All forms for MBB are located on our CPO website <u>https://www.littlerock.af.mil/Helping-Agencies/Civilian-Personnel/</u> under Employee Benefits → Military Buy Back Forms

#### **STEP ONE**

Obtain a copy of your DD214 (member 2 or 4)

<u>Note</u>: To obtain a copy of your DD214 or a Request Pertaining to Military Records, fill out Standard Form 180 (SF-180), (PDF 394 KB- 11/17/20210) submit requests to:

NATIONAL PERSONNEL RECORDS CENTER MILITARY PERSONNEL RECORDS 1 ARCHIVES DRIVE ST. LOUIS, MISSOURI 63138

Complete RI 20-97

<u>Note:</u> To obtain the RI 20-97 go to <u>https://www.opm.gov/forms/pdf\_fill/RI20-</u> <u>97.pdf</u> or CPO website <u>https://www.littlerock.af.mil/Helping-Agencies/Civilian-</u> Personnel/ under Employee Benefits → Military Buy Back Forms

Please only fill out the sections highlighted as shown on the example form below. Please print and fax to appropriate branch with supporting documents.

			Estimat	ed Earnings D	During Mil	litary Service			
Instructions request your and any avai Use a separa	: You must co military earni lable records te form RI 20	omplete block ngs. Get the of pay or pror -97 if you had	address from notions. The military serv	0 and send this for the reverse side of DFAS cannot pro- rice in a different l	orm to the ap f this form. vide estimat branch of se	pplicable Defense Finance and Attach your Honorable Disch ted earnings without verificat: rvice.	Accounting Service to harge, DD 214 or its equivalent ion of your active duty service.		
Address	of Branch yo	u were in (ac	ldress located	l on the back of <b>f</b>	orm)	1. Name (Last, first, middle)			
	Army					Cobarrubia, MaryAnne, M	Aoneva		
	DFAS - Ind	ianapolis Cen	ter Attention:	Verifications		<ol><li>Other names used</li></ol>			
	Section (Est	timated Earni	ngs) 8899 Eas	t 56th Street		Minot			
	Indianapoli	s, IN 46249-0	865			3. Social Security Number	4. Date of birth (mm/dd/yyyy)		
	Phone: 1-80	0-729-3277				000-00-0000	01/01/1980		
	Fax: 866-40	1-5849				<ol><li>All military service numbers</li></ol>			
						6. Branch of service			
						Regular Army			
The uniform This is needed pay earned b	ed services m ed to make a d y the person r	ust provide Fo leposit to the named above.	ederal employ Civil Service I	ees' estimated bas Retirement and D	ic pay for m isability Fur	nilitary service they performe ad for retirement credit. Pleas	a after December 31, 1956. e provide the estimated basic		
7. Signature of	requester				X Person na Other	med is requester	or		
10. Requester's	s name and addre	ess (Where inform	nation will be sen	it)	(specify):				
Name	( C 1 1)				Telephone number (including area code)				
MaryAnne N	A. Cobarrubia				(501) 987-3212				
Address					Email Addres	s			
Y our addres	s				youreman	.us.ar.mii			
City		-	State	Zip Code (5 digits)					
11. Active mili December 3 indicated be based on D equivalent of	tary service after 31, 1956 (Dates elow must be D 214 or certification.)	12. Estimated I Do not prov	Earnings (Base F ide estimated ear	ay) nings for any period o	f service prior t	o January 1, 1957.			
From (mm/dd/yyyy)	To (mm/dd/yyyy)	From (mm/dd/yyyy)	To (mm/dd/yyyy)	Rate of Bas	ic Pay	Earnings	Type of Discharge		
06/14/2001	12/17/2011								

#### Fax Coversheet

<u>Note</u>: Located in <u>https://www.dfas.mil/CivilianEmployees/customerservice/</u>. Select appropriate branch of service and open additional link to fill out the Fax Coversheet. Fax Coversheet: <u>https://corpwebl.dfas.mil/civpaywf/coversheet</u>

From Civilian Payroll - Coversheet Builder, click OK. Fill out sections with \*.

Sender's fax #: \_\_\_\_\_ # Pages w/o Coversheet: \_\_\_\_\_

Team/Database/Payblock: <u>Estimated Earnings- your branch of service</u>

Click Work Type  $\rightarrow$  select appropriate branch (scroll down until you see image below)  $\rightarrow$  OK:

ESTERNAF	Estimated Earnings - Air Force
ESTERNAR	Estimated Earnings - Army
ESTERNMC	Estimated Earnings - Marine Corps
ESTERNNV	Estimated Earnings - Navy

Subject: Verification Section (Estimated Earnings)

Remarks: Attached DD214 and RI 20-97 for (employee name)

Click Build  $\rightarrow$  Print Fax Coversheet

Then Fax the Coversheet, RI 20-97, & DD214 to appropriate fax #:

Air Force, Army, Marine Corps, Navy fax #: 866-401-5849

Coast Guard fax #: **785-339-3780** 

Public Health Service fax #: 240-276-8817

Keep (file) faxed copies. If faxed properly, you should receive an email from them saying they received your fax. Estimated Earnings Statements will arrive in the mail about 30 days after fax is sent.

## Mailing Option

Send RI 20-97 and DD214 to appropriate address located on the back of RI 20-97.

#### STEP TWO

Obtain Estimated Earning statement and DD214, then fill out SF 3108 or SF 2803. (In most cases SF 3108 will be the form needed).

- If you are a Federal Employees Retirement System (FERS) employee, fill out the Application to Make Service Credit Payment, SF 3108.
- If you are a Civil Service Retirement System (CSRS) employee, fill out the Application to Make Deposit or Redeposit, SF 2803.

Reference:

https://www.dfas.mil/civilianemployees/militaryservice/militaryservicedeposits/

A. Fill out highlighted sections of SF 3108 (pages 1, 2, and 5). HR will need to sign Part B on page 2 and return the form back to you.

Ĩ	ERS	App	licatio	<b>n to Make Se</b> Federal Employees F	r <b>v</b> Retir	rement Sy	edit Pay: stem	ment				Form App OMB No. 3206	proved 8-0134
Fed Ret	eral Employees rement System		To 1. F 2. T 3. C h	avoid a delay in proce Read the attached inform Type or print in ink. Complete Part A in full. I nave your employing ag	essir natio If you ency	ng your cla on carefully u are curren y complete	i <b>im:</b> ntly a Federal e Part B.	mployee,					
			Part	A. To be Complet	ed	by the A	pplicant						
1.	Name (Last, first, middle)				2.	List other n	ames you have u	sed		:	3. Bir	thdate <i>(mm/dd/yyyy)</i>	)
4.	Address (Number and street)				5.	Department including bu	t or agency in wh ureau, branch, or	ich presently or division	last employed,		6. <mark>So</mark>	cial Security Number	r
	(City, state and ZIP Code)				7.	Location of	employment (cit)	( and state)			8. Tit	le of position	
9.	Have you previously filed any application unde or the Civil Service Retirement System (CSRS Yes, complete items 9a and 9b	er the Federal En 5)?	nployees Ret No	irement System (FERS)	9a.	Type of app Service Return	lication e credit payment of excess deduc	tions	Refund Retiremen	t	9b.Cla	aim number(s) <i>[if ava</i>	ailable]
10.	I am applying to make a service credit paymer	nt for:	Civilian Serv	ice (Complete item 10)		X Military	/Service (Go to it	iem 11)					
	List below in chronological order all periods of Department or Agency (including bureau, branch or division where employed)	Federal civilian s Location of Er (city and	ervice. Be su mployment <i>state)</i>	re all your service is listed Title of Position	Beg (m	that the Offic Periods ( ginning Date Im/dd/vvvv)	e of Personnel M of Service Ending Date (mm/dd/wwv)	Anagement (OF Check wh withheld, withheld	<sup>o</sup> M) can bill you ether deductior withheld and re and remain to y <i>Withheld and</i> <i>Refunded</i>	I for the construction of	orrect ot t d and unded	amount. Put a check mark in the boxes below to the periods of si you want to pay (If you do not want for a specific peric service, leave t box blank.)	k (✓) v, next ervice for. to pay od of the
							(						
													-
-													
11.	Are deductions for the Federal Employees Re	tirement System	now being w	ithheld from your salary?	12.	Give the da position une	te of separation f der the Federal E	rom your last mployees		Date of s	separa	tion (mm/dd/yyyy)	
13	Yes (Go to item 13) Signature of applicant	No (Go to	item 12)		14.	Telephone	system number (includin	g area code)	15. E-mail ad	dress		16. Date (mm/dd/y	vvv)
						( )	can be reached d	uring the day					
U.S.	Office of Personnel Management											Standard For Revised Jur	m 3108 ne 2013

CSRS/FERS Handbook for Personnel and Payroll Offices

Revised June 2013 Previous editions are not usable

#### Part B. To be Completed by the Employing Agency

Instructions to the Agency - Do not use this application to verify service for leave, retention or other non-retirement purposes. Procedures for verifying service and establishing creditability of service are contained in the CSRS (Civil Service Retirement System)/FERS (Federal Employees Retirement System) Handbook for Personnel and Payroll Offices. If more space is needed for the information requested below, please attach a separate sheet. Show the name and Social Security Number of the applicant on the separate sheet (SF 3107-1 may also be used for this purpose).

1.	Did this employee elect to transfer to FERS?		No		Yes	►	Effective date of election (mm/dd/yyyy)	
2.	From verified service documented in official	per	sonnel	ree	cords,	list al	I Federal civilian service performed (including current service) and the	
	retirement system under which it was perform	neo	I (FER	S. (	CSRS	. CSR	RS-Offset, FICA).	

Agency	Retirement System	Periods o	of Service
		Beginning Date (mm/dd/yyyy)	Ending Date (mm/dd/yyyy)

 Civilian Service Not Under FERS or CSRS
 From verified service documented in official personnel records, list any Federal civilian or District of Columbia Government service not covered by FERS or CSRS deductions which you believe is potentially creditable. If a period of service was subject to another retirement system for Federal employees, note this in the Leave Without Pay column. If total basic salary earned for any such period of service is known, a summary entry may be entered on the right-hand side below. For periods of non-deduction service spanning 1999 and 2000, separate entries for those years need to be entered if providing earnings in these columns. Otherwise, show each change affecting basic salary during the period of service. List any period of nondeduction service claimed on the front of this form which cannot be verified from official records and note it in the Leave Without Pay column as Unverified. Service which was not subject to FERS or CSRS deductions is creditable only as specifically allowed by law. NOTE: This information will also be requested on the SF 3107-1 in connection with the employee's retirement. File a copy of this schedule on the right side of the Official Personnel Folder to facilitate completion of the SF 3107-1.

Nature of Action (Appt., pro., res.,	Effective Date (mm/dd/yyyy)	Basic Salary Rate	Salary Basis (per annum, per	Leave Without Pay	If Basic Salary actually earned is available, make summary entry below			
etc.)			hour, WAE, etc.)*		From (mm/dd/yyyy)	To (mm/dd/yyyy)	Total Earned	

#### Application To Pay Military Deposit For Military Service Performed After December 31, 1956

You must be currently employed and covered under FERS to make the military deposit. You must complete the deposit in full before the separation on which your retirement benefit will be based. Date of Birth 8

1. Information About Emp	loyee's Milita	ry Service					
To Be Complet	ed By Employee		Agenc	y Use Only	(To Be Cor	mpleted By	Agency HR Office)
Branch of Military	Period o	f Service	Retireme Rules T to the (Check app	nt System hat Apply Service vopriate box)	Does Altern Calculat USERR (Check app	ative Deposit ion Under A Apply? ropriate box)	Accrual Date (IAD)
	Beginning Date (mm/dd)/yyyy)	Ending Date (mm/dd/yyyy)	CSRS	FERS	Yes	No	(mm/dd)yyyy)
			Certificatio this agency	n: The inform and is correct	ation entered	above is bas	ed on official records of
			Actency Offi	cial Signature			Date (mm/dd)/yyyy)
2. Employee's Acknowledg	ment of Unde	rstanding of l	Military S	ervice Cr	edit and	Deposit R	ules
I am ourrently employed in a positi salary, and I wish to pay the deposit deposit to my employing agency b retirement if I am eligible for and el deposits made to the Fund will be complete the deposit in full. I under retire without waiving my military or	on where deductio it necessary to ob- refore separation for ect an alternative a refunded to me alor rstand that it can o stired pay (if any).	ons for the Federa tain oredit for my or retirement. I fu annuity. If I do els ong with any othe only be refunded t	I Employees military servi rther unders so the altern r retirement to me if I bec	Referement ioe after 1950 tand that the ative annuity contribution come eligible	System (FE 8. I underst military dep upon retire s or paymer for a refund	(RS) are bein and that I m posit cannot ement, any c nts I made to d of my retire	ng deducted from my ust pay the entire be deemed paid at ompleted military the Fund. Once I ment contributions or
I understand that for any given full service, any payments I made that eligible for a refund of my retireme given full period of military service	period of military s were applied to th nt contributions. I that I have perform	ervice that I have at full period of m also understand and for which I ha	performed, ilitary servic each of the f ve not comp	if I do not oc e will be refu ollowing sen leted the mi	mplete the nded to me vice oredit n litary deposi	deposit for t when I retire ules and how it:	hat full period of military or when I become v they apply to any
<ul> <li>For each period of military ser compute or establish title to a</li> </ul>	vice performed aft FERS annuity if I d	er 1956 that is sul lo not complete th	bject to FER	S rules, the p efore I separ	oost-1956 m ate for retire	ilitary service ment.	e will not be used to
<ul> <li>For each period of military ser component of my FERS annuit</li> </ul>	vice performed aft ty:	er 1956 that is sul	bject to Civil	Service Reti	rement Syst	tem (CSRS) i	rules in a CSRS
<ul> <li>If the first time I worked in post-1956 military service separate for retirement.</li> </ul>	a position where 0 will not be used to	SRS deductions compute or estal	were withhe blish title to a	ld from my s a FERS annu	alarywaso iityifl dono	n or after Oo ot complete t	tober 1, 1982, the he deposit before I
<ul> <li>If the first time I worked in post-1956 military service for Social Security benefits</li> </ul>	a position where 0 will not be used to s at that time.	SRS deductions compute my ann	were withhe uity at age 6	ld from my s 32 (or when l	alary was b retire, if I re	efore Ootobe tire after age	er 1, 1982, the 62), if I am eligible
Finally, I understand that payment CSRS. I realize that the Office of Pr retirement benefits. I understand t retirement benefits.	of this deposit will ersonnel Managem hat OPM will deten	not make my mili hent (OPM) is sole mine if my military	tary service ly responsit / service car	oreditable if ble for adjudi ble oredited	it is otherwi ioating and I in my FER	se not oredit administering S retirement	able under FERS or g oivil service when I apply for my
Employee's Signature			Telephone	number where	you can be	reached	Date (mm/dd/wwy)

d Form 3106A June 2013

B. Once appropriate sections are filled, please save, and attach to myFSS ticket.

C. Go to <u>https://myfss.us.af.mil/</u> and search for "Creditable Military Service and Post-56 Military Service Deposits." Read the article carefully then click on "Create a Request," when ready.

D. Once you click "Create a Request," click on the small box to agree, and use the arrow to find "Civilian Retirement." Then click NEXT (like the image below).

DO NOT PROCEED UNLESS YOU HAVE READ THE KNOWLEDGE ARTICLE(S) AND HAVE THE REQUIRED DOCUMENT(S) FOR YOUR REQUEST.

✔ I have read the Knowledge Article(s) and have the document(s) if required.

Please select the type of Personal Benefits request you would like to make.

#### \* Request Type Civilian Retirement

Emails for this request will get sent to the following email addresses: maryanne.cobarrubia.1@us.af.mil maryanne.cobarrubia.1@us.af.mil To modify this list, please click on your Profile picture above, click "Profile," and update your email addresses.

## E. Benefit Type: select Civilian/Military Deposit, then NEXT.

' Benefit Type	
None	÷
None	
Civilian/Military Deposit	
Disability	
Non-Disability	
Phased Retirement	
Reemployed Annuitant	
our cert	

÷

F. Benefit SubType: select Military Deposit Request (Regular), then NEXT.



### G. Example of what to write in comments:

#### Good morning/afternoon,

I am interested in buying back my military time. Attached is my Estimated Earnings During Military Service, DD 214, and SF 3108. Please let me know if more is needed.

Thank you,

(your name)

<u>NOTE</u>: You can also ask them questions in this area.

H. Upload Files: DD214, Estimated Earnings, and SF 3108. Then click NEXT.

#### **STEP THREE**

Once your package is submitted to myFSS, expect to wait about 2 months for DFAS to mail you your military service deposit calculation.

*<u>Note</u>*: You could check your messages in myFSS sporadically to see if they responded with any updates or if you need to send them more documents.

A. Your letter from DFAS will look like the image below:





#### Your Name and Address

### This is the amount you need to pay DFAS

04/27/2017

SUBJECT: MILITARY DEPOSIT INFORMATION (CATCH 62) Employee Identification Number: 123456789

IAD: 7/11/2019 Deposit Amount: \$7,223.00 Service Period(s): 07/12/2005 - 06/30/2014 8 Years, 11 Months, 19 Days

We have received and processed your request for multiary service deposit calculation. The total amount due, to include any interest accrued to date, is listed above. If you have multiple deposits with multiple IAD (interest accrual dates), please note that the Defense Civilian Payroll System (DCPS) can process only one IAD at a time for payroll deductions or partial payments. After the current deposit is paid in full please submit complete documentation for further deposits. If you would like to pay one lump sum, regardless of IAD, the total amount of your deposit is \$7,223.00 to include the service periods listed above and 8 Years, 11 Months, 19 Days for total periods.

You may pay your military service deposit either online at pay.gov, by payroll deduction or by check. If you desire to initiate payroll deductions, please notify us in writing. The letter should include your signature, as authorization for payroll deductions, name, social security number, and the amount you desire for the bi-weekly deductions. The required minimum deduction is \$25 per pay period. Please fax or forward correspondence to:

DFAS Indianapolis, Civilian Payroll 8899 East 56th Street Indianapolis, Indiana 46249-1900 Fax number (866) 401-5849

Check payments should be made payable to DFAS-CL DSSN 8522. Please include your employee identification number and purpose of payment (Military Deposit) on your check or attach a copy of the payment coupon with the barcoding application attached at the bottom of this letter. Checks should be mailed to:

DFAS Cleveland ATTN: J3DCBB/559 1240 E 9th St. Cleveland, OH 44199

Online payments can be made at www.pay.gov under the form name Military Service Deposit. You will need the following information to make this payment: Name, address, employee identification number, and dollar amount to be paid.

**B**. You could check your myPay to see if the amount owed is on your LES. As shown in the image below.

kt Version	Smart L	eave a	nd Ear	nings Stater	ment			Help M	ain	Exit
	Printer	Friendly \	/ersion	HTML Version	n Vi	iew More	04/29/20	17	V	Go
		Ī	DEPARTN	IENT OF DEFEN	<u>SE</u>			1. Pay Period 04/29/17	End	
	CIVIL VIS	IAN LE IT THE D	AVE AN DFAS WE	ND EARNING B SITE AT: WV	S STATEMI WW.DFAS.MI	ENT L		2. Pay Date 05/05/17		
3. Name		4. Pay Plan/O	Crade/Step	5. Hourly/Daily/Rate	6. Basic/OT Rate	7. Basic Pay + I	locality Adj = .	Adjusted Basic H	ay	
8. Soc Sec No		9. Locality %	6	10. FLSA Category	11. SCD Leave	12. Max Leave	Carry Over	13. Leave Yea	a End	
14. Financial Instituti	on - Net Pav		15. Financia	l Institution - Allotment	#1	16. Financial In	stitution - Allo	tment #2		
17. Tax Marital Exen Status	nptions Add'l	18. Tax M St	larital Exer tatus	nptions Add'l Taz	ing Authority	19. Cumulative FERS:	Retirement	20. Military D PAID: 0.00 OWED: <u>7.223.0</u>	leposit 00	
21. GROSS PAY TAXABLE WAGES NONTAXABLE WAG TAX DEFERRED W. DEDUCTIONS AEIC NET PAY	GES AGES	Current M	i ear to Date		22. ROTH DATA	-				
TY <b>PE</b> REGULAR PAY	HOURS	/DAYS AM	IOUNT TY PO:	CURRENT EA PE F ST ALLOW	<mark>RNINGS</mark> IOURS/DAYS AN	IOUNT TYPE	HOUR	S/DAYS AM	OUNT	
TYPE FEGLI OASDI TAX, FEDERAL ROTH DED	CODE CO	CURRE	NT	DEDUCTION YEAR TO DATE TYI ME Ret TSF	DNS PE C DICARE TIRE, FERS K SAVINGS	ODE CI	URRENT	YEAR TO	DATE	

#### **STEP FOUR**

To pay your military service deposit you can do so online at <u>www.pay.gov</u>, by payroll deduction or by check. Or complete the Military Service Payment Election Form. A blank form can be retrieved from our website @ <u>https://www.littlerock.af.mil/Helping-Agencies/Civilian-Personnel/</u> under Employee Benefits → Military Buy Back Forms.

If you decide to fill out the Military Service Payment Election Form, complete and email the form to <u>lisa.weaver.3@us.af.mil</u> (your payroll office).

<u>Note</u>: Additional instruction on how to process payments is available through the DFAS Military Service Deposit (MSD) Payment eTutorial on YouTube: <u>https://www.youtube.com/watch?v=oX4jMkOoZ9M</u>

If you decide to use <u>www.pay.gov</u>, please follow instructions below.

A. Search "Military Deposit" in <u>www.pay.gov</u> and under DFAS Military Service Deposit Payment, click Continue.



#### Click Continue to the Form.

#### **DFAS Military Service Deposit Payment**

(1)	2	3	4	5
Before You Begin	Complete Agency Form	Enter Payment Info	Review & Submit	Confirmation
About this form				
The Military Service Deposit (MSD) amount due. This forr amount due. Specific inforn	: Payment Form is intended for ( m cannot be utilized until after ( nation from the notification lette	use by federal civilian emplo receipt of notification from t er (database and employee	yees to make payments on th he employee's servicing payre D) is required to complete the	eir Military Service Deposit oll office indicating the e form.
Notice: The identification nu number or a copy of the not	umber listed on your notification ification letter, please contact D	n letter is required to comple FAS at 800-729-3277.	ete this form. If you need to ol	otain the identification
Accepted Payment Method	ls:		+	
• Bank account (ACH)				
Amazon account				
<ul> <li>PayPal account</li> </ul>				
<ul> <li>Debit or credit card</li> </ul>				
Preview Form Canc	el			Continue to the Form
This is a secure service prov our privacy policy for more i	ided by United States Departme information.	ent of the Treasury. The info	rmation you will enter will ren	nain private. <u>Please review</u>

## B. Complete form and submit.

DFAS_Civilian_Deposit_v2		
Defense Finance and Acco	punting Service Proudly	Serving America's Heroes
Civilian Pay Military So	ervice Deposit Payment	Form
* Required Field		
Employee First Name *	Employee Middle Initial	Employee Last Name *
Identification Number: *		
Found in the notification letter		
Mailing Address *		
Country *		
United States		
City/FPO/APO *	State *	Zip Code *
Email Address		
Payment Amount *		
Will you be using this form free register and set up an account.	quently? Please visit the Pay.gov	home page at <u>www.pay.gov</u> to
For Military Service Deposits P	ayments ONLY.	

### C. You should be able to view the amount paid on your LES.

Version Smart L	eave and Ear	nings Stater	nent		Help Main
Printer	Friendly Version	HTML Version	Vi	ew More 10/14/20	17 🗸
CIVII	DEPARTN	MENT OF DEFEN	<u>se</u> s stateme	INT	1. Pay Period End 10/14/17 2. Pay Date
3. Name	4. Pay Plan/Grade/Step	5. Hourly/Daily/Rate	6. Basic/OT Rate	7. Basic Pay + Locality Adj =	Adjusted Basic Pay
8. Soc Sec No	9. Locality %	10. FLSA Category	11. SCD Leave	12. Max Leave Carry Over	13. Leave Year End
14. Financial Institution - Net Pay	15. Financia	Institution - Allotment #	<b>1</b>	16. Financial Institution - Alle	otment #2
17. Tax Marital Exemptions Add'l Status	l 18. Tax Marital Exe Statu:	mptions Add'l Taxi	ing Authority	19. Cumulative Retirement FERS:	20. Military Deposit PAID: 7.223.00 OWED: 0.00
21. GROSS PAY TAXABLE WACES NONTAXABLE WACES TAX DEFERRED WAGES DEDUCTIONS AEIC NET PAY	Current Year to Date		22. Roth data		
TYPE HOUR: REGULAR PAY	S/DAYS AMOUNT TY PO	CURRENT EAF PE H ST ALLOW	OURS/DAYS AM	OUNT TYPE HOUR	S/DAYS AMOUNT
TYPE CODE FEGLI CO OANDI CO FROTHERAL FOTHERD	CURRENT	DEDUCTIC YEAR TODATE TYP MEC RET: TSP	DNS E CO DICARE CO DICARE KE SAVINGS	DDE CURRENT	YEAR TO DATE

#### **STEP FIVE**

A. Once you've paid off your Military Buy Back, you will receive a letter from DFAS (*sample letter below*).

#### Paid in Full Letter



DEFENSE FINANCE AND ACCOUNTING SERVICE Indianapolis 8899 E. 56TH ST INDIANAPOLIS INDIANA 46249-6200

10/12/2017

#### MEMORANDUM FOR Your Name

SUBJECT: Notice of Military Service Deposit Payment Completion Employee Identification Number: 123456789 Service Period(s): 07/12/2005 - 06/30/2014 8 Years, 11 Months, 19 Days

Your payment for military service deposit has been received and processed by our office. Our records indicate that your deposit was paid in full on 10/4/2017. Please submit a copy of this letter to your Human Resources Office for filing into your Official Personnel File (OFF).

If additional assistance is needed, please contact our Customer Service desk at 800-729-3277 or FAX 866-401-5849 or mail your correspondence to:

DFAS Indianapolis Civilian Payroll 8899 East 56th Street Indianapolis, Indiana 46249-1900

SincereIy.

Todd Cress

Todd Cress Branch Chief ADS, TSP and Retirements

E. Submit the Paid in Full Letter from DFAS through myFSS. Search: "Creditable Military Service and Post-56 Military Service Deposits." Read the article carefully then click on "Create a Request," when ready.

F. Once you click "Create a Request," click on the small box to agree, and use the arrow to find "Civilian Retirement." Then click NEXT (like the image below).

DO NOT PROCEED UNLESS YOU HAVE READ THE KNOWLEDGE ARTICLE(S) AND HAVE THE REQUIRED DOCUMENT(S) FOR YOUR REQUEST.

✔ I have read the Knowledge Article(s) and have the document(s) if required.

Please select the type of Personal Benefits request you would like to make.

#### \* Request Type Civilian Retirement

Emails for this request will get sent to the following email addresses: maryanne.cobarrubia.1@us.af.mil maryanne.cobarrubia.1@us.af.mil To modify this list, please click on your Profile picture above, click "Profile," and update your email addresses.

### G. Benefit Type: select Civilian/Military Deposit, then NEXT.



H. Benefits SubType: select Proof of Full Payment of Military Deposit, then NEXT.



I. Provide comment/questions for your request, click NEXT, and attach Paid in Full Letter. Then click NEXT.

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J. Check your messages in myFSS sporadically to see if they responded with any updates or if you need to send them more documents.



G. Once your ticket is closed. Check to see if your Paid in Full Letter was uploaded in your eOPF by logging into <u>https://eopf.opm.gov/usaf/Login.aspx</u> SAVE a copy for your records.

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For	n Number	Effective Date	Form Description		Туре		
	<u>SF 50</u>	06/16/2024	NOTIFICATION OF F	PERSONNEL ACTION	REG WRI		
	<u>SF 52</u>	06/16/2024	REQUEST FOR PERS	ONNEL ACTION	REG WRI		
	<u>SF 50</u>	06/02/2024	NOTIFICATION OF P	ERSONNEL ACTION	INDIVIDUAL	TIME-OFE AWARD	
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	<u>SF 52</u>	06/02/2024	REQUEST FOR PERS	ONNEL ACTION	INDIVIDUAL	TIME-OFF AWARD	
	<u>SF 52</u> <u>SF 50</u>	06/02/2024 06/01/2024	REQUEST FOR PERS	ONNEL ACTION PERSONNEL ACTION		TIME-OFF AWARD	
	<u>SF 52</u> <u>SF 50</u> <u>SF 52</u>	06/02/2024 06/01/2024 06/01/2024	REQUEST FOR PERS NOTIFICATION OF F REQUEST FOR PERS	ONNEL ACTION PERSONNEL ACTION ONNEL ACTION		. TIME-OFF AWARD . CASH AWARD RB . CASH AWARD RB	
	SF 52 SF 50 SF 52 DG 66	06/02/2024 06/01/2024 06/01/2024 02/24/2024	REQUEST FOR PERS NOTIFICATION OF P REQUEST FOR PERS NOTICE AND COMP SERVICE DEPOSIT P	ONNEL ACTION PERSONNEL ACTION ONNEL ACTION PLETION OF MILITARY AYMENTS	INDIVIDUAL INDIVIDUAL INDIVIDUAL BENEFITS	. TIME-OFF AWARD . CASH AWARD RB . CASH AWARD RB	

Congratulations on Buying Back your Military time!