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**CERTIFICATION OF
NATURE OF TERMINATION
RETIREMENT PRIOR TO AGE 59½
OR NORMAL RETIREMENT AGE**

By signing this form, I certify that the information below is correct, I have read and understand the information provided by MainePERS regarding retiring and returning to work (Form H0036), and I will immediately notify any MainePERS employer who employs me in the future that I am a MainePERS retiree.

Please check the appropriate box:

- Prior to my retirement, I had an explicit understanding or agreement with my employer that I would return to work there after retirement.

- Prior to my retirement, I did not have an explicit understanding or agreement with my employer that I would return to work there after retirement.

Signature: _____

Date: _____

Printed Name: _____

Email Address: _____

Daytime Phone Number: _____