

Kentucky Public Pensions
Authority/~~Retirement Systems-~~
~~Perimeter Park West~~
1260 Louisville Rd
Frankfort KY 40601-6124
Phone: (502) 696-8800
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Form 2010 Revised
~~1/2026~~12/2006

[FORM 2010
KENTUCKY RETIREMENT SYSTEMS-
PERIMETER PARK WEST
1260 LOUISVILLE ROAD
FRANKFORT, KY 40601]
ELECTION OR REJECTION OF PARTICIPATION

I, _____, occupying a regular full-time position with
_____ as a _____

Employer Name

Position Title

☐ ELECT

☐ REJECT

membership in the County Employees Retirement System pursuant to the provisions of KRS 78.540(1).

[SIGNED: _____]

S.S.#: _____

WITNESS: _____

DATE: _____]

Notice: Persons who elect to participate under this subsection may purchase service credit for any prior ~~months~~ years by paying a delayed contribution payment. The service shall not be included in the member's total service for purposes of determining benefits under KRS 61.702 and 78.5536.

Certification

I hereby certify that the information provided on this form is correct and accurate. I acknowledge that I have full understanding that any person who provides a false statement, report, or representation to a governmental entity such as KPPA is subject to the penalty of perjury in accordance with KRS 523.010, et seq. I further acknowledge that if I knowingly submit or cause to be submitted a false or fraudulent claim for the payment or receipt of benefit, I may be liable for repayment of benefits I was not entitled to receive, but also liable for civil payments, legal fees, ad costs.

Signed: _____

Date: _____

Witness: _____

Date: _____