

Louisiana Clerks of Court Retirement and Relief Fund
MONTHLY CONTRIBUTION REPORT

ACTIVE MEMBERS

(AVERAGING MORE THAN TWENTY (20) HOURS PER WEEK FOR MONTHLY REPORTING PERIOD)

Parish _____ Contribution Month _____

Active Employee Name	Social Security Number	Gross Salary	8.25% Deduction

A CHANGE IN STATUS FORM MUST ACCOMPANY THIS CONTRIBUTION REPORT FOR EMPLOYEES WHO HAVE A CHANGE IN STATUS IN THIS REPORTING PERIOD

Report Summary and Certification

Employee Contribution Total (8.25% Deduction):

EMPLOYER CONTRIBUTIONS:

Total Active Employee Salaries: 19.00%

Total DROP Employee Salaries (Form 2): 19.00%

Total Retirees Hours worked Salaries (Form 3): 19.00%

Adjustment from prior month(s)

Brief explanation for adjustment: _____ Adjustment amount:

Total Amount Paid to Fund

I hereby acknowledge that I have read the instructions on this report and I am aware of the laws that govern the Clerks Retirement and Relief Fund as they pertain to contributions to the Fund in regard to eligibility, payroll deductions, and reporting. Further, I hereby certify that the information shown herein is true and correct.

Date	Signature of Clerk of Court
------	-----------------------------

Louisiana Clerks of Court Retirement and Relief Fund
MONTHLY CONTRIBUTION REPORT

DROP MEMBERS

This report **MUST** accompany the **ACTIVE** monthly contribution report (If Applicable)

Parish _____ Contribution Month _____

DROP Employee Name	Social Security Number	Gross Salary	Did member average more than twenty hours per week for monthly payroll reporting period?	
			Yes	No

IF YOU INDICATED "NO" FOR DROP MEMBER A CHANGE IN STATUS MUST ACCOMPANY THIS CONTRIBUTION REPORT

Report Summary and Certification

DROP Employee Salaries Employer Contributions

Please ADD DROP Employee Salaries and Employer Contributions to Form 1: 19.00%

Adjustment from prior month(s)

Brief explanation for adjustment: _____ Adjustment Amount:

DROP Amount Paid to Fund:

I hereby acknowledge that I have read the instructions on this report and I am aware of the laws that govern the Clerks Retirement and Relief Fund as they pertain to contributions to the Fund in regard to eligibility, payroll deductions, and reporting. Further, I hereby certify that the information shown herein is true and correct.

--	--

Date

Signature of Clerk of Court

RE-EMPLOYMENT OF RETIREE

One of the following statements must be certified by the Clerk of Court.

I hereby certify that I *did not* employ any current retiree(s) of the Clerks of Court Retirement and Relief Fund during the aforementioned contribution month.

I hereby certify that I employed the following retiree(s) of the Clerks of Court Retirement and Relief Fund and submit the information listed below for your records, in accordance with the law La. R. S. 11:1513.

RETIREE Name	Social Security Number	Gross Salary	Hours Worked	Rate of Pay
				HOURLY

Please ADD Retiree Salaries and Employer Contributions to Form 1:

Retiree Salaries	Hours Worked	Employers Contrs. 19%

EMPLOYMENT FOR PART TIME EMPLOYEES

Please indicate the number of Part-Time employees **NOT** subject to Retirement Contributions for this reporting period.

- * If no part-time employees, please indicate None
- * Exclude all Retirees

of Part-Time Employees

--	--

Date

Signature of Clerk of Court

INSTRUCTIONS FOR MONTHLY CONTRIBUTION REPORT

Reports should be:

- (1) executed in ink or typed.
- (2) signed, legible, and accurately totaled, or the report will be returned.
- (3) for every employee paid a salary from the Clerk of Court's Salary Fund who works more than an average of twenty hours per week and contributions for retirement on regular compensation ONLY. **DO NOT INCLUDE** bonuses, payment of accrued vacation, annual or sick leave, payment for overtime, terminal pay, severance pay, deferred salary, or any other type of irregular or nonrecurring payment.
- (4) sent to the office within ten (10) days after the close of the month for which contributions are collected. Interest will be assessed on delinquent contributions.

The failure of any clerk to make the required contributions or to remit to the Fund in accordance with law, within thirty (30) days of becoming due, shall be brought to the attention of the Board of Trustees.

Remit checks or ACH and reports to: Clerks Retirement and Relief Fund
10202 Jefferson Highway, Building A
Baton Rouge, Louisiana 70809