



# Retired Firefighters of Washington

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I am a current member who wants to pay dues via payroll deduction to the:  
**RETIRED FIREFIGHTERS OF WASHINGTON**

NAME: \_\_\_\_\_ SPOUSE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP+4: \_\_\_\_\_

RETIRED FROM: \_\_\_\_\_  
City Position Date Retired

LEOFF I: \_\_\_\_\_ LEOFF II: \_\_\_\_\_ PRIOR ACT: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

PUT ON THE RFFOW EMAIL LIST?: YES \_\_\_\_\_ NO \_\_\_\_\_ RECEIVE NEWSLETTER BY EMAIL ONLY? YES \_\_\_\_\_ NO \_\_\_\_\_ (send in US mail)

HOME PHONE: \_\_\_\_\_ CELL PHONE: \_\_\_\_\_ BIRTHDAY (YEAR OPTIONAL): \_\_\_\_\_

## DUES ARE PAYABLE JANUARY 1 OF EACH YEAR

### DUES PAYMENT OPTIONS:

Following is a list of dues payment options.

Please select one and return to RFFOW in the proper amount to:

9134 - 207th Place SW, Edmonds, WA 98026

- A. Payroll deduction in the amount of \$48 per year. \$45 goes to RFFOW, \$3 goes to the Legislative Fund.

Be sure to include Social Security number below (required by DRS).

- B. Payroll deduction in the amount of \$48 per year. \$45 goes to RFFOW. \$3 goes to a charity of your choice.

Be sure to include Social Security number below (required by DRS).

SSN: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

If the option you have selected includes a charitable donation and you have a specific charity in mind, please write the name and address of that charity in the space below.

Charity name: \_\_\_\_\_

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