

\* THIS FORM IS NOT REQUIRED IF NOT TRANSFERRING FUNDS. \*

### PURCHASE TRANSFER REQUEST

Retirement Systems of Alabama  
P. O. Box 302150 ♦ Montgomery, AL 36130-2150  
334/517-7000 or 877-517-0020  
www.rsa-al.gov

This form must be used if you are electing to transfer funds from a qualified and tax-deferred plan for the purchase of service in the Employees' Retirement System or Teachers' Retirement System of Alabama, which qualify as 401(a) Defined Benefit Plans. You must contact your investment company to begin the transfer process.

#### PART I MEMBER INFORMATION

Employees' Retirement System                       Teachers' Retirement System

Social Security No.: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_                      Account No.: \_\_\_\_\_

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
                    First                      Middle                      Maiden                      Last    Mo.                      Day                      Year

Address: \_\_\_\_\_  
                    Street Address or P. O. Box    City    State    Zip Code

Home Telephone Number: (\_\_\_\_\_) \_\_\_\_\_                      Work Telephone Number: (\_\_\_\_\_) \_\_\_\_\_

Amount of Transfer Requested: \$ \_\_\_\_\_ (A copy of the purchase letter must be attached.)

Signature of Participant \_\_\_\_\_    Date \_\_\_\_\_

STATE OF ALABAMA, COUNTY OF \_\_\_\_\_

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, personally appeared before me, the above named individual and made oath that the statements made therein are true.

Signature of Notary Public \_\_\_\_\_

(seal)

My Commission Expires \_\_\_\_\_

#### PART II PLAN INFORMATION (To be completed by Plan Representative)

The Retirement Systems of Alabama accepts transfers from qualified and tax-deferred plans provided that the amount transferred does not exceed the cost of the purchase. If a Transfer Acceptance Letter is needed, please contact the Retirement Systems of Alabama.

Type Plan:     RSA-1         IRC 457         IRC 403(b)         IRA         Conduit IRA         IRC 401

Name of Company transferring funds: \_\_\_\_\_ Account Number: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Telephone No.: (\_\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_  
                    Street Address or P. O. Box    City    State    Zip Code

Qualified Transfer Amount: \_\_\_\_\_

Signature of Plan Representative: \_\_\_\_\_ Date: \_\_\_\_\_

## INSTRUCTIONS

**IF YOU ARE PAYING BY PERSONAL CHECK OR MONEY ORDER, YOU DO NOT NEED TO COMPLETE THIS FORM.**

- Member must complete Part I of the Purchase Transfer Request form.
- Member must sign the form, have the signature witnessed by a Notary Public, and submit the form to the plan from which the funds are to be transferred. The member should also include a copy of the service purchase letter with this form.
- The plan representative must complete Part II of the Purchase Transfer Request form. The completed form and the transferred funds should be sent to the RSA at the address shown at the top of the previous page.
- If the member is making direct payment for the remainder of the cost, the member should remit that payment along with a copy of the purchase letter directly to the RSA at the address shown at the top of the previous page.

This form must be submitted prior to the effective date of your service purchase. Most plans have minimum processing requirements that must be taken into account regarding the remittance of your payment; it generally takes several weeks for a plan to complete a transfer of funds.

**Note for RSA-1 participants:** If your payment is being transferred from your RSA-1 Deferred Compensation Account, submit this form to RSA-1 at least fifteen (15) working days prior to the purchase date. You will additionally be required to complete the RSA-1 IN-SERVICE TRANSFER FORM TO PURCHASE PERMISSIVE SERVICE CREDIT (Form RSA-1 PURSVC). You can download the form from the Web site [www.rsa-al.gov](http://www.rsa-al.gov) or contact RSA-1 @ 877-517-0020 or 334-517-7000 to have it mailed to you.

This form is to be used for the purchase of permissive service credit. Permissive service is service that, by law, is eligible to be purchased by a member of the Retirement Systems.

If a member purchases credit for service based on an estimated cost, the member's account will be audited after the end of the fiscal year to ensure compliance with the law.

1. If the actual cost for the service credit exceeds the estimated remitted payment amount, an additional payment from the member will be required to maintain credit for the service.
2. If the estimated remitted payment amount exceeds the actual cost for the service credit, the member will be issued a refund.

