

TOWN OF HINGHAM
RETIREMENT BOARD



REDEPOSIT REQUEST

(Redeposit: Previous contributions refunded by a Retirement System)

Name: _____

(Maiden Name) _____

Address: _____

Social Security #: _____

Current Department: _____

Retirement System Refunded from: _____

Dates of Employment: _____

Amount of Refund: _____

Date of Refund: _____

Liability to be accepted by the _____ Retirement Board.

_____ Yrs. _____ Months