## **SAMPLE**

FOR PERS USE ONLY

SERVICE PERIOD

2007

0

MONTH 07

STATE OF CALIFORNIA PUBLIC EMPLOYEES RETIREMENT SYSTEM 400 Q STREET, P.O. BOX 1982, SACRAMENTO, CA 95812-1982

EMPLOYER NAME:

## **SUMMARY REPORT** MEMBER AND EMPLOYER CONTRIBUTIONS

EMPLOYER CODE:

1999



FOR INSTRUCTIONS ON COMPLETING THIS FORM, REFER TO THE MATERIAL ON THE SUMMARY REPORT FOUND IN THE PAYROLL REPORTING SECTION OF THE PROCEDURES MANUAL (PERS-ADM-DO-430)

CERTIFICATION

**TOWN OF ANYWHERE** 

SERVICE PERIOD TYP	PE CODES CODE		
MONTHLY	0		
SEMI-MONTHLY-1ST HALF	1		
SEMI-MONTHLY-2ND HALF	2		
BI-WEEKLY-1ST PAYROLL	3		
BI-WEEKLY-2ND PAYROLL	4		
BI-WEEKLY-3RD PAYROLL	5		
QUADRIWEEKLY-1ST PAYROLL	6		
QUADRIWEEKLY-2ND PAYROLL	7		

OFFICE CODE

I HEREBY CERTIFY THAT I A					SPECIAL			BEGINNING DATE		
NAMED EMPLOYER; AND TH		S SET FORTI	HON THIS FORM AND THE	SUPPORTING		PAYROLL		MONTH 07	DAY DAY	YEAR
SIGNATURE	D CORRECT.			DATE:		SUPPLEME	-NTAI	07	01 ENDING DATE	2007
OIOIW (TOTAL	John Doe			8/15/2007		PAYROLL		MONTH	DAY	YEAR
NAME AND TITLE (PRINT	r OR TYPE)			PHONE NO:		REPORTING FORM		07	31	2007
	John Doe	, Accou	ıntant	123-456-7890	(PERS-ACC-624) ATTACHED					
EMPLOYER CONTRIBUTIONS				4 DAUIN 100	VED CONTRIBUTIONS	MEMBER				
1. COVERAGE GRP.	COVERAGE GRP. 2. EMPLOYER RATE X 3. MEN		X 3. MEMBER E	BER EARNINGS = 4.		4. EMPLOYER CONTRIBUTIONS		7. NORMAL:		
70001 0.000%		\$1,000.00		\$0.00		\$70		\$70.00		
75001	75001 0.000%		\$100.00			\$0.00	8. TAX DEF		\$9.00	
0 0.000%		0%	\$0.00			\$0.00	9. ADDITIO		\$0.00	
0 0.00		0%		\$0.00	\$0.00		10. SUB-TOTAL (7+8+9):		\$79.00	
0	0 0.000%		\$0.00			\$0.00	11. SURVIV	OR BENEFIT	\$0.00	
0	0.000%		\$0.00			\$0.00	12. TOTAL	MEMBER		
0	0.000%		\$0.00			\$0.00	CONTR	IBUTIONS:	\$79.00	
0	0.000%			\$0.00		\$0.00				
0 0.000%		0%	\$0.00			\$0.00				
5. TOTAL MEMBER EARNINGS				1,100.00	6. TOTAL EMPLOYER CONTRIBUTIONS:					
13. TOTAL MEMBER AND EMPLOYER CONTRIBUTIONS: (ITEM 6 + ITEM 12)									\$79.00	
ADJUSTMENTS: 14.A SURPLUS ASSET: MISCELLANEOUS CATEGORY										
14.B SU			URPLUS ASSET: SAFETY CATEGORY							
ATTACH ADJUSTMENT NOTICES TO SUPPORT AMOUNT SHOW  14.C ACC-344/ACC-1520 NOTE: Do not enter in this space corrections of member earnings										
	_			an	d contributions	made on Payroll Listing. DATE PAID				
			ANCE PAYMENT/							
16. BALANCE DUE	MINUS ITEM 14 14B, 14C OR 15	4A,		IECK OR WARRANT PAYABLE TO THE IES' RETIREMENT SYSTEM					\$79.00	
	14B, 14C OR 1	9)		FOR PERS U	SE ONLY					
Control No. and Business Month				0% Change		Audited		e Amount	\$	
							17. Date Paid			
							18.			
								Document Nu	ımber	
PERS-AESD-626 (1/99)		WHIT	E AND GREEN CO	OPIES TO SYSTEM, RETA	AIN PINK F	OR YOUR FILES.	1			90 89095