

**SERVICE CREDIT PURCHASE
DIRECT TRANSFER CERTIFICATION**

MEMBER SECTION:

Name: _____ **DERP ID:** _____
First, Middle Initial, Last

Address: _____ **SSN:** _____
Street, City, State, Zip *Last 4 Digits*

Primary Phone Number: _____ **DOB:** _____

Email Address: _____ **Gender:** M / F

Name of Qualified Retirement Plan: _____ **Amount:** _____

DERP CERTIFICATION:

The member listed above is eligible to purchase service with the Denver Employees Retirement Plan (DERP). The member has requested to purchase _____ months of service at a total cost of \$ _____. This cost is good through _____. DERP will accept a direct transfer of funds from _____ provided the monies are coming from a qualified retirement account as per the Internal Revenue Service.

DERP Authorized Signature: _____ **Date:** _____

CERTIFICATION OF CURRENT CUSTODIAN:

The member listed above is requesting that DERP, a governmental defined benefit plan governed under Section 401(a) of the Internal Revenue Code, accept a direct transfer from your plan. In order to accept the direct transfer funds, DERP requires verification that your plan is a qualified retirement plan under the Internal Revenue Code. Please complete the section below and return the form directly to DERP.

Qualified under IRC Section: _____ **Name of Plan:** _____

I certify that I am the plan administrator, trustee, custodian, or issuer of the contract with respect to the qualified plan or individual retirement account named above.

Signature: _____ **Date:** _____

Title: _____

DERP is not able to accept and deposit transferred funds until this completed form is received. The member is advised to seek professional tax advice prior to requesting a direct transfer.