



PO Box 8556
 Stockton, CA 95208-0556
 Telephone: (209) 466-8556
 E-mail: rpesjc@sbcglobal.net
 On the Web @ rpesjc.org

Enrollment Form / Authorization for Deduction of Dues

I authorize the **San Joaquin County Employees' Retirement Association (SJCERA)** to deduct **\$2.00** from my retirement warrant, due me on each pay date, and to pay said amount to **Retired Public Employees of San Joaquin County (RPESJC)**. I also authorize **SJCERA** to provide future change-of-address and telephone information to **RPESJC**. This authorization is effective upon receipt by **SJCERA** and until cancelled by me in writing or until I am ineligible for a regular retirement warrant.

| PLEASE PRINT LEGIBLY | | | |
|---|-------|-----------------------------------|--|
| NAME: | First | MI | Last |
| | | | SSN: — — |
| MAILING ADDRESS: | | | TELEPHONE: |
| | | | () -- |
| CITY: | | STATE : | |
| | | | ZIP: |
| SIGNATURE: | | | DATE: |
| X | | | |
| DEPARTMENT YOU RETIRED FROM: | | | |
| | | | |
| BIRTHDATE: | | E-MAIL ADDRESS: | |
| | | | |
| <i>Please check the box to the right if you are enrolling as a qualified beneficiary of a deceased eligible retired County employee per SJCERA.</i> | | | <input type="checkbox"/> |
| NAME OF ELIGIBLE DECEASED EMPLOYEE: | | DEPARTMENT EMPLOYEE RETIRED FROM: | |
| | | | |
| RETIREMENT OFFICE USE ONLY | | | |
| DATE PROCESSED: | | BY: | |
| | | | |

IMPORTANT: If you change your name or address, in addition to notifying the retirement office, ***please notify RPESJC at PO Box 8556, Stockton, CA 95208-0556, or by e-mail at rpesjc@sbcglobal.net.*** This will insure that you continue to receive the **RPESJC** quarterly newsletter, as well as important information about elections and special events. Retain a copy of this form for your records. Thank you, and welcome to **RPESJC!**

Distribution:

Original: RPESJC

Yellow: Retirement Office

Pink: Retiree