



Member Request for the Cost to Purchase Service and Salary for a Military Leave of Absence

PERA members may purchase military service credit/salary for the period of service in uniformed service if honorably discharged and return to public service with the same governmental subdivision.

Payment must be made within three times the length of the military leave period or within five years of the date of discharge of military service, whichever is less. This voluntary payment option ceases 30 days after terminating public service.

To PERA Member:

If you wish to receive an estimate of the cost to make this purchase, you must give this form to your employer to complete *after* you return from the leave. **You MUST attach a copy of form DD214 to this request.** Your request will not be processed if this form is incomplete or not accompanied by a DD214.

Information for Employer to Complete		
Member Name	PERA ID or Last Four Digits of SSN	E-Mail Address
Member Signature to Request Estimate and Date	If You Would Like a Benefit Estimate, Indicate a Tentative Retirement Date:	

To Public Employer:

PERA asks that you fully complete the section below to verify the recent leave of absence dates. From the beginning of the leave through the return to public employment, please report the monthly salary that the member **would have earned** if not for the military leave. After completing, sign and return this form to the PERA office. Incomplete forms will not be processed.

Information for Employer to Complete					
Dates of Military Leave of Absence		BEGIN MO-DAY-YR	RETURN MO-DAY-YR		
Monthly salary that the employee would have earned during his/her military leave of absence:					
	MONTH/YEAR	SALARY (Monthly)		MONTH/YEAR	SALARY (Monthly)
1.		\$	13		\$
2.		\$	14		\$
3.		\$	15		\$
4.		\$	16		\$
5.		\$	17		\$
6.		\$	18		\$
7.		\$	19		\$
8.		\$	20		\$
9.		\$	21		\$
10.		\$	22		\$
11.		\$	23		\$
12.		\$	24		\$
Employer Name		PERA Employer (Unit) Number		Employer Representative's Signature and Title	
Employer E-Mail Address			Phone Number		Date

11/13/2012 amc

This form must be signed by the employer to be valid.

Return the completed form to:

Public Employees Retirement Association (PERA)
60 Empire Drive, Suite 200, St. Paul, MN 55103-2088
Telephone Number: 651-296-7460; Toll Free 1-800-652-9026
Fax: (651) 297-2547