



Application For Purchase Of Service Credit Non-Reported Service

Employer to email, mail or fax completed form

This application will result in a mandatory purchase of service credit (NMAC 2.82.3.12)

MEMBER INFORMATION

Name (First, Middle, Last)		Last 4 digits of SSN XXX-XX-	Gender M F
Mailing address		Email address	
City	State	Zip	Phone (include area code)

Employee is currently an Active Member : Yes No

Non-Reported Service Information

Date of hire (mm/dd/yyyy)	Position held
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List all earnings by quarter for the fiscal year which the member should have earned service credit, but wages weren't reported. Ex: FY 2008 (July 2007 through June 2008)

Fiscal Yr >				
Jul - Sep				
Oct - Dec				
Jan - Mar				
Apr - Jun				
Total				
Fiscal Yr >				
Jul - Sep				
Oct - Dec				
Jan - Mar				
Apr - Jun				
Total				

EMPLOYER CERTIFICATION

Name of Public School/College/University
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I hereby certify that all data submitted by the employer in this application is true and correct and that the member was a regular employee during the periods and at the salaries stated.



Signature of Authorized Official Title Date (mm/dd/yyyy)