



State of New Jersey • Department of the Treasury

DIVISION OF PENSIONS & BENEFITS — EXTERNAL AUDIT SECTION

P.O. Box 295, Trenton, NJ 08625-0295

EMPLOYER CERTIFICATION FOR TERMINATED RETIREES PURSUANT TO EXECUTIVE ORDER NO. 115

This form is to be completed by the employer when terminating a retired public employee who was hired pursuant to Executive Order No. 115.

REEMPLOYMENT INFORMATION					
Employer Name			County		
Lo	cation Number	Bureau Number	Payroll Number _	State Only	
Na	me of Retiree/Employee		Date of Birth		
Re	etirement or Former Membershi	p Number	Date of Retirement _		
Titl	le/Position Held				
Re	ehire Date (or increase in numbe	r of hours from part-time to full-time) du	e to COVID-19 emergency		
ΕN	IPLOYER CERTIFICATION				
		fered temporary employment for the confirmed and certify the following:	duration of the COVID-19 er	mergency pursuant to	
1.	The retiree and this employer did not engage in any pre-planning for this return to employment prior to the COVID-19 emergency. \square Yes \square No				
2.	The retiree met a 30-day break-in-service from the date of retirement or Board approval, whichever is later, and is therefore considered a bona fide retiree. \Box Yes \Box No				
3.	This employer is the retiree's former employing location. \square Yes \square No				
	If Yes: Did the retiree return to employment within 180 days of the retirement date pursuant to Executive Order No.115 ☐ Yes ☐ No				
4.	Indicated below are the detail	led work hours of the retiree during th	is temporary reemployment.		
5.	ive Friday, June 4, 2021, and t 53:5A-28) will be applied to retir in a position covered by the retir does not terminate covered em retirement canceled and may I	that P.L. 2021, c. 103 (Chapter 103) has herefore, the NJDPB's "Retiree Reenro rees who were reemployed under Executement system and continue to receive a reployment, or fails to provide certification on subject to reenrollment into the retire curate and that I am subject to prosec	Ilment" provisions (N.J.S.A. 43: ive Order No. 115. Retirees may etirement benefit. Accordingly, a of termination, on or before Augustement system. I certify that the	15A-57.2; 43:16A-15.3 no longer be employed reemployed retiree who st 1, 2021, will have their foregoing statements	
	I certify that the employee ha	s terminated employment effective	/pursuan	t to Chapter 103.	
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Print Certifying Officer Name		Signature		Date	
		Ext			
Re	turn this completed form to:	New Jersey Division of Pens	ions & Benefits		

You may also scan your completed forms and email with the subject line "RTE-External Audit" to pensions.nj@treas.nj.gov

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