



LOUISIANA SCHOOL EMPLOYEES'  
RETIREMENT SYSTEM

Date: July 31, 2019  
To: Superintendents of All Schools Covered by LSERS  
From: Charles P. Bujol, Executive Director *CPB*  
Subject: LSERS Annual Privatization Questionnaire

As you begin the new school year, changes in employment within your school system can affect the contributions your system must make to LSERS.

In 2008, the legislature enacted La. R.S. 11:1195.2. That law provides that if your school system eliminates an LSERS position through privatizing, outsourcing, contracting the service with a private employer, or any other means, then your system must pay the Unfunded Accrued Liability (UAL) attributable to the position your system eliminated.

To ensure your compliance with the provisions of La. R.S. 11:1195.2, please complete *each question* below, sign, date, and return this form by email to [ljordan@lsers.net](mailto:ljordan@lsers.net) or by fax **on or before October 1, 2019**.

1. Have any positions that contributed to LSERS in the 2018-19 school year been eliminated or abolished?  
 YES  NO
2. If you answered "YES" to question # 1, were the maintenance, custodial, or transportation services privatized, outsourced, or contracted with a private employer?  
 YES  NO
3. Did your school system privatize, outsource, or contract with a private employer for maintenance, custodial, or transportation services during 2018-19 school year for positions that had been eliminated or abolished due to budget cuts or reduction in force in previous years?  
 YES  NO

If you answered "YES" to question 2 or 3, please provide, on a separate sheet, the following information on each LSERS member whose position was eliminated: (1) member name, (2) date of birth, (3) annual salary when the position was eliminated, and (4) date the position was eliminated.

Visit our newly implemented online **Privatization Cost Estimate Calculator** via your employer access to generate an estimate of the UAL cost if your school system anticipates privatizing, outsourcing, or contracting with a private employer for maintenance, custodial, or transportation services.

**I certify that the information submitted above is true and correct to the best of my knowledge.**

Superintendent's Name: \_\_\_\_\_ Signature: \_\_\_\_\_

School System: \_\_\_\_\_ Date: \_\_\_\_\_

Thank you for your assistance. Please contact our office if you have questions or need additional information.

CPB/l tj