

AUTHORIZATION FOR AFTER-TAX PAYROLL DEDUCTION TO PURCHASE SERVICE CREDIT

VIRGINIA RETIREMENT SYSTEM
P.O. Box 2500
Richmond, Virginia 23218-2500
Toll Free 1-888-VARETIR (827-3847)
Fax 804/786-9718
www.varetire.org

1. Social Security Number
2. Daytime Phone Number ()

Complete this form to authorize an after-tax purchase of service credit through payroll deduction. After you and your employer have completed the form, submit the original document to VRS. Retain a copy for your records and forward a copy to your Payroll department.

If you do not complete this purchase before you terminate employment with your employer, you may purchase any of the remaining months in a lump sum before your termination date. If you change employers and wish to continue payroll deductions, you must complete a new Authorization for After-Tax Payroll Deduction to Purchase of Service Credit (VRS-26C) with your new employer.

PART A. MEMBER INFORMATION

3. Name (First) _____ (MI) _____ (Last) _____ (Jr./Sr.) _____
4. Address (Street) _____ (City) _____ (State) _____ (Zip+4) _____
5. Number of Eligible Months to be Purchased (Based on the Cost Letter) _____
6. Date to Begin Deduction _____/01/_____ (mm) (yyyy)

PART B. CERTIFICATION

I understand that VRS can only accept 5 percent of the employee's monthly creditable compensation and that VRS will charge the employer the additional dollars if less than 5 percent of the employee's creditable compensation is reported.	
Benefits Administrator Name (Please print) _____	Phone Number _____
Benefits Administrator Signature _____	Date _____
Member Signature _____	Date _____