



OKLAHOMA POLICE PENSION AND RETIREMENT SYSTEM

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### NOTICE OF PAID BASE SALARY INCREASES FOR ACTIVE POLICE OFFICERS

The Western District Federal Court of Oklahoma, Case #C1V 2821, has ruled that some retired police officers may be eligible for cost of living adjustments (COLA). The COLA to the retirees is based on the following criteria:

- If a member was retired or vested on or before December 31, 1980, then the member is eligible for one half (1/2) of the salary increase given to the highest paid patrol officer of the retirant's municipality.
- If a member was retired or vested on or before May 26, 1983, then the member is eligible for one-third (1/3) of the salary increase given to the highest paid patrol officer of the retirant's municipality.
- If a member completes twenty (20) years of credited service on or after May 27, 1983, then the member is not eligible for a COLA benefit.

In order for the Oklahoma Police Pension and Retirement System to comply with the court order we must receive notification of salary increases given to active police officers.

Please provide the **annual** paid base salary increase that was given to your highest paid patrol officer. The amount of this increase must be based on base salary. **Paid base salary shall include longevity, educational allowance, and normal compensation paid on a regularly scheduled pay period of which said pay period shall include holidays, annual leave and sick leave. Paid base salary shall not include overtime, payment for accumulated sick and annual leave, uniform allowance, or any other compensation for reimbursement of out-of-pocket expenses.**

Effective Date \_\_\_\_\_

Annual paid base salary after increase \_\_\_\_\_

Annual paid base salary before increase \_\_\_\_\_

Total annual paid base salary increase \_\_\_\_\_

Name of highest paid patrol officer used for increase \_\_\_\_\_

Rank of officer used for increase \_\_\_\_\_

I certify the above information relating to paid base salary increases is true and correct to the best of my knowledge.

Authorized City Signature \_\_\_\_\_

Position/Title \_\_\_\_\_

City \_\_\_\_\_ City Code \_\_\_\_\_ Date \_\_\_\_\_

**Note:** In addition to active members, please remember to send applicable contributions for any retroactive raise paid to terminated, retired, or deferred option plan members. A breakout by pay period may be needed for these individuals.