

**Oklahoma Police Pension and Retirement System**

1001 N.W. 63<sup>rd</sup> Street, Suite 305  
Oklahoma City, Oklahoma 73116-7335  
1 (405) 840-3555 / 1 (800) 347-6552  
www.opprs.ok.gov

**NOTICE OF RETURN FROM LEAVE OF ABSENCE FOR MILITARY SERVICE  
TO BE COMPLETED BY THE PARTICIPATING MUNICIPALITY**

**Section I: Participating Municipality Information – Please Type or Print Clearly**

Participating Municipality \_\_\_\_\_ Date \_\_\_\_\_  
Name of Person Completing Form \_\_\_\_\_  
Position/Title \_\_\_\_\_  
Telephone Number (\_\_\_\_\_) \_\_\_\_\_ Facsimile Number (\_\_\_\_\_) \_\_\_\_\_

**Section II. Member Information**

Member Name \_\_\_\_\_ SSN \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
City, State, Zip \_\_\_\_\_  
Home Telephone Number (\_\_\_\_\_) \_\_\_\_\_ Work Telephone Number (\_\_\_\_\_) \_\_\_\_\_

**Section III: Military Service Leave Information**

**A. Return Information (check one or both)**

- The Member is returning from Military Service Leave (attach a copy of discharge papers and/or DD Form 214)  The Member is returning from Military Service Leave with intermittent use of paid leave time (attach a copy of discharge papers and/or DD Form 214)

Date returned to work \_\_\_\_\_ Date resumed contributions \_\_\_\_\_

**B. Dates of Leave**

The Member was on military service leave during the following dates:

\_\_\_\_\_ From \_\_\_\_\_ to \_\_\_\_\_ (inclusive).

**Section IV: Attachments Needed**

The following checklist must be completed by the Participating Municipality prior to submission to the System:

- The Historical Payroll Record for Military Service Leave (Form 130) is attached.
- A copy of the Member's orders to military service is attached, if not previously submitted.
- A copy of the Member's military discharge papers and/or DD Form 214 is attached.

Authorized City Signature \_\_\_\_\_ Date \_\_\_\_\_

**Section V: To Be Completed by System Representative**

This Notice has been received and reviewed and will become a permanent record.

System Representative Signature \_\_\_\_\_ Date \_\_\_\_\_