



STATE OF WASHINGTON  
DEPARTMENT OF RETIREMENT SYSTEMS  
PO Box 9018 \* Olympia, WA 98507-9018 \* (360) 664-7316 \* Toll Free 1-800-547-6657 ext. 47316

**CONTACT ATTN LINE  
EMPLOYER NAME  
EMPLOYER ADD  
CITY ST ZIP**

System Plan: A4  
Account Nmbr:  
Invoice Nmbr: 981261  
Invoice Date: 04/01/2013  
Due Date: 05/15/2013  
Amount Due: \$

*Please return this portion with your payment*

Invoice No.	Description	Amount
981261	Old Age and Survivors Insurance Invoice (OASI) 2012 Tax Year	\$ -

This invoice is an annual administrative fee authorized under RCW 41.48 for employers that voluntarily participate in Social Security under Section 218 of the Social Security Act.

Please pay the total amount by the above due date. You will receive a monthly statement showing this invoice amount until this is paid in full. There are different payment options available.

***Employers may pay by***

- \* Check - mail the top portion of this invoice with payment to the address above.
- \* Electronic Payment (ePay) through DRS Electronic Services - contact Employer Services at [drsemployer@drs.wa.gov](mailto:drsemployer@drs.wa.gov) to sign up today!

***State Agencies may also pay by***

- \* Journal Voucher (JV) - Fund 874
- \* InterAgency Payment (IAP) - Vendor No. SWV002163004

***Community Colleges may also pay by***

- \* Electronic Funds Transfer (EFT)

***OASI Invoice Questions:***

[www.drs.wa.gov/publications/employer/OASIPProgram.htm](http://www.drs.wa.gov/publications/employer/OASIPProgram.htm)  
(360) 664-7316 or 1-800-547-6657 ext. 47316  
[oasi@drs.wa.gov](mailto:oasi@drs.wa.gov)