

AUTHORIZATION AGREEMENT FOR DIRECT PAYMENT (ACH DEBITS)

I (we) hereby authorize **THE FRATERNAL ORDER OF POLICE, MRCOPA LODGE 5 AND/OR ARIZONA LABOR COUNCIL, INC.** (hereinafter "FOP/ALC") to initiate debit entries to my (our) Checking account indicated below at the financial institution (hereinafter "DEPOSITORY") named below, to debit the sum amount not to exceed **\$35.00 per month, (\$10.00 or \$15.00 FOP dues to Maricopa Lodge 5 and \$20.00 to ALC)** to such account on or between the 15th to the 28th of each month. Transactions will begin the month following the date of this authorization.

This authorization is to remain in full power and in effect until the **FOP/ALC** has received written notification from me (or either one of us) of its termination in such time and in such a manner as to afford the **FOP/ALC** and my (our) **DEPOSITORY** a reasonable opportunity to act on it.

IF YOU DO NOT HAVE A VOIDED CHECK, PLEASE WRITE THE BANK ROUTING NUMBER AND ACCOUNT NUMBER BELOW:

YOUR NAME
1234 MAIN ST.
CHATTANOOGA, TN 37405

1003

DATE _____

PAY TO THE ORDER OF _____ \$ _____

DOLLARS

⋮ 23456789 ⋮000 23456789 ⋮ 234

ROUTING NUMBER ACCOUNT NUMBER

TCF your convenience bank.

John Smith
123 Your Address
Anywhere, USA 95402

101
000-00/000

Date _____

Pay to the Order of _____ \$ _____

Dollars Secure Payments

TCF BANK www.tcfbank.com
Open 7 Days

Memo _____

⋮000000000⋮ ⋮ 234567890⋮

Routing Number Checking Account Number

DEPOSITORY (BANK) NAME: _____ **ACCOUNT TYPE:** SAVINGS CHECKING

ROUTING NUMBER _____ **ACCOUNT NUMBER** _____

NAME: _____
(ACCOUNT HOLDER)

NAME: _____
(ACCOUNT HOLDER)

SIGNATURE: _____

SIGNATURE: _____

DATE: _____
MO DY YR

DATE: _____
MO DY YR

FOR FOP/ALC OFFICE USE ONLY:

RECEIVED BY: _____ DATE: _____

DATA INPUT BY: _____ DATE: _____

START: _____ SPCD: _____



MARICOPA

FOP LODGE 5

The Fraternal Order of Police, Maricopa Lodge 5, offers membership to all law enforcement officials within the Maricopa County. Additionally, officers who have retired in good standing from any law enforcement agency and had prior arrest authority who now live in Arizona are eligible for membership with the *Fraternal Order of Police, Maricopa Lodge 5*.

Our general membership meetings are held on the 4th Tuesday of each month at approximately 1830 Hours at a location announced by the lodge executive board. (Meeting Dates are Subject to Change)

Maricopa Lodge Five Membership Application Instructions:

- **Print and complete the Membership Application.**
 - **Active Law Enforcement Officers are required** to select the FOP ALC Legal Plan Benefit.
 - **Retired Officers**, who no longer work for a law enforcement agency, are **not** required to select the FOP ALC Legal Plan Benefit, however, it is an available option if returning to law enforcement.
- **Fill out the appropriate ACH Debit Form.** The debit form authorizes FOP/ALC to debit your checking account monthly for Active Officer, Active Retired Officer and annually for Retired Officer. Membership dues will be deducted from your bank account between the 15th to the 28th of each month and mid-September for annual deductions.
 - Complete page 1 if you are retired or currently employed by a law enforcement agency.
 - Complete page 2 for **ACH authorization** for FOP/ALC Legal Plan Benefit and/or membership dues.
 - Attach a voided blank check with page 2 (ACH form).
- **Attach a check for your first month's membership dues (NO MONEY ORDERS):**
 - \$35 check for **active officers** – Includes the Legal Plan Benefit – Make Payable to “Maricopa Lodge 5”.
 - \$120 (Annual) check for **retired officers** – That does **NOT** include the Legal Plan Benefit – Make Payable to “Maricopa Lodge 5”.
 - \$360 (Annual) check for **retired officers** – Includes the Legal Plan Benefit – Make Payable to “Maricopa Lodge 5”.

Monthly amount: \$35 – (Active Officers) Maricopa Lodge 5 Membership & the Legal Plan Benefit (ALC)

Monthly amount: \$30 – (Active Retired Officers) Maricopa Lodge 5 Membership & the Legal Plan Benefit (ALC)

Annual Amount: \$120 – (Retired Officers) Maricopa Lodge 5 Membership **Without** the Legal Plan Benefit (ALC)
(Payment Due by September 15th for the following year of membership)

Annual Amount: \$360 – (Retired Officer) Maricopa Lodge 5 Membership **With** the Legal Plan Benefit (ALC)
(Payment Due by September 15th for the following year of membership)

- **Mail the completed application, ACH debit form, the blank voided check and the check for the first Month or Annual membership dues to:**

FRATERNAL ORDER OF POLICE, MARICOPA LODGE No. 5

16551 N. Dysart Rd, Ste 103 Surprise, Arizona 85378 Phone: 480.369.7729

www.MaricopaLodge5.com