

## Purchase Service Credit Request Form

First Name	Last Name					Last 5 Digits of SSN						
Street Address												
City	State				Zip	)						
Email					Ph	one						
You must have 5 years of service with You may purchase up to 5 years of se		order	to p	urcha	se s	ervice c	redit.					
I would like to request the following (	select at le	east on	e op	otion):								
<ul> <li>Purchase of Service Credit for Mill</li> <li>Submit a copy of DD form 214</li> </ul>	-		of yc	our act	ive-	duty mili	tary serv	ice.				
<ul> <li>Purchase of Prior Refunded MFPRS</li> <li>Previous service must be since</li> </ul>		1, 1992	•									
Employer/City	Start Date: _		/		_ / _		End Date:		_ / _		_ / _	
	Start						End Date:					
Employer/City		MM		DD		YYYY		MM		DD		YYYY
<ul> <li>I hereby apply for a service c</li> <li>I understand that to purchase postmarked on or before the mailed to me after my applic any part of this service after the ser</li></ul>	e any part expiration ation has b	of this s date i been re	servi ndic evie	ice my ated wed b	on tl by M	he purcl FPRSI. I u	nase cos understa	t quot nd tha	e, wl t if I v	hich w wish to	ill be purc	

• I affirm that the information I have submitted in this application is correct to the best of my knowledge, and that I am subject to perjury for making false statements.

eligibility verified again and the cost recalculated.

• I understand that if any of the information I submit is later found to be incorrect, MFPRSI may remove the additional service, return the money without interest, and recover any excess benefits paid.

Signature: \_\_\_\_\_

Date: