

7576 - R47A
ILLINOIS MUNICIPAL RETIREMENT FUND
100 South Wacker Drive, Chicago, Illinois 60606

LEAVE OF ABSENCE AUTHORIZATION

In the event of disability or death while on authorized leave of absence, the applicant shall be eligible for the benefits of those programs only if this authorization has been properly completed and filed with the Illinois Municipal Retirement Fund.

(See instructions on reverse side)

Member Name Richard Corwin Legue	Social Security Number [REDACTED]
Member Address 1006 S. Lynn St., Urbana, Il. 61801	Present Position Director of Urbana Civic Center
Employer Name City of Urbana	Employer Number 3394

Certification by Member

I certify that I will be (or have been) on leave of absence from January 15, 1976
to April 12, 1976. I understand that service credits (not more than 12 months) for this
leave cannot be established until I have paid, to IMRF, employee contributions in an amount equal to contributions I would have made if actively employed during the period of leave, plus interest.

4/19/76
Date

Richard C. Legue
Signature of Member

Certification by Authorized Agent

I certify that (1) I have calculated the estimated employer cost of the above member's leave, (2) I have advised the governing body of such cost and (3) I understand that payment will be made through future monthly contributions.

1	Monthly Rate of Earnings of Member	\$877.08
2	Length of Leave (in months) (Not over 12 months)	3 months
3	Total Earnings Not Paid During Leave (line 1 times line 2)	\$2,631.24
4	Employer Contribution Rate in Current Year	14.10%
5	Social Security Tax Rate in Current Year	5.95%
6	Employer Contribution Rate to IMRF (line 4 less line 5)	8.15%
7	Estimated Cost of this Leave to Employer (line 3 times line 6)	\$214.45

April 19, 1976
Date

Duane E. Eubank
Signature of Authorized Agent

Certification by Clerk or Secretary of Governing Body

I certify that at a regular or special meeting held on April 19, 1976
the City Council of City of Urbana
approved the leave of absence stated herein and the estimated employer cost as herein determined.

April 19, 1976
Date

Clerk or Secretary

Duane E. Eubank
Signature