



1400 West Third , Little Rock, AR 72201
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Working Retiree Remittance Report

FOR AGENCY USE ONLY	
C#	
Date	
By	

Payroll period _____ Employer _____ 5 Digit Account # _____

1. **List amount of Regular salaries for Working Retirees from Supporting Report** \$ _____
 - a. **Multiply Line 1 by 14%** \$ _____
 - b. **14% Employer Retired Regular Contributions from Supporting Report** \$ _____
 (If Line 1a & 1b are different please explain on the Explanations Form.)

2. **List amount of Federal salaries for Working Retirees from Supporting Report** \$ _____
 - a. **Multiply Line 1 by 14%** \$ _____
 - b. **14% Employer Retired Federal Contributions from Supporting Report** \$ _____
 (If Line 2a & 2b are different please explain on the Explanations Form.)

3. **Total Retired Employer Contributions Due (Line 1b + 2b)** \$ _____

4. **Please List EFT Payment(s) or Check(s) Below**

Check #	Amount	Check #	Amount
		Total	\$

Date _____ Signature / Title _____ Telephone Number _____ E-mail address _____

**In order to avoid a \$150 late penalty and an assessment of 8% interest on past due contributions, your remittance report and contributions must be received in this office by the 15th calendar day following the end of the month for which the contributions are due or be postmarked no later than the 14th day following the end of the month for which the contributions are due. In addition to the above penalty, the system may impose an additional \$500 penalty for a report that is filed with the system over one month late. Arkansas Code 24-7-411
 THIS IS THE ONLY NOTICE YOU WILL RECEIVE!**

A copy of your APSCN Report or Other Supporting Report MUST be attached to this form & submitted electronically