



Georgia Firefighters' Pension Fund

2171 East View Parkway • Conyers • Georgia • 30013-5756

Phone: 770-388-5757 or 1-866-374-0788 Fax: 678-413-4227

eMail: retirement@gfpf.org

Web Site: <http://www.gfpf.org>

Retiree Direct Deposit

OFFICE USE ONLY

RETIREE INFO: {please print}

Member ID No. _____ OR Social Security No. _____

Last Name _____ First Name _____ Middle Initial _____

Residence Address _____

City _____ State _____ Zip _____

Phone Number _____

I hereby request all Pension Fund benefit payments be deposited in my account number, as shown below, until such time as this authorization is revoked in writing. A voided check from my bank account is attached below, or an officer at my Financial Institution has completed and verified the following information.

Financial Institution: _____

Account Number: _____

Routing Number: _____

Account Type: [select one] Checking Account: _____ Savings Account: _____

**ATTACH HERE A VOIDED CHECK WITH
ROUTING AND ACCOUNT NUMBERS
PRINTED ON BOTTOM**

This authorization is to remain in full force and effect until the FUND has received written notification from me of its termination. Such notification must be received in the office of the FUND by the first day of the month before such termination is desired.

Date

Signature of Retiree