

Name (First) _____ (Last) _____

Pension No _____ Social Security No _____

I HEREBY AUTHORIZE THE POLICE AND
FIRE RETIREMENT SYSTEM OF THE
CITY OF DETROIT TO REMIT THE SUM
SPECIFIED FROM MY MONTHLY
RETIREMENT ALLOWANCE TO THE
RETIRED DETROIT POLICE AND FIRE
FIGHTERS ASSOCIATION.

CANCEL DEDUCTION

Deduction Amount **\$3.00**
Association Dues

Deduction Code 00080100

SIGNATURE _____ DATE _____



RS00006176