## Retired Employee CalPers Warrant Deduction Form

MADE COLD	Support Branch or Display WARRANT DEDUCTION AUTHORIZATION		RIZATION	
			urn To: Historical Society and Museum	
	To support a Branch or Display please fill in the Unit o		fornia Department of Forestry and	Fire Protection
		3800 Sierra Way San Bernardino, CA 92405		
			<u> </u>	: /
LAST NAME	FIRST	M.I.	SSN plus ID NUMBER (found or	n your check)
4 D D D F 6 6				
ADDRESS	(No. & Street)	(City)	(State)	(Zip)
I HEREBY AUTHORIZE THE Cal PERS TO DEDUCT FROM MY RETIREMENT ALLOWANCE THE AMOUNT DESIGNATED				
BELOW FOR MEMEBERSHIP AS A SUPPORTING MEMBER OF THE ABOVE NAMED ORGANIZATION.				
THIS AUTHORIZATION WILL REMAIN IN EFFECT UNTIL CANCELLED BY ME OR BY THE ABOVE NAMED ORGANIZATION				
THIS ACTION 22 TON WILL REMAIN IN ETTECT ON THE CANCELLED BY ME ON BY THE ABOVE NAMED ORGANIZATION				
LAUTUODIZE:	☐\$5.00 PER MONTH	Déan on DER MONTH		
I AUTHORIZE:	□\$5.00 PER MONTH	☐\$10.00 PER MONTH	Other enter Amount: \$ _	
SIGNED:			DATE:	
JAIL.				

If you would like to support the Historical Society and Museum for the California Department of Forestry and Fire Protection (CalFire) and enroll as a regular subscriber via payroll deduction, complete the form above including your full first and last name AND middle initial with EITHER:

- your full SSN

OR

- Cal Pers ID number from your paycheck

and return with an original signature to:

Cal Fire Museum 3800 Sierra Way San Bernardino, CA 92405

Processing takes 10-20 days and deductions will take effect within 1 - 2 pay cycles. If you'd ever like to make an adjustment or unsubscribe from the program, you can notify us directly in writing at the same address. We greatly appreciate your financial contributions and take the security of your personal information seriously. Contribution adjustments cannot be made via telephone, email or electronic communication.

Thank You! admin@calfirehistory.com 909-881-6984