MainePERS
PUBLIC EMPLOYEES RETIREMENT SYSTEM

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CERTIFICATION OF NATURE OF TERMINATION

To be completed by those retiring before age 59½.

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.

1. 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.

2. I decided to retire because of an incentive provided by my employer:

❒ Yes, my employer offered a retirement incentive that influenced my decision to retire.

❒ No, my employer did not offer me a retirement incentive.

Signature: _____ Date: _____

Printed Name: _____

Email Address: _____

Daytime Phone Number: _____