

**MUNICIPAL EMPLOYEES' RETIREMENT SYSTEM  
OF LOUISIANA**

Request for Earnings Limit

Date: \_\_\_\_\_

I, \_\_\_\_\_ SS# \_\_\_\_\_ am  
requesting the amount I am allowed to earn should I become employed with the  
municipality of \_\_\_\_\_ without offsetting my monthly retirement  
benefit. Below is my current mailing address and phone number if you should need  
to contact me.

Address: \_\_\_\_\_  
\_\_\_\_\_

Phone #: \_\_\_\_\_

Fax #: \_\_\_\_\_

Sincerely,

\_\_\_\_\_  
Signature

FOR OFFICE USE ONLY

Monthly Allowed Earnings \_\_\_\_\_ for year ending 12-31-20\_\_\_\_

Calculated by: \_\_\_\_\_ Date: \_\_\_\_\_