

PEACE OFFICERS' ANNUITY & BENEFIT FUND OF GA

P.O. BOX 56, GRIFFIN, GA 30224
P: 770-228-8461 • F: 770-412-1236
poabf@rfga.us

REFUND REQUEST PROCEDURES

Two items are required to process a refund

1. The Refund Request Form. This form must be completed entirely, signed and notarized.
2. Certification by Employing Agency form. This employment verification form must be completed entirely, signed by an individual with personnel record access (other than yourself) and notarized. If you are still employed with your agency, please write "still employed" in the blank provided for the ending date.

Refunds will be processed upon receipt of all required documents.

(Approximately 7 to 10 business days)

THINGS TO KEEP IN MIND REGARDING A REFUND

1. Once refunded, you are waiving all benefits you may have had in the Peace Officers' Annuity and Benefit Fund of Georgia for yourself and beneficiaries.
2. If you are taking a refund while employed as a peace officer, once refunded, you...
 - a. Forfeit any credit for service earned before the date the Fund issues the refund check.
 - b. Cannot be considered for membership in the Fund again for a period of at least six (6) months.
 - c. If you rejoin, you must have fifteen (15) years of active membership to be vested.
3. If you are taking a refund while NOT employed as a peace officer, once refunded, you...
 - a. May be eligible for active membership in the Fund upon re-employment in an eligible peace officer position (so long as you apply for membership within the first eight (8) months of re-employment) and are granted the option to repay the refund (plus interest) to obtain prior service credit (this time does count toward vesting).
 - b. If you return to active membership in the Fund, you must have fifteen (15) years of active membership to be vested.

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REFUND REQUEST

Member Name: _____ Member #: _____

Mailing Address: _____

Street

City, State and Zip Code

Preferred Phone #: _____ Alternate Phone #: _____

Email Address: _____

By my signature below, I request the return of my contributed dues (as provided in Georgia Code 47-17-83). I understand that I am waiving all benefits I may have had in the Peace Officers' Annuity and Benefit Fund of Georgia for myself and beneficiaries.

I understand that if I am taking this refund while employed in an eligible position for membership, I will forfeit any credit for service earned before the date the Fund issues the refund check. I also realize that I cannot be considered for membership in the Fund again for a period of at least six (6) months. I recognize that if I rejoin, I must have fifteen (15) years of active membership to be vested.

I understand that if I am taking this refund while NOT employed in an eligible position for membership, I may be eligible for active membership in this Fund upon re-employment in an eligible peace officer position. (Georgia Laws require individuals who have been granted a refund to submit their application to rejoin within the first eight (8) months of re-employment.)

Witnessed by: _____
Notary Public

My Commission Expires: _____

SIGNATURE OF MEMBER

For Office Use Only

<input type="checkbox"/> Now Employed as a Peace Officer	Refund Issue Date: _____
<input type="checkbox"/> Not Now Employed as a Peace Officer	