

TRANSFERS (From Outside Dept of the Army)

NAME	TYPE OF APPT
LOCATION	EFFECTIVE DATE

Request you download and print the forms, complete the information and bring with you on your first day of duty.

	SF 61	APPOINTMENT AFFIDAVITS – Must be executed the 1 st day the appointee enters on duty.
	OF 306	DECLARATION FOR FEDERAL EMPLOYMENT – Must be executed the 1 st day the appointee enters on duty. Send a copy to CPAC
	ABC IVRS *	HEALTH BENEFITS ELECTION – (if applicable) Employee in a Health Maintenance Organization (HMO) moves or becomes employed outside the geographic area from which the carrier accepts enrollments, or moves or becomes employed further from this area. Transfer from a post of duty outside the United States. Must be completed within 60 days of the effective date.
	SF 181	RACE & NATIONAL ORIGIN IDENTIFICATION
	SF 256	SELF-IDENTIFICATION OF HANDICAP
	SWCPOC 007	EDUCATION INFORMATION SHEET
	SWCPOC 005	CERTIFICATION OF SELECTIVE SERVICE REGISTRATION (MALES DOB AFTER 12/31/59)
	SWCPOC CFD FORM 050	ARMED FORCES RESERVE OR NATIONAL GUARD STATUS

FORWARD TO DISTRICT/DIVISION CUSTOMER SERVICE REPRESENTATIVE

	SF 1199A	DIRECT DEPOSIT SIGN UP FORM (fwd to CSR)
	FORM W-4	EMPLOYEE'S WITHHOLDING ALLOWANCE CERTIFICATE (fwd to CSR)

**BENEFITS INFORMATION CAN BE OBTAINED ONLINE AT <https://www.abc.army.mil>
<http://www.opm.gov/insure>**

*** TO MAKE HEALTH BENEFITS ELECTION CALL ARMY BENEFITS CENTER (ABC) INTERACTIVE VOICE RESPONSE SYSTEM (IVRS) AT (877) 276-9287, OR GO TO THE ABC WEBSITE AT: [HTTPS://WWW.ABC.ARMY.MIL](https://www.abc.army.mil). TSP-19-Transfer of Information Between Agencies, to include catch-up contributions.**

(NOTE: ALL FORMS LISTED ABOVE HAVE BEEN HYPERLINKED FOR YOUR CONVENIENCE.)

IMPORTANT INFORMATION: Bring completed forms to the person who will conduct your in-processing for employment. Afterwards it should be mailed by that person to: SW Processing Center; ATTN: PD BR2-SWD; 301 Marshall Avenue; Fort Riley, KS 66442-5004.

IVRS MENU

Call 1-877-276-9287 (Army Center)					
Press	2	B&E			
	1	Curr Emp			
Enter: SSN & PIN** Enter/Verify Phone #			FEHB	Retirement	TSP
MAIN MENU Press 1 FEHB 2 Retirement 3 TSP 4 FEGLI 5 Benefit News 6 Request Faxed Documents 9 Exit			1 General FEHB 2 Personal FEHB 3 New Employee Coverage 4 Self & Family to Self Only w/o Changing Health Plans 5 Open Season Election 6 Cancel FEHB 7 Non-Open Season Change 8 Faxed Copy of SF 2809 0 Transfer to a Benefits Counselor 9 Return to the Previous Menu	1 General Retirement 2 Personal Retirement Info 3 Retirement Estimate 0 Transfer to a Benefits Counselor 9 Return to the Previous Menu	1 Personal TSP 2 Enroll/change during TSP Open Season 3 New Employee Election 4 Stop Contributions 0 Transfer to a Benefits Counselor 9 Return to the Previous Menu
**If this is your first time using the system and you have not created PINs via the web, your PIN will be 4-digits (month/year of your date of birth), i.e., Oct 56 will be 1056.			FEGLI		
			1 General FEGLI 2 Personal FEGLI 3 Elect New Employee FEGLI 4 Non-Open Season Election/Change/Term 5 Open Season Election 0 Transfer to a Benefits Counselor 9 Return to the Previous Menu		