Toll Free: 800-381-5111 Michigan.gov/ORS Fax: 517-284-4416

## Tax-Deferred Payment (TDP) Agreement Addendum

For Public School Employees

MEMBER'S NAME (LAST, FIRST, M.I.)		MEMBER ID OR SSN
MAILING ADDRESS		DAYTIME PHONE NUMBER
CITY, STATE, ZIP CODE	TDP AGREEMENT #:	PAYROLL DEDUCTION AMOUNT
EMAIL ADDRESS		
Complete this form with your new payroll office if you have changed	public school employers and	wish to transfer a TDP Agreement.

Transferring your agreement from one public school employer to a new school district allows you to continue your service credit purchase under the terms of your original agreement, without a recalculation of the purchase price.

To complete the transfer, provide your new Michigan public school employer with your original TDP Agreement. You and your new

Previous Employer Information	New Employer Information
Reporting Unit Name :	Reporting Unit Name:
Reporting Unit #:	Reporting Unit #:
Termination Date:	Payroll Officer Name:
*Final Deduction Pay Period End Date:	*First Deduction Pay Period End Date:
	l after the date of the final deduction from the previous employer.
Terms of Agreement	
<ul> <li>all the terms and conditions of the original agreement and a for the effective period of this addendum, my employer mu effect, ORS will only accept payments from this employer.</li> <li>this addendum allows for the deduction from salary for employer's governing body has passed the necessary a copy of the resolution to ORS.</li> <li>the employer is obligated to make payment according to the any other mandatory deductions.</li> <li>it is my responsibility to ensure that the deductions I agreed that the deduction has been initiated and is the correct amordiscrepancies.</li> <li>to initiate this addendum my payroll officer and I must sign below my new employer cannot begin withholding deductions until after</li> </ul>	st make the scheduled deduction each pay period. While this addendum is in

Payroll office: Send the TDP Addendum to Office of Retirement Services, PO Box 30171, Lansing, MI 48909-7671 or fax to 517-284-4416.

Daytime Phone Number

Date

Payroll Officer's Signature