



ERS Age 65 or Over Election to Discontinue Contributions

Section 1: Employee Information and Election

1. Complete employee information
2. Certify election to discontinue contributions
3. Sign and date
4. Provide form and proof of age documentation to Employer HR to complete Section 2

Name (please print): _____

Social Security Number: _____ Date of Birth: _____

As provided under the provisions of O.C.G.A. § 47-2-51(a)(1), I elect to discontinue contributions to the Employees' Retirement System (ERS) defined benefit pension plan, having attained the age of 65*. With this election I understand that I will continue to be an ERS member, but in accordance with O.C.G.A. § 47-2-120(a)(2), I will no longer accrue service credits in the defined benefit pension plan unless I resume contributions.

Please note: Eligibility to contribute to the Peach State Reserves (PSR) defined contribution plan is not impacted by this election. For example, if you are currently a Georgia State Employees' Pension and Savings Plan (GSEPS) member, you will continue to be eligible for employer matching contributions in the PSR 401(k) plan as long as you remain an actively employed GSEPS member.

Your local HR representative must complete the section at the bottom after you have signed and dated this form.

Signature: _____ Date: _____

Section 2: Employer Information

I certify that this employee has attained age 65 and is making this election within 30 days of hire.

Employer Name: _____

Employer Reporting/Department #: _____

HR Contact Name: _____

Phone: _____ Email: _____

HR Contact Signature: _____

Date: _____

Return this signed form (signed by both employee and employer) and proof of age to ERSGA. Mail, fax, or scan and email the form to:

ERSGA
Two Northside 75, Suite 300
Atlanta, GA 30318
404.350.6310
ERS.ES@ers.ga.gov