								SAMPLE		
					ColDERS			FOR PERS USE ONLY		
STATE OF CALIFORNIA PUBLIC EMPLOYEES F 400 P STREET, P.O. BOX	SERVIC	E PERIOD TY	PE CODES							
SUMMARY REP	MONTHLY SEMI-MONTHLY	Y-1ST HALF	0							
MEMBER AND EMP	SEMI-MONTHLY BI-WEEKLY-1SI	Y-2ND HALF	2							
FOR INSTRU THE SUMM/ PROCEDUR	BI-WEEKLY-2NI BI-WEEKLY-3RI QUADRIWEEKL	BI-WEEKLY-2ND PAYROLL 4 BI-WEEKLY-3RD PAYROLL 5 QUADRIWEEKLY-1ST PAYROLL 6								
EMPLOYER CODE:	QUADRIWEEKL	QUADRIWEEKLY-2ND PAYROLL 7 OFFICE CODE			SERVICE PERIOD					
1999				MONTH	YEAR	TYPE				
I HEREBY CERTIFY THAT I A	C M THE DULY APPOINTED, QUAI	ERTIFICATION LIFIED, AND ACTING OFF	FICER OF THE HEREIN		SPECIAL PAYROLL		07	2005 BEGINNING DATE	0	
	AT THE DATA AS SET FORTH C	IN THIS FORM AND THE	SUPPORTING	-			MONTH	DAY	YEAR	
DOCUMENTS ARE TRUE AND CORRECT. SIGNATURE			DATE:	SUPPLEME		NTAL	07	01 ENDING DATE	2005	
John Doe			8/15/2005				MONTH	DAY	YEAR	
NAME AND TITLE (PRINT OR TYPE)			PHONE NO:		REPORTING	FORM	07	31	2005	
	John Doe, Accour	ntant	123-456-7890	(PERS-ACC-624)	ATTACHED	1				
1. COVERAGE GRP.	2. EMPLOYER RATE	X 3. MEMBER E	ARNINGS =	4. EMPLOYER CONTR	RIBUTIONS		CON	Member Itributions		
70001	0.000%	\$	1,000.00	\$0.00		7. NORMAL:		\$70.00		
75001	0.000%	\$100.00		\$0.00	\$0.00		DEFERRED: \$700			
0	0.000%	\$0.00		\$0.00	\$0.00		ITIONAL: \$0.00			
0	0.000%	\$0.00		\$0.00		10. SUB-TO		\$770.00		
0	0.000%	\$0.00		\$0.00		11. SURVIV	OR BENEFIT:	\$0.00		
0	0.000%	\$0.00		\$0.00			TOTAL MEMBER			
0	0.000%		\$0.00	\$0.00		CONTRI	BUTIONS:	\$770.00		
0	0.000%		\$0.00	\$0.00						
0	0.000%		\$0.00	\$0.00						
5. TOTAL MEMBER EARNINGS:			1,100.00	6. TOTAL EMPLOY	AL EMPLOYER CONTRIBUTIONS:			\$0.00		
13. TOTAL MEMBER AND EMPLOYER CONTRIBUTIONS: (ITEM 6 + ITEM 12)								\$770.00		
ADJUSTMEN	ITS: 14.A SU	RPLUS ASSET: I	MISCELLANEOUS CATE	GORY						
	14.B SU	RPLUS ASSET: S		TMENT NOTICES TO SUP						
	14.C AC	C-344/ACC-1520	NOTE:	Do not enter in this space corre ad contributions made on Payroll DATE PAID	ctions of member					
		NCE PAYMENT/								
16. BALANCE DUE	(ITEM 13 PLUS OR MINUS ITEM 14A, 14B, 14C OR 15)		IECK OR WARRANT PAYAB					\$770.00		
			FOR PERS U			T				
Control No. and Business Month 10			00% Change	Audited		Remittance	e Amount	\$		
						Date Paid				
						18. Previous D	I8. Previous Document Number			
						1 10110U3 L				