



# MUNICIPAL POLICE EMPLOYEES' RETIREMENT SYSTEM

7722 Office Park Boulevard Suite 200 Baton Rouge, Louisiana 70809-7601

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## EMPLOYER CERTIFICATION for REFUND OF ACCUMULATED CONTRIBUTIONS :: LA R.S. 11:2220(C)

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### Member's Information:

FIRST NAME	MIDDLE INITIAL	LAST NAME	TODAY'S DATE	SOCIAL SECURITY NUMBER
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The above-named member has applied for a refund of accumulated employee contributions with this system. Please complete the below information and verify the termination/separation date. **This date should reflect the last day the member was paid through.**

MUNICIPALITY

Chief of Police or Municipal Clerk to complete:

Date of Last Paycheck **from which MPERS contributions were (or will be) withheld**

Date of **separation from full-time employment (last day of full-time employment)**

PRINTED NAME

SIGNATURE

TITLE

**Please provide copy of member's social security card**