

CERTIFICATION OF BONA FIDE TERMINATION

I, the undersigned, hereby certify to the Maine Public Employees Retirement System that, prior to the date of my termination from employment, I did not discuss or agree in any way to future employment with my employer or with a "same employer" as that term is defined in MainePERS Rule Chapter 410. I acknowledge that I have read and understand information provided by MainePERS regarding retiring and returning to work.

I understand that I cannot begin to receive service retirement benefits until I execute this Certification which is required because I am currently below normal retirement age. I also understand that I cannot return to employment with a "same employer" until my retirement has become effective.

I also acknowledge and agree that, in the event I do return to work with a "same employer" in the future, I will immediately advise my new employer that I am a MainePERS retiree.

| Standard | Early Retirees |
|---|--|
| Required to terminate employment | Yes |
| May discuss return to work prior to retiring | No |
| Can go back to work | Later of 30 days after termination or retirement date |
| Limit on time worked (school or calendar) | Yes 90 Days/Year |
| Limit on earnings | No |
| Restriction on type of position | No |
| Contribute to MainePERS | No |
| Earn service credit | No |
| Repayment of any disallowed retirement benefits | Repaid through a deduction in the monthly benefit over the retiree's expected lifetime |



Before signing, please read and understand all information on handout.

Signature: _____ Date: _____

Social Security Number: _____