



# Retired Firefighters of Washington

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## RFFOW PAYROLL DEDUCTION APPLICATION

**I am a current member who wants to pay dues via payroll deduction**

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

Spouse: \_\_\_\_\_

Address: \_\_\_\_\_

Phone (Home): \_\_\_\_\_ Phone (Cell): \_\_\_\_\_

Email Address: \_\_\_\_\_

How would you like to receive your newsletters? (Circle one):    USPS                      Email                      Both

Retired From (City, Position, Date Retired): \_\_\_\_\_

Pension Plan (Circle one):        LEOFF I                      LEOFF II                      PRIOR ACT

Preferred payment method for annual dues:        **Auto-Deduction**

**DUES PAYMENT: The only option for payroll deduction is a \$5 deduction from your pension check each month.**

- Payroll deduction in the amount of \$60 per year. \$57 goes to RFFOW, \$3 goes to the Legislative Fund.

At my own risk, I authorize DRS to regularly deduct a sufficient amount from my retirement allowance to pay dues/voluntary payment deduction at my request under this program. I hold DRS harmless for any problems the payment causes to occur between the organization and me.

Initials: \_\_\_\_\_ Last 4 Digits of Social Security Number: \_\_\_\_\_

Deductions will continue until:

- (1) I write to the RFFOW and DRS, asking for my deductions to end;
- (2) The deduction plan is terminated.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Once you have completed this form, please sign and mail it, to RFFOW, 9134 207th PI SW, Edmonds WA 98026-6659