

**EMERGENCY RETURN TO WORK HOURS**

**Reporting COVID-19 Hours for Retirees reemployed part time to ensure adequate staffing.  
Per Executive Order N-25-20 & N-35-20**

**Employer** \_\_\_\_\_

**Pay Period End Date** \_\_\_\_\_

DEPARTMENT	EMP ID	NAME	JOB TITLE	HIRE DATE	COVID-19 SPECIFIC HOURS WORKED	OTHER HOURS WORKED	TOTAL HOURS WORKED
SHERIFF	123154	Last Name, First Name	Deputy Sheriff II	1/7/2019	10	30	40
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County Departments submit to County HR  
Participaing employers other than the County submit to SJCERA at Contactus@sjcera.org using Emergency Return to Work Hours as the subject line.