

AGENCY CONTRIBUTION SUBMISSION FORM

AGENCY NAME: _____ MONTH _____

Name	SS#	Base Comp	State Pay	Total Comp	ER Cont	EE Cont
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“I UNDERSTAND THAT THERE IS A LAG TIME BETWEEN THE END OF EACH MONTH AND THE DATE THAT CONTRIBUTIONS ARE DUE TO BE SUBMITTED TO FRS. CONTRIBUTIONS ARE ALWAYS DUE BY THE 20TH OF THE IMMEDIATE FOLLOWING MONTH. FOR EXAMPLE, CONTRIBUTIONS COLLECTED FOR JANUARY ARE DUE TO FRS BY FEBRUARY 20TH. I HEREBY ACKNOWLEDGE THAT CONTRIBUTIONS ARE CALCULATED IN ACCORDANCE WITH ALL APPLICABLE STATE LAWS, INCLUDING BUT NOT LIMITED TO R.S. 11:233, 2252(9), AND 2262.”

SUBMITTED BY: _____
SIGNATURE , TITLE, & DATE