TRANSFER OF ASSETS VOUCHER
(To be used to transfer employer assets to cover member contributions)

2003/2004 FISCAL YEAR
(To be used for payroll periods ending on dates
July 1, 2003 through June 30, 2004)

This voucher is to be used to authorize CalPERS to transfer the amount indicated below from employer assets of the employer/rate plan identified on this voucher to the member accumulated contribution accounts per the attached report of contributions.

Employer Code: 1999
Employer Name: TOWN OF ANYWHERE
Rate Plan: MISCELLANEOUS PLAN

I hereby certify that I am the duly appointed, qualified, and acting officer of the herein named employer, and that I authorize CalPERS to transfer employer assets to member accumulated contributions by CalPERS coverage group(s) and service period in the amount(s) as indicated.

Signature ___________ John Doe__________________________

Service Period ___07/2003/0________________________________

Coverage Group___70001__________ Amount $___700_______
Coverage Group__70002_______  Amount $___70______
Coverage Group_______________  Amount $____________
Coverage Group_______________  Amount $____________

(YOU MAY ONLY USE THIS FORM FOR COVERAGE GROUPS IN MISCELLANEOUS PLAN).
STATE OF CALIFORNIA
PUBLIC EMPLOYEES RETIREMENT SYSTEM
400 P STREET, P.O. BOX 1982, SACRAMENTO, CA 95809-1982

SUMMARY REPORT
MEMBER AND EMPLOYER CONTRIBUTIONS

FOR INSTRUCTIONS ON COMPLETING THIS FORM, REFER TO THE MATERIAL ON THE SUMMARY REPORT FOUND IN THE PAYROLL REPORTING SECTION OF THE PROCEDURES MANUAL (PERS-ADM-DO-430)

EMPLOYER CODE: 1999
EMPLOYER NAME: TOWN OF ANYWHERE
OFFICE CODE: 07 07 07

EMPLOYER CONTRIBUTIONS

<table>
<thead>
<tr>
<th>COVERAGE GRP.</th>
<th>EMPLOYER RATE</th>
<th>MEMBER EARNINGS</th>
<th>EMPLOYER CONTRIBUTIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>70001</td>
<td>0.000%</td>
<td>$1,000.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>70002</td>
<td>0.000%</td>
<td>$100.00</td>
<td>$0.00</td>
</tr>
</tbody>
</table>

7. NORMAL: $70.00
8. TAX DEFERRED: $700.00
9. ADDITIONAL: $0.00
10. SUB-TOTAL (7+8+9): $770.00
11. SURVIVOR BENEFIT: $0.00
12. TOTAL MEMBER CONTRIBUTIONS: $770.00

5. TOTAL MEMBER EARNINGS: $1,100.00
6. TOTAL EMPLOYER CONTRIBUTIONS: $0.00

13. TOTAL MEMBER AND EMPLOYER CONTRIBUTIONS: $770.00

ADJUSTMENTS:
14.A SURPLUS ASSET: MISCELLANEOUS CATEGORY
14.B SURPLUS ASSET: SAFETY CATEGORY
14.C ACC-344/ACC-1520
ATTACH ADJUSTMENT NOTICES TO SUPPORT AMOUNT SHOWN
NOTE: Do not enter corrections of member earnings and contributions made on Payroll Listing.

15. ADVANCE PAYMENT/EFT
PREPARE ONE CHECK OR WARRANT PAYABLE TO THE PUBLIC EMPLOYEES' RETIREMENT SYSTEM

16. BALANCE DUE

FOR PERS USE ONLY

Control No. and Business Month 100% Change Audited Remittance Amount $ Date Paid

PERS-AESD-626 (1/99) WHITE AND GREEN COPIES TO SYSTEM, RETAIN PINK FOR YOUR FILES.