AP-DLN (04-2013)



A message from the Director, U.S. Census Bureau...

The U.S. Census Bureau has recently identified you as a defined benefit plan system and we need information to add you to our frame. Information that we are requesting includes mailing address, membership, payments, and cash and investments for the defined benefit plan.

The Annual Survey of Public Pensions, authorized by Title 13, United States Code, Section 182, provides measures of revenue, expenditures, investments, and membership for state and local government employee retirement systems in the United States. This survey is the only comprehensive source of information on public employee retirement system finances in the United States. The information collected serves as an integral part of the foundation for developing national economic and public policy by measuring public activity.

Please respond to the questions online at the following address: **respond.census.gov/aspp** using the User ID and Password below **by October 31, 2014**,

User ID:

Password:

If you need assistance with your response, please contact us by phone at 1-800-832-2839 weekdays between 7 AM and 5 PM ET, or by email at govs.pensions@census.gov.

Please retain a copy of your response for your records.

Thank you for providing this information. The Census Bureau appreciates your help.

Enclosures





2014 ANNUAL SURVEY OF PUBLIC PENSION PLANS Locally-Administered Defined Benefit Plans

OMB No. 0607-0585: Approval Expires 07/31/2017

Sample pension plan supplemental data request (electronic data collection only):

1.	Is the addressee title/department and mailing address the same as shown above?					No
	If no, correct information is:	-				
	Addressee Title or Department:					
	Street 1:					
	Street 2:					
	City:	State:	Zip:			

- 2. What is the retirement system's fiscal year end date?
- 3. What was the retirement system's last fiscal year end date that occurred before July 1, 2014? *Use this fiscal year data to complete the remainder of the survey even though more recent data may be available.*
- 4. What was the total number of contributing members of the retirement system during the fiscal year indicated in 3.?
- 5. What was the total amount of cash and investments (at market value) held at the end of the fiscal year indicated in 3.?
- 6. What was the amount of payments during the fiscal year indicated in 3.?
- 7. Use this space for any explanations that may be essential in understanding the reported data. Include

8.	Who should be contacted to answer questions about data reported in this survey?							
	Name of contact person:							
	Title of contact person:							
	Telephone:	-	-	Extension:				
	Fax:	-	-					
	Email address:							

Thank-you for completing this survey. Please keep a copy of the completed form for your records.

The U.S. Census Bureau receives its authorization to conduct this survey from Title 13, United States Code, Section 182. This collection of information has been approved by the Office of Management and Budget (OMB) and given the number 0607-0585. Please note the number displayed in the upper right corner of this screen. Display of this number confirms that we have approval from OMB to conduct this survey. If this number was not displayed, under the Paperwork Reduction Act, we could not request your participation in this voluntary survey. Information provided in this collection tool compiled from or customarily provided in public records are exempt from confidential treatment as cited in Title 13, United States Code, Section 9.

Public reporting burden for this collection of information is estimated to vary from 30 minutes to 1 hour per response, with an average of 45 minutes per response, including time for gathering the data needed and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: <u>Paperwork@census.gov</u>; use Paperwork Project 0607-0585 as the subject.