MUNICIPAL EMPLOYEES' RETIREMENT SYSTEM
ACTIVE MEMBER STATUS CHANGE

STATUS CODES
T - Terminated
LWOP - Leave without pay
WC - Workman's Compensation

MUNICIPALITY _____

DO NOT INCLUDE TERMINATIONS DUE TO RETIREMENT

Member Name	SSN	Status Code	Effective Date	Return Date if applicable	Reason

PLEASE ATTACH TO MONTHLY CONTRIBUTION REPORT

_____ _____

CLERK OR DESIGNATED AUTHORITY DATE

Revised 8-31-17