



State of New Jersey • Department of the Treasury

**DIVISION OF PENSIONS & BENEFITS**

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

**P.L. 1989, c. 198 & P.L. 2005, c. 368  
EMPLOYER VERIFICATION OF LEAVE OF  
ABSENCE FOR UNION REPRESENTATION**

P.L. 1989, c. 198 (Chapter 198) and P.L. 2005, c. 368 (Chapter 368) permit members of the Teachers' Pension and Annuity Fund (TPAF) and the Public Employees' Retirement System (PERS) who are on an approved leave of absence as an elected or appointed officer or representative of a local, county, or State labor organization which represents public employees, to purchase service credit for such service.

In order to properly allow the purchase of the Union Leave, the Division of Pensions & Benefits must verify the employee is on an approved leave of absence. Please provide the information requested below and **return** it to:

New Jersey Division of Pensions & Benefits  
Enrollment & Purchase Bureau  
Employer Verification — Chapters 198 & 368  
P.O. Box 295  
Trenton, New Jersey 08625-0295

**SUBSEQUENT TO THE INITIAL LEAVE VERIFICATION, THIS FORM MUST BE FILED ANNUALLY IN JANUARY FOR EACH PERS EMPLOYEE ON LEAVE FOR UNION REPRESENTATION. THIS FORM MUST BE FILED ANNUALLY IN SEPTEMBER AT THE BEGINNING OF EACH NEW SCHOOL YEAR FOR EACH TPAF EMPLOYEE ON A LEAVE FOR UNION REPRESENTATION.**

Employee Name \_\_\_\_\_  
*LAST FIRST MI*

Title \_\_\_\_\_

Leave of Absence Began \_\_\_\_\_  
*MM / DD / YYYY*

Still on Leave of Absence  Yes  No

Annual Salary \$ \_\_\_\_\_ Effective Date \_\_\_\_\_  
*(Which would have been earned if on active payroll) MM / DD / YYYY*

Tentative Date Leave Expires \_\_\_\_\_  
*MM / DD / YYYY*

Employer Name \_\_\_\_\_

TPAF or PERS Location # \_\_\_\_\_

EMPLOYER CERTIFYING OFFICER SIGNATURE

DATE