Form 02-06 R012024

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Application for Purchase of Military Service (La. R.S. 11:153 and 38 U.S.C.A. §§ 4301-4333)

Member's First Name	Middle Name	Last Name	Today	's Date	Social Security Number
IMPORTANT: Complete the en	tire form. Follow the sp	pecific instructions for ea	ach section. All dates shou	ld be in MM	I/DD/YYYY format.
SECTION 1: MEMBER'S I	INFORMATION				
Member's Mailing Address		City		State	Zip Code
Daytime Area Code/Phone Num	nber Evening Area C	Code/Phone Number	Email Address		Member's Birth Date
SECTION 2: INSTRUCTION	ONS			_	
Check all that apply:	ive Military Duty	Active National Gua	rd 🔲 National Guard	l/Coast Gua	rd Reserve
USI	ERRA - Uniformed Serv	vices Employment and	Reemployment Rights A	ct of 1994 (a	ttach Form 2-10B)
To determine the cost to purchas costs for \$300, or <u>four</u> costs for \$3					
1 year	2 years	3 years			
Other amount (if pa	artial years are availabl	le)			
Full purchase amou	unt: 4 years regular mil	itary - 5 years for USER	RA		

Actuarial fees are non-refundable and may be paid by personal check, cashier's check, certified check, or money order made payable to LASERS and should accompany this application. There will be a \$15 charge for all checks returned due to insufficient funds.

You may purchase up to four years of service credit for active duty military service, provided you were honorably discharged. Credit for military service cannot be used to meet eligibility requirements for disability benefits or survivor benefits and shall only be used for purposes of acquiring eligibility for normal retirement benefits. In addition, such military service credit shall not be used to meet the minimum eligibility requirements of any regular retirement of twenty years or less.

Service credit may not be purchased for any military service for which you are drawing a military benefit based on age and service with the exception of the provisions of Chapter 1223 of Title 10 of the United States Code. This code states "a member shall be eligible to purchase credit for regular or non-regular service, provided that the service being purchased was rendered prior to the initial date of employment which made him eligible to participate in the applicable Louisiana state or statewide retirement system." This restriction shall not apply to members who are drawing a disability benefit based on 25 percent or less disability received as a result of military service.

This does not apply to military service which qualifies under the Military Service Relief Act or the Uniformed Services Employment and Reemployment Rights Act of 1994.

Please attach a copy of Form DD214 or discharge papers for active duty service or an official copy of retirement points awarded by the military branch for Reserve, National Guard, or Coast Guard Reserve Service.

Indicate which LASERS plan applies to you by checking the appropriate box below:	Social Security Number
Regular Member, hired prior to July 1, 2006	
Regular Member, hired between July 1, 2006 and December 31, 2010	
Regular Member, hired on or after January 1, 2011, and on or before June 30, 2015	
Regular Member, hired on or after July 1, 2015	
☐ Bridge Police Employee for the Crescent City Connection (DOTD), hired prior to January 1, 2011	
Correctional Officer, Security Personnel, or Probation & Parole Officer employed by the LA Department of Public hired prior to January 1, 2011	Safety & Corrections,
Peace Officer, hired prior to January 1, 2011	
Alcohol & Tobacco Control Agent employed by the Louisiana Department of Revenue, hired prior to January 1, 2	011
Wildlife Agent employed by the Enforcement Division of the LA Wildlife & Fisheries Commission, hired prior to	January 1, 2011
☐ Judge or Court Officer, pre January 1, 2011	
Law Clerk (Current) Law Clerk (Past)	
Udge elected after January 1, 2011, and on or before June 30, 2015	
☐ Judge elected after July 1, 2015	
Legislators, Clerk, or Sergeant-at-Arms of the House; President, Secretary, or Sergeant-at-Arms of the Senate; Governor; or State Treasurer, hired prior to January 1, 2011	vernor; Lieutenant
Hazardous Duty Services Employee (HAZ PLAN)	
SECTION 3: MEMBER SIGNATURE	
I have read and understand this application and certify, to the best of my knowledge, all information provided is understand that an incomplete application will be returned and that it will delay the process to purchase this serv	
I will hold Foster and Foster Actuaries and Consultants harmless for any calculations based upon erroneous data state Employees' Retirement System.	supplied by the Louisiana
Initial this box to have your invoice securely emailed to you. You will also receive a copy in the mail.	
Member's Signature Date	