



348 W. Hospitality Lane, Third Floor, San Bernardino, CA 92415-0014

909-885-7980

SERVICE PURCHASE REQUEST

YOU MUST BE A CURRENT MEMBER OF SBCERA TO PURCHASE ADDITIONAL SERVICE CREDIT

MEMBER INFORMATION (Please print or type)

Social Security Number	Employee ID	<input type="checkbox"/> Active <input type="checkbox"/> Retired <input type="checkbox"/> Deferred	
Last Name	First Name	Middle Name	
Date of Entry	Daytime Telephone	Evening Telephone	
Address	City	State	Zip Code

Check and complete all sections that apply. Attach additional sheets if needed.

<input type="checkbox"/> Redeposit of Withdrawn Contributions (List all dates of prior service under SBCERA) From: _____ To: _____ Date of Withdrawal: _____ From: _____ To: _____ Date of Withdrawal: _____ From: _____ To: _____ Date of Withdrawal: _____
<input type="checkbox"/> Prior Public Agency Service (PPAS)* Dates of Service: From: _____ To: _____ Agency/County: _____ <small>* Federal Civil Service, Military Service, other '37 Act counties, State of California or PERS contract employer; other public employers in California</small>
<input type="checkbox"/> Past Ineligible Service* Department Name: _____ Dates of Service: From: _____ To: _____ <small>* Temporary, hourly, part-time (less than 20 hours weekly), CETA, or seasonal.</small>
<input type="checkbox"/> Authorized Leave* Department Name: _____ Type of Leave: _____ Dates of Leave: From: _____ To: _____ <small>* Sick leave without pay up to 1 year (12 consecutive months); military leave that is between periods of SBCERA covered employment; you must provide a DD214 form for military leave purchase requests.</small>
<input type="checkbox"/> Additional Retirement Credit (ARC)* <small>* You must be actively employed and have at least five years of service credit to qualify.</small>

Member Signature

Date

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| <p>TYPES OF SERVICE NOT ELIGIBLE TO PURCHASE OR REDEPOSIT</p> <ul style="list-style-type: none"> • Educational or Sabbatical Leaves • Out of State Service • Strike • Leave without Pay • Public Agency Service for which you will receive a benefit |
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