



Service Credit Purchase Request

San Joaquin County Employees' Retirement Association

IMPORTANT: Fully complete and return this form to SJCERA at contactus@sjcera.org or **220 E. Channel Street, Stockton, CA 95202**. If an incomplete form is returned, a delay in services may occur. For more information, refer to the Service Credit Purchase Fact Sheet at www.sjcera.org. Please allow 4-6 weeks for calculations. The estimate is a preliminary estimate and subject to change.

SECTION 1: MEMBER INFORMATION

Full Name: _____ DOB: _____
SSN or Member ID: _____ Phone: _____
Address: _____
City: _____ State: _____ Zip: _____
Email: _____

SECTION 2: SERVICE CREDIT PURCHASE TYPE

- Medical Leave of Absence while a Member of SJCERA** (proof of Medical LOA for yourself must be submitted with this form)
- Previous County Service** (Temporary, Part-Time, Seasonal, Contract Time)
- Redeposit of Withdrawn SJCERA Contributions**
- Military/Merchant Marine Service that Interrupted SJCERA Membership** Proof of leave of absence, or Form DD214 or its equivalent must be submitted with this form.
- Prior Public Agency Service (PPAS)** PPAS time does not count toward meeting the minimum service credit requirement for retirement or death benefits. A letter from the former agency stating the dates and hours worked and that contributions were refunded to yourself must be submitted with this form. Requests to purchase prior military service, please attach Form DD214 and a letter from the Veteran's Office stating you are not entitled to a retirement for this period of time. If the letter is not provided, you will be prohibited from purchasing time.

Period of Time: From _____ to _____

Period of Time: From _____ to _____

SECTION 3: ACKNOWLEDGEMENT

I hereby certify to the best of my knowledge and belief, that I am not entitled to receive credit in any other public retirement system for the service credit purchase above.

Signature: _____ Date: _____