CITY OF DELRAY BEACH POLICE OFFICERS' RETIREMENT SYSTEM PROOF OF PREVIOUS GOVERNMENT EMPLOYMENT

For the purposes of purchasing previous government service as outlined in City of Delray Beach Ordinance Section 33.60, proof of previous government employment is requested for the employee below:

Employee's Name:				
Social Security Number:				
Governmental Agency or Branch of Military in which Years were Served:				
Address of Governmental Agency/ Branch of Military:				
Hire Date with that Agency/Military Branch:				
Termination Date with that Agency/ Military Branch:				
Years served were as a: Full-Time Police Officer Full-Time Firefighter Active Service Military Position				
Is this individual receiving a pension benefit from your Agency/Military Branch?	Yes		No	
Is this individual eligible to receive a pension benefit from your Agency/Military Branch for the above service?	Yes		No	
My signature below certifies the above information certifies that I am a duly authorized representative and that I may complete and certify the information agency/military branch.	e of the governmental ag	ency/military b		ced
Name of Governmental Agency/ Branch of Military:				
Address:				
Telephone Number:				
Authorized Signature	Date			
Name (Print)	Title			
Please return completed form to: City of Delra	ay Beach Finance Depa	rtment, Attent	ion: Lisa	

Pursuant to Section 119.071(5), Florida Statutes, your social security number is requested for the purposes of determining eligibility for employment, retirement, pension and insurance benefits, and receipt of Federal and State funded grant programs; performing identification verification and background checks; W-2 and W-9 filling; filling of worker's compensation claims; payment of independent contractors and vendors without a Tax Identification number; payment of EMS transport services; and filling of Paramedic and EMT license renewals. Social security numbers will be used solely for one or more of these purposes.

Castronovo, 100 NW 1st Avenue, Delray Beach, FL 33444