IPERS

Employer/Reporting Official Signature

I certify that, to the best of my knowledge, _____ is in compliance with the rules and guidelines discussed above, except as noted. I understand that I am responsible for correcting any errors. I understand that I am to report any cases of noncompliance not discovered during this review of which I later become aware. I also understand that it is my responsibility to stay aware of changes in IPERS law and interpretation.

It is also agreed that any wage adjustments necessary as a result of this review are due in IPERS' office by 60 days from date of the follow-up compliance review letter from IPERS.

Signature of reporting official: _____ Date: _____

Signature of compliance officer: _____ Date: _____

Issues and Notes:

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