

**CITY OF SAN DIEGO
RETIRED EMPLOYEES' ASSOCIATION**

PAYROLL DEDUCTION AUTHORIZATION

SAN DIEGO CITY EMPLOYEES' RETIREMENT SYSTEM

I, the undersigned retiree of the City of San Diego, having entered into an agreement with the payee: City of San Diego Retired Employees' Association, whereby payments becoming due thereunder are to be deducted from my pension due, or to become due from me as such retiree, do hereby authorize the City Auditor and Comptroller and the City Treasurer to deduct from my pension paycheck such sums as appear on the pension payroll to the credit of said payee and further authorize payment of such deducted sums to the said payee. This authorization applies to any increase or decrease in the amount due to the above payee and is to continue in effect until cancelled by written notice served by the undersigned retiree, (or the Retirement System upon notification of death), or payee, on the City Auditor and Comptroller.

SSN (last 4 digits) ___/___/___/___

Print Name

Signature

Date

(Complete Form Above This Line)

Monthly Deduction
Amount

Effective Date
(1st day of mo.)

City of San Diego Retired Employees' Assoc. _____

Date: Input Review

Initial:

Please mail to: City of S. D. Retired Employees' Association
4185 Galt Street
San Diego, CA 92117