

# PEACE OFFICERS' ANNUITY & BENEFIT FUND OF GA

1208 GREENBELT DRIVE, GRIFFIN, GA 30224

P: 770-228-8461 • F: 770-412-1236

poabf@rfga.us

## REFUND REQUEST for OVERPAYMENT OF DUES

Member Name: \_\_\_\_\_ Member #: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

*Street*

\_\_\_\_\_  
*City, State and Zip Code*

Preferred Phone #: \_\_\_\_\_ Alternate Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

By my signature below, I request for the return of my contributed dues made to the Peace Officer's Annuity and Benefit Fund **over** the required amount to keep my membership current.

Witnessed by: \_\_\_\_\_

Notary Public

My Commission Expires: \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF MEMBER

### **You may submit this request by using the following methods:**

- **Email:** poabf@rfga.us
- **Fax:** 770-412-1236
- **Mail:** 1208 Greenbelt Drive, Griffin, GA 30224

### For Office Use Only

Refund Issue Date: \_\_\_\_\_