

Public Employees' Retirement System of Nevada

693 W. Nye Lane, Carson City, NV 89703 (775) 687-4200 Fax (775) 687-5131
 5820 S. Eastern Ave. Suite 220, Las Vegas, NV 89119 (702) 486-3900 Fax (702) 678-6934
 7455 W. Washington Ave. Suite 150, Las Vegas, NV 89128 (702) 486-3900 Fax (702) 304-0697
 Toll Free 1-866-473-7768 Website www.nvpers.org

2015 Contribution Rate Change Certification

Agency Name: **Nevada State Board of Optometry**
 Agency Number: **188**
 Contribution Report Affected By New Rate: **August-15**
 Employer-Pay Factor For "In Lieu Of" **1.144837**
 Employer-Pay Factor For "Salary Reduction" **1.144982**

INSTRUCTIONS

NRS 286.421(3) requires each employee to cost share 50% in the contribution rate, including contribution rate increases, through one of two methods: (1) in lieu of equivalent basic salary increases or cost of living increases; or (2) by reduction of salary.

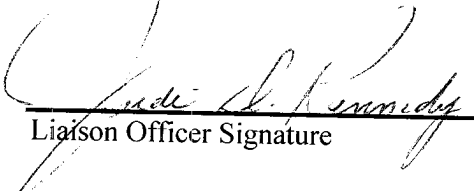
- A. In the box below, place an "L" in the space next to each employee group that paid the employee portion of the contribution rate increase "In Lieu Of" a promised pay increase effective July 1, 2015. If this method is selected, you must increase your Employee/Employer compensation schedule using the following calculation:

$$\text{Current Employee/Employer Wage} = \$3,000.00 \times 1.01125 \text{ (One half of the increase in the Employer-Paid Rate)} = \$3,033.75 \text{ (Adjusted Employee/Employer Wage)}$$

- B. In the box below, place an "R" in the space next to each employee group that paid the employee portion of the contribution rate increase by a salary reduction effective July 1, 2015.

Employee Group*	Indicate "L" or "R"
1. R	L
2.	
3.	
4.	
5.	
6.	

*Employee Group represents Regular & Police/Fire Members


 Liaison Officer Signature

May 20th, 2015
 Date

RECEIVED

MAY 22 2015

PERS OF NEVADA