AUSTIN FIREFIGHTERS' ASSOCIATION
LOCAL 975

WITHHOLDING AUTHORIZATION FOR AFA LOCAL 975 MEMBERSHIP DUES/PAC CONTRIBUTIONS	
NAME	
ADDRESS	
EMAIL ADDRESS	
TELEPHONE NUMBER	

☐ **I authorize and direct the Austin Firefighters Retirement Fund to withhold an amount from my monthly benefits for monthly membership dues to be paid to the Austin Firefighters' Association (Local 975). The membership dues amount will be determined in accordance with the constitution and bylaws of the AFA Local 975 and may change from time to time in accordance with such constitution and bylaws.**

☐ **I authorize and direct the Austin Firefighters Retirement Fund to withhold an additional amount from my monthly benefits as a PAC contribution to be paid to the Austin Firefighters' Association (Local 975) in the amount of:**

$_____.

By signing below, I certify to the Austin Firefighters Retirement Fund (the "Fund") that the information above is true and correct. I authorize and direct the Fund to withhold such amounts from my monthly benefit payments and pay such amounts to the Austin Firefighters' Association (Local 975) accordingly. This authorization will remain in effect until I revoke it. I understand that I have the right to revoke this authorization at any time by notifying the Fund in writing.

_____ _____

Signature Date Signed

Please send completed form to:

Austin Firefighters Retirement Fund
4101 Parkstone Heights Drive, Suite 270, Austin TX 78746
Or email staff@AFRFund.org to request a secure digital submission link.