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IMRF Form 6.33 (Rev. 06/09)

INSTRUCTIONS AND REQUIREMENTS ON REVERSE SIDE PLEASE PRINT OR TYPE

Member's First Name Jane	Middle Intial M.	Last Name Rowe	Social Security Number 321-00-0001
Member Mailing Address 123 Main Street		City, State, and ZIP Anywhere, IL 60000	Current Position Deputy City Manager
Current Employer Name City of Anywhere			Employer Number 09999

Certification by Member I certify that I was an employee of	City	City of Sterling				
		Name of	Local Government			
Colorado	from	July 1, 1998	to	July 1, 2003		
Name of State		Date		Date		
in the position(s) of Accounting	Manager					
such service having been covered und	er Colorado Muni	icipal Employees Fun	id			
-		Name of Public Employee Pension System				
whose address is3764 Aspen Ave	nue		Sterling	Colorado	80000	
-	Street		City	State	Zip Code	
and that I have irrevocably forfeited				led to benefits of ar		
and that I have irrevocably forfeited at therefrom. I understand that no service required payment to IMRF. August 18, 2009	credit will be estab	lished under the Illino	ois Municipal Retire	led to benefits of ar		
therefrom. I understand that no service required payment to IMRF.	e credit will be estab		ois Municipal Retire	led to benefits of ar ement Fund until I h	ave made the	
therefrom. I understand that no service required payment to IMRF. August 18, 2009 Date	e credit will be estab	lished under the Illino Member's Signature	ois Municipal Retire	led to benefits of arement Fund until I h	ave made the	
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therefrom. I understand that no service required payment to IMRF. August 18, 2009 Date	ry of Governing I	Member's Signature	City Council	led to benefits of arement Fund until I h	ave made the	

Date Clerk or Secretary Signature

Illinois Municipal Retirement Fund

Name of Governmental Unit the out-of-state governmental unit named herein from

months for the above named member).

August 1, 2009 Date

INSTRUCTIONS

REQUIREMENTS:

- 1. The member is actively participating in IMRF and has completed two years of IMRF contributing service.
- 2. The member was an employee of a local government in another state; and, as such, participated in a public employee pension system of that state.
- 3. The member has now irrevocably forfeited all rights to a benefit from that pension system.
- 4. The member completes and certifies the Certification by Member.
- 5. The governing body authorizes the granting of these service credits.
- 6. The clerk or secretary of the governing body completes and signs the Certification by Clerk or Secretary of Governing Body.
- 7. The member pays IMRF contributions and interest. The contributions are calculated by multiplying the average monthly earnings for the first 24 months of reported earnings with the employer authorizing the out-of-state service by 10 percent. This amount is then multiplied by the number of months of service that the member wishes to transfer to IMRF. Interest is calculated from the end of the qualifying two-year period of IMRF contributing service.

PAYMENT OF CONTRIBUTIONS AND INTEREST:

IMRF will mail the applicant a Past Service Payment Schedule which offers two payment plan options for establishing the out-of-state service. Option I is the Lump Sum Payment Plan and Option II is the Unit Payment Plan. The Lump Sum Payment Plan allows applicants to pay the total cost with a single payment and purchase all out-of-state service at once. The Unit Payment Plan allows applicants to purchase one or more months at a time. Applicants may pay as often as they like, buying back credit from the latest month to the earliest month of eligible service. However, they may not buy more months than indicated on the Past Service Payment Schedule.

A member may pay for out-of-state service with a conduit IRA established with contributions from a qualified pension plan as defined by Section 401(a) of the Internal Revenue Code. A conduit IRA is one that has no other contributions other than monies from a 401(a) pension plan and investment income earned on those monies.

EMPLOYER'S COST:

The governmental unit's contribution for out-of-state service is made through future contribution rates. Therefore, a separate payment is not required. The actuary will take the out-of-state service into account when annually determining the employer contribution rate. This is the rate shown on IMRF Form 3.10, "Monthly Deposit Report."