



Whittier Police Officers' Association

P.O. BOX 4823 • WHITTIER, CA 90607

Date: _____

City of Whittier
13230 Penn Street
Whittier, CA 90602

I, _____, hereby authorize you to deduct the following membership dues for WPOA membership:

_____ Regular Dues \$140 per month

_____ LEO Web \$6.22 per month

_____ Insurance (add'l AD&D \$ _____/month)

The funds should be deposited with the Whittier Police Officers' Association for dues and insurance. This amount is to begin effective the next pay period.

Sincerely,

Member Signature