



Preliminary Retirement Coordinator Verification

515-134A-16
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Retirement Coordinators may use this form to submit or update information submitted in Part 8 of the *Retirement Application*. This document must be received at OPERS before the 60 day notice deadline for the retirement date designated in Part 1. Email the completed form to edobbs@opers.ok.gov or klancaster@opers.ok.gov.

Retirement Coordinators must also complete the *Final Retirement Certification* on the secure employer website within 10 days after the retiring member’s last day on the payroll.

PART 1 — MEMBER INFORMATION

Name (First, Middle, Last)

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OPERS member id number

Retirement date

Last date on payroll

Hours of accumulated unused sick leave*
as of the last date on regular payroll

PART 2 — PAYMENT NOTICE

Unused sick leave may provide additional benefits to retiring members. If unused sick leave increases the retirement benefit, the employer is responsible for funding the cost of additional benefits. In such a case, your organization will be billed for this additional cost.

***NOTE:** If an employer adopts a sick leave policy permitting the accrual of sick leave, whether called sick leave, personal days off, or another term effectively equating to sick leave, the employer cannot lawfully adopt and enforce a sick leave policy that prohibits any accrued unused sick leave from being used towards participating service credit in OPERS under 74 O.S. § 913(B)(7). *Attorney General Opinion No. 2012-8.*

PART 3 — RETIREMENT COORDINATOR CERTIFICATION

I certify I am the Retirement Coordinator for the following OPERS participating employer and all the information contained on this form is true and correct.

Retirement Coordinator signature

Date

Employer name

Employer number

Phone number