

# Election for Inclusion in the Coordinated Plan By a City Manager/Administrator



**Public Employees Retirement Association (PERA)** 60 Empire Dr., Suite 200, St. Paul MN 55103  
 PERA Employer Fax Number: 651 296-2493; Employer Lines: 651 296-3636 or 1-888-892-PERA

**To Employer:** City managers/administrators who had previously elected to *not* participate in PERA's Coordinated Plan have the option to reverse that decision and become members of the Coordinated Plan by completing this form. Additionally, a City Council resolution approving the exclusion revocation is required.

Once a city manager/administrator reverses the original decision to be excluded from the Coordinated Plan, the decision to contribute to the Coordinated Plan on prospective earnings remains until termination of service. Under the law, membership may begin on the first day of the pay period for which retirement contributions are withheld from the individual's salary provided a signed Election for Inclusion form is received within 60 days of the receipt of the Coordinated Plan contributions by PERA.

Part A is to be completed by the City Manager/Administrator. As the employing city, you are to complete Part B and send the completed form and a copy of the approving city council resolution to PERA.

<b>PART A - FOR COMPLETION BY CITY MANAGER</b>				
Name of City Manager	Last	First	M.I.	Soc. Sec. No
Mailing Address (include city, state, and zip code)			Date of Birth	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female
Name of Employing City				
I hereby revoke my previous election to be excluded from membership in the PERA Coordinated Plan and now choose to have prospective coverage in the Coordinated Plan based on my current status as a City Manager or Administrator with the governmental subdivision indicated above. As required by law, I hereby state that I will not at any time in the future seek to purchase service credit for any period of excluded service as a city manager/administrator. I understand that this election is irrevocable.				
Signature of City Manager/Administrator				Date
<b>PART B - FOR COMPLETION BY EMPLOYER</b>				
I state that the named individual is a City Manager as defined in M.S. §353.028, subdivision 1: ... "city manager" means (1) a person duly appointed to and holding the position of city manager in a Plan B statutory city or in a home rule city operating under the "council-manager" form of government, or (2) a person appointed to and holding the position of chief administrative officer of a home rule charter city or a statutory city pursuant to a charter provision, ordinance or resolution establishing such a position and prescribing its duties and responsibilities...				
Date Coordinated Plan Membership is to be Effective	Pay Cycle applicable to the salary of this manager/administrator			
Employer PERA ID No.	<input type="checkbox"/> Weekly	<input type="checkbox"/> Semi-monthly	<input type="checkbox"/> Bimonthly	<input type="checkbox"/> Annually
	<input type="checkbox"/> Biweekly	<input type="checkbox"/> Monthly	<input type="checkbox"/> Quarterly	
Signature of City Representative	Title		Date	