

Oklahoma Police Pension and Retirement System

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Oklahoma City, Oklahoma 73116-7335
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www.opprs.ok.gov

**INSTALLMENT PAYROLL DEDUCTION FORM FOR PURCHASE OF CREDITED SERVICE
(FOR MILITARY SERVICE UNDER USERRA)**

Section I: Member Information – Please Type or Print Clearly

Member Name _____ SSN _____

Mailing Address _____

City, State, Zip _____

Home Telephone Number (____) _____ Work Telephone Number (____) _____

Section II: Authorization for Payroll Deduction

I hereby authorize my Participating Municipality as my employer to deduct the following amount for my purchase of credited service for purposes of benefit accrual. This amount will be deducted from each paycheck for the number of installments indicated below:

Amount \$ _____

Number of Installments _____

I understand payroll deductions will begin as soon as practicable following the date of this form.

Member Signature _____ Date _____

Section III: Acceptance by Current Municipality

We acknowledge and affirm that the applicant is an employee of the Participating Municipality indicated below. Payroll deductions will be made during the following payroll periods:

Effective for the pay period beginning _____, and ending _____.

Participating Municipality _____

Authorized City Signature _____ Date _____

Section IV: Acceptance by System

The Oklahoma Police Pension and Retirement System (“System”) acknowledges and affirms that the applicant requesting the purchase of credited service (for military service under USERRA) is currently a Member in the System and is authorized to purchase credited service (for military service under USERRA) through payroll deductions.

System Representative Signature _____ Date _____