

General Information

Do not alter this form.

Use this form to report contribution payments for the Higher Education Supplemental Benefit Fund to DRS. Other DRS retirement systems and Deferred Compensation Program payments have their own payment advice forms.

If you have any questions about completing this form, please call the Accounts Receivable Unit at 1-800-547-6657, option 6, then option 1; or (360) 664-7200, option 1. To redistribute a previous payment, use the Credit Redistribution Form, or contact the DRS Accounts Receivable Unit for assistance.

Completing the Form

Employer Name	Enter your organization's name as shown on your Statement of Account Activity.
Reporting Group	Enter your DRS Reporting Group as shown on your Statement of Account Activity; e.g., Z0000.
Payment Number	Enter the number of the check, warrant, journal voucher (JV) or other payment document. A single payment document may be used for more than one reporting period. The payment document number must be listed for each reporting period.
System & Plan	Z1 is the system & plan code assigned to represent the Higher Education Supplemental Benefit Fund. This payment advice form will only be used to report payments designated to this fund.
Reporting Period	For transmittals, use the reporting period month and year; e.g., 01/12 for January 2012.
Amount	Enter the amount being paid against each reporting period.
Total	Enter the total amount.