

Registrars' of Voters Employees' Retirement System

PARISH: _____ (CODE) _____

Member Name: _____

Personnel # _____

This form must be returned to the R.O.V.E.R.S. office
30 days in advance of your completion of D.R.O.P.

DROP COMPLETION

Date: _____

R.O.V.E.R.S.
PO Box 57
Jennings, La 70546

On _____, I will have completed my DROP participation in the Registrar of Voters Employees' Retirement System. (This should be the last day in DROP)

Choices:

1. Effective _____, I will **CONTINUE TO BE EMPLOYED** in the Registrar of Voters Office until further written notice from me. At this time I ask that my payroll authorities be notified of my decision. (7.0% retirement deduction will be taken from my payroll effective on the date I have indicated.)
2. Effective _____, I will **RETIRE** with the Registrar of Voters Employees' Retirement System. I ask that you process my application to reflect my retirement date. I have enclosed my Request for Retirement Application from LAROVERS.com

Sincerely,

Employee Signature	Printed Name
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Mailing Address	City State Zip
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SSN: _____

Personnel # _____

Date of Signature	(____) _____ Telephone # (Where you can be reached)
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