## **Supplemental Semiannual Headcount Report**

Form Approved OMB No. 3206-0262

1. Address of Payroll Office (including location and zip code)	ng department, bureau,	2. Payroll Office Number	3. Report Number			
		4. Date Payroll Paid				
		5. Pay Period				
		From	То			
6. To		7. Name of Preparer (print)	8. Telephone Number			
Office of Personnel Management						
ATTN: Funds Management		9. I certify that the items listed herein are correct.				
P.O. Box 582		Signature of authorized official	Date			
Washington, D.C. 20044-0582						
		Number Enrolled				
Benefit Category	Dollar Amount	Deductions Made	No Deductions Made			
A. Life Insurance						
1. Basic						
2. Standard - Option A						
3. Additional - Option B						
a. To age 35						
b. 35-39						
c. 40-44						
d. 45-49						
e. 50-54						
f. 55-59						
g. 60 & up						
4. Family - Option C						
5. Post-Retirement - Basic						
6. Total Life Insurance *						
B. Health Benefits						
1. Regular						
2. Payers of Full Premiums						
3 Total Health Renefits *						

## **Public Burden Statement**

We estimate this form takes an average of 30 minutes to complete, including the time for reviewing instructions, getting the needed data, and reviewing the completed form. Send comments regarding our time estimate or any other aspect of this form, including suggestions for reducing completing time, to the Office of Personnel Management, Funds Management, P.O. Box 582, Washington, DC 20044. The OMB Number 3206-0262 is currently valid. OPM may not collect this information, and you are not required to respond, unless this number is displayed.

<sup>\*</sup> Dollar amounts must agree with SF 2812 for same reporting period.

## **Supplemental Semiannual Headcount Report**

Payroll Office Number		Report Number		Payroll Paid Date			
		-					
Benefit Category		Dollar Amount Aggregate Base Salary		Number Enrolled			
C. Retirement							
1. CSRS	CPDF			Deductions Made	No Deductions Made		
	Code		T				
a. Regular Withholdings	1,R						
b. Regular Contributions	1,R						
c. Special Withholdings	6,T						
d. Special Contributions	6,T						
e. Regular Withholdings for Offset Employees	С						
f. Regular Contributions for Offset Employees	С						
g. Special Withholdings	<u> </u>						
for Offset Employees	Е						
h. Special Contributions							
for Offset Employees	E				**		
i. Salary Offset					**		
j. Military Deposits				**			
k. Civilian Service Credit				**			
2. FERS							
a. Regular Withholdings	K						
b. Regular Contributions	K						
c. Reserve Technicians							
Withholdings d. Reserve Technicians	N						
Contributions	N						
e. A/T Controllers							
Withholdings	L						
f. A/T Controllers							
Contributions	L						
g. Law Enforcement/Fire-							
fighters Withholdings	М						
h. Law Enforcement/Fire- fighters Contributions	М						
i. Salary Offset	141				**		
i. Galary Onset							
J.				**			
k. Military Deposits							

<sup>\*</sup> Dollar amounts must agree with SF 2812 for same reporting period.

<sup>\*\*</sup> Memo entry only (do not include on line 4, Total Retirement).

## **Supplemental Semiannual Headcount Report**

Payroll Office Number		Report Number		Payroll Paid Date			
					·		
Benefit Category		Dollar Amount	Aggregate Base Salary	Number Enrolled			
C. Retirement - Continued							
3. FERS-RAE	CPDF			Deductions Made	No Deductions Made		
	Code		T				
a. Regular Withholdings-RAE	KR						
b. Regular Contributions-RAE	KR						
c. Reserve Technicians							
Withholdings-RAE	NR						
d. Reserve Technicians Contributions-RAE	NR						
e. A/T Controllers	1411						
Withholdings-RAE	LR						
f. A/T Controllers							
Contributions-RAE	LR						
g. Law Enforcement/Fire- fighters Withholdings-RAE	MR,OR						
h. Law Enforcement/Fire-	,						
fighters Contributions-RAE	MR,OR				**		
i. Salary Offset-RAE					**		
j.							
k. Military Deposits-RAE				**			
4. FERS-FRAE							
a. Regular Withholdings-FRAE	KF						
b. Regular Contributions-FRAE	KF						
c. Reserve Technicians							
Withholdings-FRAE	NF						
d. Reserve Technicians	NE						
Contributions-FRAE e. A/T Controllers	NF						
Withholdings-FRAE	LF						
f. A/T Controllers							
Contributions-FRAE	LF						
g. Law Enforcement/Fire- fighters Withholdings-FRAE	MF,OF						
h. Law Enforcement/Fire-	15.17 , 515						
fighters Contributions-FRAE	MF,OF						
i. Salary Offset-FRAE					**		
j.							
k. Military Deposits-FRAE				**			
5. Total Retirement*							
D. Grand Total (Dollars only)							
E. Total Employees (and/or Annuitants) on Payroll							

 $<sup>^{\</sup>star}$  Dollar amounts must agree with SF 2812 for same reporting period.

<sup>\*\*</sup> Memo entry only (do not include on line 5, Total Retirement).