U.S. Department of State

ALLOTMENT OF PAY/PRIOR SERVICE CREDIT (FOREIGN SERVICE EMPLOYEES)
APPLICATION AND AUTHORIZATION TO MAKE, CHANGE, OR DISCONTINUE

1. U.S. Department or Agency	2. Bureau or Service	3. Retirement System
		☐ FSR ☐ FSPS ☐ Other

4. Name of Allotter *(Last, First, MI.)*	5. Employee or Social Security Number

6. Duty Station	*(City)*	*(Country)*

7. NATURE OF ACTION REQUESTED

☐ FS Prior Service Credit   ☐ Allotment of Pay   ☐ Emergency Evacuation Allotment

If FS Prior Service Credit box is selected: use **"977770000003" as the Routing/EIN number, and "__X8186.3"** as the account number below.

Allotment Each Pay Period	From:	To:

Type of Depositor Account   ☐ Checking   ☐ Saving

Name and Address of Financial Institution	Routing/EIN Number
	Depositor Account Number

8. AUTHORIZATION BY ALLOTTER

I hereby request and authorize a regular allotment to be ☐ made, ☐ changed, ☐ discontinued, subject to approval, to be effective as indicated above, until altered by me in writing; or, an emergency evacuation allotment to be effective when countersigned by me, or if absent from the Post at time of evacuation, by the Post Administrative Officer; and I hereby release whatever claim to payment of salary I would otherwise have for the amount of this allotment and I also relinquish all right, privilege, and power to make a further allotment presented by this allotment, once the United States has issued a check payable to the allottee for this allotment.

A. Signature of Allotter in Full *(Sign Original Only)*	Date *(mm-dd-yyyy)*

B. Countersigned *(Allotter - Administrative Officer)*	Date *(mm-dd-yyyy)*

9. ADMINISTRATIVE ACTION

Appropriation	Date *(mm-dd-yyyy)*

10. APPROVED, RECORDED, AND FORWARDED

A. Title of Officer Responsible for Preparation of Payroll	B. Signature of Officer Responsible for Preparation of Payroll *(Type Name and Sign all Copies)*

WARNING: Disclose to Authorized Persons Only (22 CFR 171.32J(4)) Contains Information Protected by the PRIVACY ACT OF 1974