PLAN B
Parochial Employees’ Retirement System
Of Louisiana
P O Box 14619
Baton Rouge, Louisiana 70898-4619

2020
Quarterly Report of Earnings and Contributions

DEFERRED RETIREMENT OPTION PLAN

1. Full Name of Parish or Board and Address

________________________________________

2. Date Quarter Ended____________________

3. Total Number of Employees Reported___________

4. Number of Pages Attached__________________

Report Summary and Certification

1. Total Earnings (total of All Pages – Column 3) $________________________

2. 7.50% of Total Earnings – Employer Contributions (Col. 4) $________________________

3. Total of Line 2 [Check(s) Enclosed] $________________________

I hereby certify that the information shown hereon is true and correct to the best of my knowledge. I further certify that all individuals reported are employees of the entity submitting this form and that all meet the requirements to participate in PERS as full time permanent employees.

(Signature)____________________________________
Secretary-Treasurer or Designated Authority

Date

Note: Contributions for each quarter are due by the 15th of the month following the quarter end. For example, the due date for the first quarter is April 15. In accordance with R.S. 11:2014 (C) payments received after the due date are subject to a penalty.
<table>
<thead>
<tr>
<th>Column 1</th>
<th>Column 2</th>
<th>Column 3</th>
<th>Column 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Security Number</td>
<td>Name of Employee</td>
<td>Total Earnings for Quarter</td>
<td>Employer Contributions @ 7.50%</td>
</tr>
</tbody>
</table>

**TOTAL FOR THIS PAGE**

$  

PLEASE CONFIRM THAT THE ENDING TOTALS ON THE EMPLOYEE LISTINGS CORRESPOND WITH THE TOTALS SHOWN ON THE COVER PAGE.