Walnut Street, Box #11 Kansas City, MO 64106 d. National Credit Union Administration Office of Consumer Financial Protection (OCFP) Division of Consumer Compliance Policy and Outreach 1775 Duke Street Alexandria, VA 22314
3. Air carriers	Asst. General Counsel for Aviation Enforcement & Proceedings Aviation Consumer Protection Division Department of Transportation 1200 New Jersey Avenue, S.E. Washington, DC 20590
4. Creditors Subject to the Surface Transportation Board	Office of Proceedings, Surface Transportation Board Department of Transportation 395 E Street, S.W. Washington, DC 20423
5. Creditors Subject to the Packers and Stockyards Act, 1921	Nearest Packers and Stockyards Administration area supervisor
6. Small Business Investment Companies	Associate Deputy Administrator for Capital Access United States Small Business Administration 409 Third Street, S.W., Suite 8200 Washington, DC 20416
7. Brokers and Dealers	Securities and Exchange Commission 100 F Street, N.E. Washington, DC 20549
8. Federal Land Banks, Federal Land Bank Associations, Federal Intermediate Credit Banks, and Production Credit Associations	Farm Credit Administration 1501 Farm Credit Drive McLean, VA 22102-5090
9. Retailers, Finance Companies, and All Other Creditors Not Listed Above	Federal Trade Commission Consumer Response Center 600 Pennsylvania Avenue, N.W. Washington, DC 20580 (877) 382-4357

A Summary of Your Additional Rights in New York

You have a right to place a "security freeze" on your credit report, which will prohibit a consumer credit reporting agency from releasing information in your credit report without your express authorization. A security freeze must be requested in writing by certified or overnight mail. The security freeze is designed to prevent credit, loans, and services from being approved in your name without your consent.

To place a security freeze on your credit report, you must contact each of these credit reporting agencies:

Equifax Security Freeze
P.O. Box 105788
Atlanta, GA 30348
(800) 685-1111
https://www.freeze.equifax.com

Experian Security Freeze
P.O. Box 9554
Allen, TX 75013
(888) 397-3742
https://www.experian.com/freeze/center.html

TransUnion LLC
P.O. Box 2000
Chester, PA 19022-2000
(888) 909-8872
www.transunion.com/personal-credit/credit-disputes/credit-freezes.page

However, you should be aware that using a security freeze to take control over who gets access to the personal and financial information in your credit report may delay, interfere with, or prohibit the timely approval of any subsequent request or application you make regarding a new loan, credit mortgage, government services or payments, insurance, rental housing, employment, investment, license, cellular phone, utilities, digital signature, Internet credit card transaction, or other services, including an extension of credit at point of sale. When you place a security freeze on your credit report, you will be provided a personal identification number or password to use if you choose to remove the freeze on your credit report or authorize the release of your credit report to a specific party or for a period of time after the freeze is in place. To provide that authorization you must contact the consumer credit reporting agency and provide all of the following:
1. The personal identification number or password;
2. Proper identification to verify your identity;
3. The proper information regarding the party or parties who are to receive the credit report or the period of time for which the report shall be available to users of the credit report; and
4. Payment of any applicable fee.

A consumer reporting agency must authorize the release of your credit report no later than three business days after receiving the above information.

A security freeze does not apply to circumstances in which you have an existing account relationship and a copy of your report is requested by your existing creditor or its agents or affiliates for certain types of account review, collection, fraud control or similar activities.

If you are actively seeking credit, you should understand that the procedures involved in lifting a security freeze may slow your application for credit. You should plan ahead and lift a freeze, either completely if you are shopping around, or specifically for a certain creditor, before applying for new credit.

Additional rights under your state's law, which are also in the federal Fair Credit Reporting Act, are explained in the enclosed Summary of Your Rights under the Fair Credit Reporting Act.


California USA DRIVER LICENSE
DL F5359188
CLASS C
EXP 10/27/2028
END NONE
LN SPRIGGS
FN RAENITA LECHELLE
6966 PARKSIDE AVE
SAN DIEGO, CA 92139
DOB 10/27/1995
RSTR NONE
10271995
SEX F
HAIR BRN
EYES BRN
HGT 5'-07"
WGT 165 lb
ISS 06/30/2023
DD 06/30/202366919/CCFD/28

Ana Navas-Acien, MD, PhD, MPH
Leon Hess Professor and Chair
Department of Environmental Health Sciences
Mailman School of Public Health

COLUMBIA

May 24, 2025

Raenita Spriggs
r.spriggs@columbia.edu

Dear Raenita:

The Department of Environmental Health Sciences is pleased to communicate your appointment as a Graduate Research Assistant for Fall 2025 through Summer 2026. Details of your appointment follow:

Supervisor: Professor Robbie Parks

Appointment Dates: 12-month Academic Year 2025-26 (Effective Date: July 1, 2025; Expected End Date: June 30, 2026 or through the end of your work authorization, whichever is earlier.)

Compensation: You will receive a salary of $48,080 for the 12-month academic year including summer, paid semi-monthly. If you are beyond your years of guaranteed funding, the standard benefits provided to students in guaranteed years are extended to you during the period of this appointment. These include coverage of full-time tuition, medical insurance through the Columbia Student Health Insurance Plan, health fees, University Service and Support fees, a subsidy towards the Emblem Dental Insurance Plan should you opt to enroll, and, if applicable, the international fees. Please note that should you receive an outside award during the term of this appointment, your compensation and payment schedule will be adjusted accordingly. Additionally, your appointment as a student officer, and subsequently your compensation for the period noted above is contingent upon your satisfactory progress and continued matriculation in the program. The requirements for maintaining satisfactory progress toward the PhD degree are separate from this appointment and should be discussed with your academic advisor.

Hours Limitation: You are expected to be available during the entire period of your appointment, unless you make arrangements that are approved in advance by your supervisor. There may be some variation from week to week based on the tasks and responsibilities you will be given by your supervisor. Per University Policy, students on appointment may not work more than 20 hours per week total, inclusive of this appointment and any other positions you hold on campus or outside of campus for which you are compensated.

A PhD student appointed as a GRA spends significant time engaged in research activity. Such time includes both educational activity and work. These two components are often inextricably intermingled. Because a GRA's time engaged in research activity comprises both an educational and a work component, the overall time spent is expected to be significantly higher than the work component that is subject to hours limitations under various policies and regulations. Work toward your PhD/dissertation and class time are not included in the work that is part of the appointment.

Responsibilities: Tasks and responsibilities will be identified and assigned by your supervisor. Generally, these include: regularly meeting and coordinating with your supervisor, attending/completing mandatory trainings and/or orientations, assistance to your faculty supervisor/department/lab in the conduct of research, and developing and working on research projects analyzing and modeling infectious disease.

Assignment Changes: Although the faculty has planned carefully for the upcoming terms, contingencies sometimes arise, and it may be necessary to make adjustments in both faculty and student appointment assignments.

Your appointment is covered by a collective bargaining agreement between the University and the Student Workers of Columbia SWC-UAW. The agreement can be found at https://humanresources.columbia.edu/content/swc-uaw.

Please indicate your acceptance of this appointment upon receiving this letter.

Congratulations, and best wishes for a productive next year. If you have any questions about your appointment, please consult either Elias Zambrano at elias.zambrano@columbia.edu or me.

Sincerely,

DocuSigned by:
Ana Navas-Acien
FA8FD8F7A7E54EF...

Ana Navas-Acien, MD, PhD, MPH
Leon Hess Professor and Chair
Department of Environmental Health Sciences

Ana Navas-Acien, MD, PhD, MPH
Leon Hess Professor and Chair
Department of Environmental Health Sciences
Mailman School of Public Health

COLUMBIA

IMPORTANT COMPLIANCE INFORMATION

FORM I-9/EMPLOYMENT ELIGIBILITY VERIFICATION

Your employment is contingent upon verification of your identity and eligibility to work in the United States. Newly hired or rehired employees are required to complete a Form I-9 in compliance with the Immigration Reform and Control Act of 1986 within the first three (3) working days and present valid, original documentation. Section one (1) of the I-9 must be completed online no later than the first day of employment on the Columbia University I-9 and E-Verify page at https://humanresources.columbia.edu/I9-everify. Section two (2) must be completed in person using original and unexpired documents (electronic versions and photocopies are not allowed under the law). Instructions on how to schedule an appointment for completing section 2, either on campus or using the I-9 Anywhere service if you are working outside New York City, can be found on the University's I-9 and E-Verify website.

Compliance Information and training
Columbia University is committed to operating with integrity and in full compliance with all applicable laws, regulations, and policies. The University does not tolerate retaliation against individuals who report compliance concerns. There are a number of resources available at the University to individuals who have a concern about unethical, illegal, or suspicious behavior. We encourage you to visit the University's Compliance website: compliance.columbia.edu, to familiarize yourself with University policies.

Maintaining a positive work environment and promoting a workplace free from discrimination and harassment supports the academic and research mission of the University by ensuring all members of our community can contribute to their fullest potential. As a condition of employment, you will be required to complete The New York Anti-Sexual Harassment training upon hire and every year thereafter in accordance with New York State and City Law.

As a member of the National Collegiate Athletic Association (NCAA) and the Council of Ivy Group Presidents (Ivy League), the University requires all members of the community, in all matters related to the intercollegiate athletics program, to exhibit the highest professional standards and ethical behavior with regard to adherence to NCAA, Conference, University, and Department of Intercollegiate Athletics and Physical Education rules and regulations.

New York State HERO Act

In accordance with New York State's Hero Act, we are providing all new employees with a copy of the prevention plan that Columbia has adopted to protect against the transmission of any airborne infectious diseases in the workplace as designated by the NYS Commissioner of Health (it does not apply to the current covid-19 pandemic). The plan can be found here: https://research.columbia.edu/sites/default/files/content/EHS/COVID-19/HeroActPlan.pdf

NEW YORK CITY WORKERS' BILL OF RIGHTS

In accordance with New York City's Worker's Bill of Rights legislation, we are providing all new employees with a link to the rights and protections workers can expect: https://www.nyc.gov/site/dca/workers/workersrights/know-your-worker-rights.page. For more information about Columbia's policies, please see the Human Resources section of the University Policies site: https://universitypolicies.columbia.edu/content/human-resources-policies.

LACTATION POLICY
In compliance with applicable laws, we are providing all new employees with a copy of the university's lactation policy, which can be found here: https://universitypolicies.columbia.edu/content/lactation-policy

COLUMBIA UNIVERSITY MAILMAN SCHOOL OF PUBLIC HEALTH
722 West 168th Street – Suite 1105E, New York, NY 10032 Telephone: 212.342.4712
Email: an2737@cumc.columbia.edu

CHASE

JPMorgan Chase Bank, N.A.
P O Box 44959
Indianapolis, IN 46244 - 4959

May 07, 2026 through June 04, 2026
Account Number: **000000255015772**

CUSTOMER SERVICE INFORMATION

Web site:	**Chase.com**
Service Center:	**1-800-935-9935**
Para Espanol:	1-877-312-4273
International Calls:	1-713-262-1679

We accept operator relay calls

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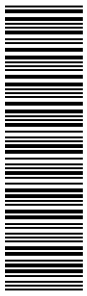
RAENITA L SPRIGGS
2035 5TH AVE APT 16M
NEW YORK NY 10035-1503



CHECKING SUMMARY

Chase College Checking

	AMOUNT
Beginning Balance	**$1,685.29**
Deposits and Additions	10,863.63
ATM & Debit Card Withdrawals	-130.00
Electronic Withdrawals	-11,531.03
Ending Balance	**$887.89**

You were not charged a Monthly Service Fee on your CHASE COLLEGE CHECKING account since you had ONE of the following during the monthly statement period:

- **$500.00+** in qualifying electronic deposits; or
  (Your total qualifying electronic deposits this period were $10,553.63. Some deposits may be listed on your previous statement)
- **$1,500.00+** average ending day balance in this account; or
- **Account was linked** to a qualifying checking account

For more information about the qualifying accounts, deposits, investments or transactions to waive the Monthly Service Fee on this account (if applicable), or if you have any questions, please refer to the Additional Banking Services and Fees at **chase.com/disclosures** or call us at the number listed on this statement.

TRANSACTION DETAIL

DATE	DESCRIPTION	AMOUNT	BALANCE
	Beginning Balance		**$1,685.29**
05/07	Columbia Columbia 723456073 Web ID: 1364199567	-1,652.00	33.29
05/08	Columbia Univer Payroll PPD ID: 135598093	**2,003.57**	2,036.86
05/11	05/11 Online Realtime Transfer To Navy Fed 8400 Transaction#: 29179906061 Reference#: 9179906061Rx	-1,950.00	86.86
05/12	Venmo Payment 1050251606891 Web ID: 3264681992	-10.00	76.86
05/13	Paypal Transfer PPD ID: Paypalsd11	**50.07**	126.93
05/13	05/13 Online Realtime Transfer To Navy Fed 8400 Transaction#: 29200895908 Reference#: 9200895908Rx	-50.07	76.86
05/13	Venmo Payment 1050276861143 Web ID: 3264681992	-35.00	41.86
05/22	Columbia Univer Payroll PPD ID: 135598093	**8,424.99**	8,466.85
05/22	05/22 Online Transfer 29320458892 To High Yield Savings ########9052 Transaction #: 29320458892	-5,500.00	2,966.85

TRANSACTION DETAIL *(continued)*

DATE	DESCRIPTION	AMOUNT	BALANCE
05/26	Irs Usataxpymt 240654611070890 Web ID: 3387702000	-2,323.96	642.89
05/27	Zelle Payment From Elizabeth Cald De LA Cruz 29375732577	**10.00**	652.89
05/28	ATM Withdrawal 05/28 3940 Broadway New York NY Card 9044	-130.00	522.89
05/29	Nfcu ACH P2P Raenita L Sprig Web ID: 9000000021	**75.00**	597.89
06/01	Zelle Payment From Kamari Purcell Wfct1284Qhk5	**299.00**	896.89
06/01	Zelle Payment From Kamari Purcell Wfct1284Qdjw	**1.00**	897.89
06/02	Venmo Payment 1050726523736 Web ID: 3264681992	-10.00	887.89
	Ending Balance		**$887.89**

IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC FUNDS TRANSFERS:

Call us at 1-866-564-2262 or write us at the address on the front of this statement immediately if you think your statement or receipt is incorrect or if you need more information about a transfer listed on the statement or receipt.

For personal accounts only: We must hear from you no later than 60 days after we sent you the FIRST statement on which the problem or error appeared. Be prepared to give us the following information:

- Your name and account number;
- A description of the error or the transaction you are unsure about, and why you think it is an error or want more information; and
- The amount of the suspected error.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days (or 20 business days for new accounts) to do this, we will provide provisional credit to your account for the amount you think is in error so that you will have use of the money during the time it takes us to complete our investigation.

For business accounts, our practice is to follow the procedures described above as detailed in your Deposit Account Agreement or other applicable agreements, but we are not legally required to do so. For example, we require you to notify us no later than 30 days after we sent you the first statement on which the error appeared. We may require you to provide us with a written statement that the disputed transaction was unauthorized. We are also not required to give provisional credit.

IN CASE OF ERRORS OR QUESTIONS ABOUT NON-ELECTRONIC FUNDS TRANSFERS: Contact us immediately if your statement is incorrect or if you need more information about any non-electronic funds transfers on this statement. For more details, see your Deposit Account Agreement or other applicable agreements that govern your account.

JPMorgan Chase Bank, N.A. Member FDIC

Marcus:
by Goldman Sachs®

Goldman Sachs Bank USA
PO Box 70379
Philadelphia, PA 19176-0379

Customer Service Information
Toll-free 1-855-730-7283
Marcus.com

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RAENITA SPRIGGS
6966 PARKSIDE AVE
SAN DIEGO CA 92139-3832

ONLINE SAVINGS ACCOUNT STATEMENT

See reverse for important information

Account Number	300072069052
Account Name	Online Savings

STATEMENT SUMMARY as of 05/31/2026

Beginning Balance	$50,039.19
Deposits and Other Credits	$5,649.53
Interest Paid this Period	$149.53
Withdrawals and Other Debits	$0.00
Ending Balance	**$55,688.72**

EARNINGS DETAILS

Statement Period	05/01/2026 to 05/31/2026
Days in Statement Period	31
Annual Percentage Yield Earned	3.50%
Total Earnings Paid This Year	$739.75

ACCOUNT ACTIVITY

Date	Description	Credits	Debits	Balance
05/01/2026	Beginning Balance			$50,039.19
05/26/2026	ACH Deposit JPMorgan Chase Ext Trnsfr	$5,500.00		$55,539.19
05/31/2026	Interest Paid	$149.53		$55,688.72
05/31/2026	**Ending Balance**			**$55,688.72**

Member FDIC

In Case of Errors or Questions About Your Electronic Transfers:

If you think your statement or receipt is wrong or if you need more information about a transfer on the statement or receipt, please telephone us at 1-855-730-7283 or write us at:

Goldman Sachs Bank USA
PO Box 70379
Philadelphia, PA 19176-0379

We must hear from you no later than sixty (60) days after we sent you the **FIRST** statement on which the error or problem appears.

Give us the following information:

1. Tell us your name and account number
2. Describe the error or the transfer you are unsure about and explain as clearly as you can why you believe it to be an error or why you need more information
3. Tell us the dollar amount of the suspected error

If you tell us orally, we may require that you send us your complaint or question in writing within 10 business days.

We will determine whether an error occurred within 10 business days after we hear from you and will correct any error promptly. If we need more time, however, we may take up to 45 days to investigate your complaint or question. If we decide to do this, we will credit your account within 10 business days for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation. If we ask you to put your complaint or question in writing and we do not receive it within 10 business days, we may not credit your account.

For errors involving new accounts, point-of-sale, or foreign-initiated transactions, we may take up to 90 days to investigate your complaint or question. For new accounts, we may take up to 20 business days to credit your account for the amount you think is in error.

We will tell you the results within three business days after completing our investigation. If we decide that there was no error, we will send you a written explanation. You may ask for copies of the documents that we used in our investigation.

In Case of Errors or Questions About Your Non-Electronic Transactions:

Contact us immediately if your statement is incorrect or if you need more information about any non-electronic transactions (checks or deposits) on this statement. If any such error appears, you must notify us in writing no later than 30 days after the statement was made available to you. For more information, see the Deposit Account Agreement.

CHASE

JPMorgan Chase Bank, N.A.
P O Box 44959
Indianapolis, IN 46244 - 4959

April 07, 2026 through May 06, 2026
Account Number: **000000255015772**

CUSTOMER SERVICE INFORMATION

Web site:	**Chase.com**
Service Center:	**1-800-935-9935**
Para Espanol:	1-877-312-4273
International Calls:	1-713-262-1679

We accept operator relay calls

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RAENITA L SPRIGGS
6966 PARKSIDE AVE
SAN DIEGO CA 92139-3832

0131994020100000022

Please review our overdraft service options at the end of this statement

We've included an overview of our overdraft services and fees that are available for personal checking accounts at the end of this statement.

Please note, the following overdraft services are not available for certain accounts:

- Standard Overdraft Practice and Chase Debit Card Coverage[SM] are not available for Chase High School Checking[SM], Chase Secure Checking[SM] and Chase First Checking[SM].
- Overdraft Protection is not available for Chase Secure Checking[SM] and Chase First Checking[SM].

If you have questions, please visit **chase.com/overdraft** or call us at the number on this statement. We accept operator relay calls.

CHECKING SUMMARY

Chase College Checking

	AMOUNT
Beginning Balance	**$53.04**
Deposits and Additions	3,982.29
ATM & Debit Card Withdrawals	-80.00
Electronic Withdrawals	-2,270.04
Ending Balance	**$1,685.29**

You were not charged a Monthly Service Fee on your CHASE COLLEGE CHECKING account since you had ONE of the following during the monthly statement period:

- **$500.00+** in qualifying electronic deposits; or
  (Your total qualifying electronic deposits this period were $5,739.40. Some deposits may be listed on your previous statement)
- **$1,500.00+** average ending day balance in this account; or
- **Account was linked** to a qualifying checking account

For more information about the qualifying accounts, deposits, investments or transactions to waive the Monthly Service Fee on this account (if applicable), or if you have any questions, please refer to the Additional Banking Services and Fees at **chase.com/disclosures** or call us at the number listed on this statement.

TRANSACTION DETAIL

DATE	DESCRIPTION	AMOUNT	BALANCE
	Beginning Balance		**$53.04**
04/14	Columbia Univers Direct Pay PPD ID: 1455250162	**311.73**	364.77
04/14	Nfcu ACH P2P Raenita L Sprig Web ID: 9000000021	**100.00**	464.77
04/14	Venmo Payment 1049611570046 Web ID: 3264681992	-20.00	444.77
04/16	Columbia Univers Direct Pay PPD ID: 1455250162	**972.48**	1,417.25
04/17	04/17 Online Realtime Transfer To Navy Fed 8400 Transaction#: 28858599101 Reference#: 9858599101Rx	-1,000.00	417.25
04/22	Columbia Univer Payroll PPD ID: 135598093	**2,003.58**	2,420.83
04/22	04/22 Online Realtime Transfer To Navy Fed 8400 Transaction#: 28922990230 Reference#: 9922990230Rx	-750.00	1,670.83
04/23	Venmo Payment 1049805566116 Web ID: 3264681992	-5.00	1,665.83
04/27	Remote Online Deposit 1	**96.46**	1,762.29
04/27	04/27 Online Realtime Transfer To Navy Fed 8400 Transaction#: 28987778130 Reference#: 9987778130Rx	-97.00	1,665.29
04/30	Columbia Univers Direct Pay PPD ID: 1455250162	**348.04**	2,013.33
04/30	Zelle Payment From Sharon Chew Woods 2Dz0K5Kgb988	**150.00**	2,163.33
04/30	04/30 Online Realtime Transfer To Navy Fed 8400 Transaction#: 29023593068 Reference#: 9023593068Rx	-348.04	1,815.29
05/04	Venmo Payment 1050049685734 Web ID: 3264681992	-50.00	1,765.29
05/05	ATM Withdrawal 05/05 3940 Broadway New York NY Card 9044	-80.00	1,685.29
	Ending Balance		**$1,685.29**

IN CASE OF ERRORS OR QUESTIONS ABOUT YOUR ELECTRONIC FUNDS TRANSFERS:

Call us at 1-866-564-2262 or write us at the address on the front of this statement immediately if you think your statement or receipt is incorrect or if you need more information about a transfer listed on the statement or receipt.

For personal accounts only: We must hear from you no later than 60 days after we sent you the FIRST statement on which the problem or error appeared. Be prepared to give us the following information:

- Your name and account number;
- A description of the error or the transaction you are unsure about, and why you think it is an error or want more information; and
- The amount of the suspected error.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days (or 20 business days for new accounts) to do this, we will provide provisional credit to your account for the amount you think is in error so that you will have use of the money during the time it takes us to complete our investigation.

For business accounts, our practice is to follow the procedures described above as detailed in your Deposit Account Agreement or other applicable agreements, but we are not legally required to do so. For example, we require you to notify us no later than 30 days after we sent you the first statement on which the error appeared. We may require you to provide us with a written statement that the disputed transaction was unauthorized. We are also not required to give provisional credit.

IN CASE OF ERRORS OR QUESTIONS ABOUT NON-ELECTRONIC FUNDS TRANSFERS: Contact us immediately if your statement is incorrect or if you need more information about any non-electronic funds transfers on this statement. For more details, see your Deposit Account Agreement or other applicable agreements that govern your account.

JPMorgan Chase Bank, N.A. Member FDIC

Overdraft and Overdraft Fee Information for Your Chase Checking Account

What You Need to Know About Overdrafts and Overdraft Fees

An overdraft occurs when you do not have enough money in your account to cover a transaction, but we pay it anyway. Whether your account has enough money to cover a transaction is determined during our nightly processing. During our nightly processing, we take your previous end of day's balance and post credits. If there are any deposits not yet available for use or holds (such as a garnishment), these will reduce the account balance used to pay your transactions. Then we subtract any debit transactions presented during our nightly processing. The available balance shown to you during the day may not be the same amount used to pay your transactions as some transactions may not be displayed to you before nightly processing.

We pay overdrafts at our discretion, which means we do not guarantee that we will always authorize or pay any transactions presented for payment. If we do not authorize an overdraft, your transaction will be declined. If we do not pay an overdraft, your transaction will be returned. Additional information about overdrafts and your account features can be found in the *Deposit Account Agreement*.

We can cover your overdrafts in three different ways:

1. We have a Standard Overdraft Practice that comes with your account.
2. We offer Overdraft Protection through a link to a Chase savings account, which may be less expensive than our Standard Overdraft Practice. You can contact us to learn more.
3. We also offer Chase Debit Card Coverage℠, which allows you to choose how we treat your everyday debit card transactions (e.g. groceries, gasoline or dining out), in addition to our Standard Overdraft Practice.

This notice explains our Standard Overdraft Practice and Chase Debit Card Coverage.

- **What is the Standard Overdraft Practice that comes with my account?**
  We **do** authorize and pay overdrafts for the following types of transactions:
  - Checks and other transactions made using your checking account number
  - Recurring debit card transactions (e.g. movie subscriptions or gym memberships)

- **What is Chase Debit Card Coverage?**
  If you enroll in Chase Debit Card Coverage we **may** authorize and pay overdrafts for **everyday debit card transactions** (e.g. groceries, gasoline or dining out) in addition to our Standard Overdraft Practice.

- **What fees will I be charged if Chase pays my overdraft?**
  If we authorize and pay an overdraft, we'll charge you a $34 Overdraft Fee per transaction during our nightly processing beginning with the first transaction that overdraws your account balance by more than $50 (maximum of 3 fees per business day, up to $102).

  We won't charge you an Overdraft Fee in the following circumstances:
  - With Chase Overdraft Assist℠, we won't charge an Overdraft Fee if you're overdrawn by $50 or less at the end of the business day **OR** if you're overdrawn by more than $50 and you bring your account balance to overdrawn by $50 or less at the end of the next business day (you have until 11 p.m ET (8 p.m PT) to make a deposit or transfer). Chase Overdraft Assist does not require enrollment and comes with eligible Chase checking accounts.
  - We won't charge an Overdraft Fee for transactions that are $5 or less.
  - We won't charge an Overdraft Fee if your debit card transaction was authorized when there was a sufficient available balance in your account.
  - For Chase Sapphire℠ Checking and Chase Private Client Checking℠ accounts, there are no Overdraft Fees when item(s) are presented against an account with insufficient funds on the first four business days during the current and prior 12 statement periods. On a business day when we returned item(s), this counts toward the four business days when an Overdraft Fee will not be charged.

- **What if I want Chase to authorize and pay overdrafts on my everyday debit card transactions?**
  If you or a joint account owner want Chase to authorize overdrafts on your everyday debit card transactions, please make your Chase Debit Card Coverage selection. You can change your Chase Debit Card Coverage selection at any time by signing in to chase.com or Chase Mobile® to update your account settings, calling us at 1-800-935-9935 (or at 1-713-262-1679 if outside the U.S.), or visiting a Chase branch. We accept operator relay calls.

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Marcus:
by Goldman Sachs®

Goldman Sachs Bank USA
PO Box 70379
Philadelphia, PA 19176-0379

Customer Service Information
Toll-free 1-855-730-7283
Marcus.com

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RAENITA SPRIGGS
6966 PARKSIDE AVE
SAN DIEGO CA 92139-3832

ONLINE SAVINGS ACCOUNT STATEMENT

See reverse for important information

Account Number	300072069052
Account Name	Online Savings

STATEMENT SUMMARY as of 04/30/2026

Beginning Balance	$49,893.95
Deposits and Other Credits	$145.24
Interest Paid this Period	$145.24
Withdrawals and Other Debits	$0.00
Ending Balance	**$50,039.19**

EARNINGS DETAILS

Statement Period	04/01/2026 to 04/30/2026
Days in Statement Period	30
Annual Percentage Yield Earned	3.60%
Total Earnings Paid This Year	$590.22

ACCOUNT ACTIVITY

Date	Description	Credits	Debits	Balance
04/01/2026	Beginning Balance			$49,893.95
04/30/2026	Interest Paid	$145.24		$50,039.19
04/30/2026	**Ending Balance**			**$50,039.19**

Member FDIC

In Case of Errors or Questions About Your Electronic Transfers:

If you think your statement or receipt is wrong or if you need more information about a transfer on the statement or receipt, please telephone us at 1-855-730-7283 or write us at:

Goldman Sachs Bank USA
PO Box 70379
Philadelphia, PA 19176-0379

We must hear from you no later than sixty (60) days after we sent you the **FIRST** statement on which the error or problem appears.

Give us the following information:

1. Tell us your name and account number
2. Describe the error or the transfer you are unsure about and explain as clearly as you can why you believe it to be an error or why you need more information
3. Tell us the dollar amount of the suspected error

If you tell us orally, we may require that you send us your complaint or question in writing within 10 business days.

We will determine whether an error occurred within 10 business days after we hear from you and will correct any error promptly. If we need more time, however, we may take up to 45 days to investigate your complaint or question. If we decide to do this, we will credit your account within 10 business days for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation. If we ask you to put your complaint or question in writing and we do not receive it within 10 business days, we may not credit your account.

For errors involving new accounts, point-of-sale, or foreign-initiated transactions, we may take up to 90 days to investigate your complaint or question. For new accounts, we may take up to 20 business days to credit your account for the amount you think is in error.

We will tell you the results within three business days after completing our investigation. If we decide that there was no error, we will send you a written explanation. You may ask for copies of the documents that we used in our investigation.

In Case of Errors or Questions About Your Non-Electronic Transactions:

Contact us immediately if your statement is incorrect or if you need more information about any non-electronic transactions (checks or deposits) on this statement. If any such error appears, you must notify us in writing no later than 30 days after the statement was made available to you. For more information, see the Deposit Account Agreement.

OMB No. 1545-0029

d Control Number	1 Wages, tips, other compensation	2 Federal income tax withheld
10273135	51627.82	4487.53
b Employer identification number (EIN)	3 Social security wages	4 Social security tax withheld
13-5598093		
a Employee's social security number	5 Medicare wages and tips	6 Medicare tax withheld
606-86-6385		

c Employer's name, address and ZIP code

THE TRUSTEES OF COLUMBIA UNIVERSITY
615 WEST 131ST STREET, 3RD FLOOR PAYROLL
NEW YORK NY 10027

7 Social security tips	8 Allocated tips	9
10 Dependent care benefits	11 Nonqualified plans	12a Code — See instructions for box 12
12b Code	12c Code	12d Code

13 Statutory employee	Retirement plan	Third-party sick pay	14 Other
	X		NY PFL 192.54 NY SDI 31.20

e Employee's name, address and ZIP code

RAENITA SPRIGGS
#1008
154 HAVEN AVENUE
NEW YORK NY 10032

2025 Form W-2	15 State Employer's state I.D. no.	16 State wages, tips, etc.
	NY 1355980939	51627.82
	17 State income tax	18 Local wages, tips, etc.
	2473.08	51627.82
	19 Local income tax	20 Locality name
	1683.88	NEW YORK

Wage and Tax Statement
Copy C - For EMPLOYEE'S RECORDS (See Notice to Employee on back of Copy B.)
This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it.

Department of the Treasury – Internal Revenue Service

OMB No. 1545-0029

d Control Number	1 Wages, tips, other compensation	2 Federal income tax withheld
10273135	51627.82	4487.53
b Employer identification number (EIN)	3 Social security wages	4 Social security tax withheld
13-5598093		
a Employee's social security number	5 Medicare wages and tips	6 Medicare tax withheld
606-86-6385		

c Employer's name, address and ZIP code

THE TRUSTEES OF COLUMBIA UNIVERSITY
615 WEST 131ST STREET, 3RD FLOOR PAYROLL
NEW YORK NY 10027

7 Social security tips	8 Allocated tips	9
10 Dependent care benefits	11 Nonqualified plans	12a Code — See instructions for box 12
12b Code	12c Code	12d Code

13 Statutory employee	Retirement plan	Third-party sick pay	14 Other
	X		NY PFL 192.54 NY SDI 31.20

e Employee's name, address and ZIP code

RAENITA SPRIGGS
#1008
154 HAVEN AVENUE
NEW YORK NY 10032

2025 Form W-2

15 State Employer's state I.D. no. NY 1355980939 — 16 State wages, tips, etc. 51627.82
17 State income tax 2473.08 — 18 Local wages, tips, etc. 51627.82
19 Local income tax 1683.88 — 20 Locality name NEW YORK

Wage and Tax Statement
Copy B - To Be Filed With Employee's FEDERAL Tax Return.
This information is being furnished to the Internal Revenue Service.

Department of the Treasury – Internal Revenue Service

OMB No. 1545-0029

d Control Number	1 Wages, tips, other compensation	2 Federal income tax withheld
10273135	51627.82	4487.53
b Employer identification number (EIN)	3 Social security wages	4 Social security tax withheld
13-5598093		
a Employee's social security number	5 Medicare wages and tips	6 Medicare tax withheld
606-86-6385		

c Employer's name, address and ZIP code

THE TRUSTEES OF COLUMBIA UNIVERSITY
615 WEST 131ST STREET, 3RD FLOOR PAYROLL
NEW YORK NY 10027

7 Social security tips	8 Allocated tips	9
10 Dependent care benefits	11 Nonqualified plans	12a Code
12b Code	12c Code	12d Code

13 Statutory employee	Retirement plan	Third-party sick pay	14 Other
	X		NY PFL 192.54 NY SDI 31.20

e Employee's name, address and ZIP code

RAENITA SPRIGGS
#1008
154 HAVEN AVENUE
NEW YORK NY 10032

2025 Form W-2

15 State Employer's state I.D. no. NY 1355980939 — 16 State wages, tips, etc. 51627.82
17 State income tax 2473.08 — 18 Local wages, tips, etc. 51627.82
19 Local income tax 1683.88 — 20 Locality name NEW YORK

Wage and Tax Statement
Copy 2 - To Be Filed With Employee's State, City, or Local Income Tax Return.

Department of the Treasury – Internal Revenue Service

Future developments. For the latest information about developments related to Form W-2, such as legislation enacted after it was published, go to *www.irs.gov/FormW2*.

Notice to Employee

Do you have to file? Refer to the Form 1040 instructions to determine if you are required to file a tax return. Even if you don't have to file a tax return, you may be eligible for a refund if box 2 shows an amount or if you are eligible for any credit.

Earned income tax credit (EITC). You may be able to take the EITC for 2025 if your adjusted gross income (AGI) is less than a certain amount. The amount of the credit is based on income and family size. Workers without children could qualify for a smaller credit. You and any qualifying children must have valid social security numbers (SSNs). You can't take the EITC if your investment income is more than the specified amount for 2025 or if income is earned for services provided while you were an inmate at a penal institution. For 2025 income limits and more information, visit www.irs.gov/EITC. See also Pub. 596. **Any EITC that is more than your tax liability is refunded to you, but only if you file a tax return.**

Employee's social security number (SSN). For your protection, this form may show only the last four digits of your SSN. However, your employer has reported your complete SSN to the IRS and the Social Security Administration (SSA).

Clergy and religious workers. If you aren't subject to social security and Medicare taxes, see Pub. 517.

Corrections. If your name, SSN, or address is incorrect, correct Copies B, C, and 2 and ask your employer to correct your employment record. Be sure to ask the employer to file Form W-2c, Corrected Wage and Tax Statement, with the SSA to correct any name, SSN, or money amount error reported to the SSA on Form W-2. Be sure to get your copies of Form W-2c from your employer for all corrections made so you may file them with your tax return. If your name and SSN are correct but aren't the same as shown on your social security card, you should ask for a new card that displays your correct name at any SSA office or by calling 800-772-1213. You may also visit the SSA website at www.SSA.gov.

Cost of employer-sponsored health coverage (if such cost is provided by the employer). The reporting in box 12, using code DD, of the cost of employer-sponsored health coverage is for your information only. **The amount reported with code DD is not taxable.**

Credit for excess taxes. If you had more than one employer in 2025 and more than $10,918.20 in social security and/or Tier 1 railroad retirement (RRTA) taxes were withheld, you may be able to claim a credit for the excess against your federal income tax. See the Form 1040 instructions. If you had more than one railroad employer and more than $6,409.20 in Tier 2 RRTA tax was withheld, you may be able to claim a refund on Form 843. See the Instructions for Form 843.

Instructions for Employee

Box 1. Enter this amount on the wages line of your tax return.
Box 2. Enter this amount on the federal income tax withheld line of your tax return.
Box 5. You may be required to report this amount on Form 8959. See the Form 1040 instructions to determine if you are required to complete Form 8959.
Box 6. This amount includes the 1.45% Medicare tax withheld on all Medicare wages and tips shown in box 5, as well as the 0.9% Additional Medicare Tax on any of those Medicare wages and tips above $200,000.
Box 8. This amount is **not** included in box 1, 3, 5, or 7. For information on how to report tips on your tax return, see the Form 1040 instructions.

You must file Form 4137 with your income tax return to report at least the allocated tip amount unless you can prove with adequate records that you received a smaller amount. If you have records that show the actual amount of tips you received, report that amount even if it is more or less than the allocated tips. Use Form 4137 to figure the social security and Medicare tax owed on tips you didn't report to your employer. Enter this amount on the wages line of your tax return. By filing Form 4137, your social security tips will be credited to your social security record (used to figure your benefits).
Box 10. This amount includes the total dependent care benefits that your employer paid to you or incurred on your behalf (including amounts from a section 125 (cafeteria) plan). Any amount over your employer's plan limit is also included in box 1. See Form 2441.
Box 11. This amount is (a) reported in box 1 if it is a distribution made to you from a nonqualified deferred compensation or nongovernmental section 457(b) plan, or (b) included in box 3 and/or box 5 if it is a prior year deferral under a nonqualified or section 457(b) plan that became taxable for social security and Medicare taxes this year because there is no longer a substantial risk of forfeiture of your right to the deferred amount. This box shouldn't be used if you had a deferral and a distribution in the same calendar year. If you made a deferral and received a distribution in the same calendar year, and you are or will be age 62 by the end of the calendar year, your employer should file Form SSA-131, Employer Report of Special Wage Payments, with the Social Security Administration and give you a copy.

Box 12. The following list explains the codes shown in box 12. You may need this information to complete your tax return. Elective deferrals (codes D, E, F, and S) and designated Roth contributions (codes AA, BB, and EE) under all plans are generally limited to a total of $23,500 (Generally, $16,500 for SIMPLE plans; $26,500 for section 403(b) plans if you qualify for the 15-year rule explained in Pub. 571). Deferrals under code G are limited to $23,500. Deferrals under code H are limited to $7,000.

Instructions for Employee (*Continued*)

Box 12 (*continued*)

However, if you were at least age 50 in 2025, your employer may have allowed an additional elective deferral or designated Roth contribution (catch-up contribution) to your plan. For information about the limits on these catch-up contributions, including the higher limit if you were age 60 through 63 as of December 31, 2025, see Pub. 525. Contact your plan administrator for more information. Amounts in excess of the overall elective deferral limit must be included in income. See the Form 1040 instructions.
Note: If a year follows code D through H, S, Y, AA, BB, or EE, you made a make-up pension contribution for a prior year(s) when you were in military service. To figure whether you made excess deferrals, consider these amounts for the year shown, not the current year. If no year is shown, the contributions are for the current year.
A—Uncollected social security or RRTA tax on tips. Include this tax on Form 1040 or 1040-SR. See the Form 1040 instructions.
B—Uncollected Medicare tax on tips. Include this tax on Form 1040 or 1040-SR. See the Form 1040 instructions.
C—Taxable cost of group-term life insurance over $50,000 (included in boxes 1, 3 (up to the social security wage base), and 5)
D—Elective deferrals to a section 401(k) cash or deferred arrangement. Also includes deferrals under a SIMPLE retirement account that is part of a section 401(k) arrangement.
E—Elective deferrals under a section 403(b) salary reduction agreement
F—Elective deferrals under a section 408(k)(6) salary reduction SEP (this includes elective deferrals made to a Roth SEP IRA)
G—Elective deferrals and employer contributions (including nonelective deferrals) to a section 457(b) deferred compensation plan
H—Elective deferrals to a section 501(c)(18)(D) tax-exempt organization plan. See the Form 1040 instructions for how to deduct.
J—Nontaxable sick pay (information only, not included in box 1, 3, or 5)
K—20% excise tax on excess golden parachute payments. See the Form 1040 instructions.
L—Substantiated employee business expense reimbursements (nontaxable)
M—Uncollected social security or RRTA tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.
N—Uncollected Medicare tax on taxable cost of group-term life insurance over $50,000 (former employees only). See the Form 1040 instructions.
P—Excludable moving expense reimbursements paid directly to a member of the U.S. Armed Forces (not included in box 1, 3, or 5)
Q—Nontaxable combat pay. See the Form 1040 instructions for details on reporting this amount.
R—Employer contributions to your Archer MSA. Report on Form 8853.

Instructions for Employee (*Continued*)

S—Employee salary reduction contributions under a section 408(p) SIMPLE plan (this includes salary reduction contributions made to a Roth SIMPLE IRA)
T—Adoption benefits (not included in box 1). Complete Form 8839 to figure any taxable and nontaxable amounts.
V—Income from exercise of nonstatutory stock option(s) (included in boxes 1, 3 (up to the social security wage base), and 5). See Pub. 525 for reporting requirements.
W—Employer contributions (including amounts the employee elected to contribute using a section 125 (cafeteria) plan) to your health savings account. Report on Form 8889.
Y—Deferrals under a section 409A nonqualified deferred compensation plan
Z—Income under a nonqualified deferred compensation plan that fails to satisfy section 409A. This amount is also included in box 1. It is subject to an additional 20% tax plus interest. See the Form 1040 instructions.
AA—Designated Roth contributions under a section 401(k) plan
BB—Designated Roth contributions under a section 403(b) plan
DD—Cost of employer-sponsored health coverage. **The amount reported with code DD is not taxable.**
EE—Designated Roth contributions under a governmental section 457(b) plan. This amount does not apply to contributions under a tax-exempt organization section 457(b) plan.
FF—Permitted benefits under a qualified small employer health reimbursement arrangement
GG—Income from qualified equity grants under section 83(i)
HH—Aggregate deferrals under section 83(i) elections as of the close of the calendar year
II—Medicaid waiver payments excluded from gross income under Notice 2014-7
Box 13. If the "Retirement plan" box is checked, special limits may apply to the amount of traditional IRA contributions you may deduct. See Pub. 590-A.
Box 14. Employers may use this box to report information such as state disability insurance taxes withheld, union dues, uniform payments, health insurance premiums deducted, nontaxable income, educational assistance payments, or a member of the clergy's parsonage allowance and utilities. Railroad employers use this box to report railroad retirement (RRTA) compensation, Tier 1 tax, Tier 2 tax, Medicare tax, and Additional Medicare Tax. Include tips reported by the employee to the employer in railroad retirement (RRTA) compensation.
Note: Keep **Copy C** of Form W-2 for at least 3 years after the due date for filing your income tax return. However, to help **protect your social security benefits**, keep Copy C until you begin receiving social security benefits, just in case there is a question about your work record and/or earnings in a particular year.