**MEMORANDUM**

**To: Bob Lowe, Sara Corello**

**CC: Charan Singh**

**From: Gary Bradley**

**Date:** **{CurrentDate}**

**Re: Local Plan Re-employment**

As previously agreed, a local plan Participant’s re-employment should be reviewed by Plan Counsel on a case-by-case basis.

To this end, please see the data below and advise whether the Pensioner’s local Pension Plan benefit should be suspended or resumed.

|  |  |
| --- | --- |
| Participant ID | {stdMbrParticipantMPID} |
| Local Plan | {Local Plan} |
| Retirement Date | {Retirement Date} |
| Date of Birth | {stdMbrDateOfBirth} |
| Age | {Age} |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Period Beginning Date** | **Period Ending Date** | **Hours** | **Union Name** | **Employer Name** | **Work Location** |
| {tb TblHistory} |  |  |  |  |  |