



# CITY OF SALEM MASSACHUSETTS

HUMAN RESOURCES  
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DOMINICK S. PANGALLO  
MAYOR

LISA B. CAMMARATA  
DIRECTOR OF HUMAN RESOURCES

## REQUEST FOR VERIFICATION OF EMPLOYMENT FOR RETIREMENT BUYBACK PURPOSES

For us to provide you with accurate information we must have the **EXACT months, years and departments** in which you worked for the City of Salem. ***Without this information, we cannot locate this payroll information for you. Note: if you participated in the CETA program, please note we do NOT have those payroll records.***

Name: \_\_\_\_\_

Name at time of employment (*if different*): \_\_\_\_\_

Months and years and departments that you worked in for the City of Salem:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Job Title/Position (*if more than one, please be specific to the department and time frames you stated above*): \_\_\_\_\_

Address where information is to be sent:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature and date: \_\_\_\_\_

Email address and phone number: \_\_\_\_\_

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### OFFICE USE ONLY:

Completed by and date: \_\_\_\_\_

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_