

IRREVOCABLE PAYROLL REDUCTION AUTHORIZATION

Service Purchase

Member Name: _____ Social Security No. _____

School District: _____

I, _____, am an active member of the Teachers' Retirement System of Oklahoma ("System") employed by _____ ("Employer"). I am entitled under the provisions of OAC 10-5-1 et seq. to purchase service credit or re-establish withdrawn service through the deposit of additional contributions, and I desire to make those contributions through payroll reductions.

I understand that the Board of Trustees for the Teachers' Retirement System of Oklahoma ("Board of Trustees") has adopted a rule allowing me to direct my Employer to "pick-up" these contributions under the tax deferral provisions of the federal Internal Revenue Code Section 414(h)(2) and that tax deferral of my additional contributions due to the System requires this irrevocable payroll reduction authorization. I further understand that my Employer has agreed to participate in the "pick-up" of these additional contributions.

I hereby direct my Employer to make the following reductions from my salary per pay period for the purpose of purchasing service credit or re-establishing withdrawn service and to remit them to the System together with other employee contributions to the System:

\$ _____ per pay period beginning with the pay period immediately after the Employer receives this authorization form and continuing for _____ months.

With respect to this payroll reduction, I understand the following:

- This is an irrevocable payroll reduction authorization.
- The maximum duration of the authorization is sixty (60) months.
- After the execution of this irrevocable reduction authorization, I do not have the option of receiving the reduction amounts directly instead of having them paid by my Employer to the System.

- These contributions are being picked up by my Employer; and, as a result, although designated as employee contributions, they are being paid directly to the System in lieu of contributions by me.
- I may make more than one irrevocable, binding payroll reduction authorization so long as a subsequent reduction authorization does not amend this binding, irrevocable authorization.
- While this agreement is in effect, I understand that with respect to the service being purchased by the contributions designated herein, the Board of Trustees will only accept payment from my Employer and not directly from me.
- Nothing herein shall prevent me from paying any amount of additional contributions not covered by this irrevocable reduction authorization with after-tax dollars, provided that I must pay any such after-tax payments directly to the Teachers' Retirement System and not to my employer.
- If I terminate employment with my Employer or die prior to completion of these installment payments, this binding, irrevocable payroll reduction authorization shall expire. My right to finish the payment, or whether the Board will pro-rate credit, is governed by OAC 715:10-5-35.
- The payroll reduction authorization is not effective until signed by me and an authorized representative of my Employer. The pick-up is only applicable to contributions to the extent the compensation which is reduced for the contributions is limited to compensation earned for services after the effective date of the pick-up.

Signature of Member

Signature of School Official

Title: _____

Date: _____

Date: _____