



Merced County Employees' Retirement Association

PURCHASE OF RETIREMENT SERVICE CREDIT FORM

Name: _____ SSN: _____

Previous names used: _____

Department: _____ Date of Birth: _____

Check the box that applies:

Redeposit of Contributions Previously Withdrawn

Purchase of Part Time / Extra Help

Purchase of Leave of Absence - Personal Illness / Family Care

Type of Leave (Circle One): Self or Family Member

Purchase of Leave of Absence - Military

Please note: Military Leave of Absence can only be purchased if leave or resignation was taken while employed with Merced County and you returned to Merced County employment within a year of military separation. Separation must be honorable; a copy of your DD214 must be submitted with this form.

Purchase of Prior Membership

Dates of Above Service: _____

Remarks: _____

Note: Purchase Estimates may take up to 12 weeks to process depending on order received and pending requests.

Signature: _____ Date: _____

MercedCERA Office use only

Accepted By: _____ Date: _____