

FIREFIGHTERS' RETIREMENT SYSTEM
Application for Purchase of Military Service Credit
R.S. 11:153

Name of Applicant: _____ Date of Birth: _____
Social Security Number: _____ Sex: _____
Mailing Address: _____ Date of Application: _____

AFFIDAVIT

State of Louisiana

Parish of _____

Before me, the undersigned authority, came and appeared _____
who after being duly sworn did depose and say:

I, _____, Social Security Number _____
do declare in the presence of the undersigned witnesses, that I am not drawing or receiving any benefit based on my military service; that I am not drawing or receiving a regular retirement benefit based on age and service from any retirement plan or fund established for members of the armed forces of the United States and that I have not previously received credit for military service in any other public retirement system or pension fund.

AFFIANT

Sworn and Subscribed before Me, Notary in and for the Parish of _____
State of Louisiana, this ____ day of _____, _____.

Witnesses:

NOTARY PUBLIC

NOTICE:

A copy of Form DD-214 (Discharge Paper) and/or Verification of Retirement Points is required to process this application for purchase of military credit. Please attach the DD-214 and/or verification of retirement points to this application.

Applicant's Signature: _____

Name of Employer: _____