

SUPERIOR COURT CLERKS' RETIREMENT FUND OF GEORGIA

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Authorization to Employer for Payroll Deduction

TURN FORM INTO YOUR PAYROLL DEPARTMENT.
DO NOT RETURN FORM BACK TO SCCRf OFFICE.

Several counties offer payroll deduction as a convenience to their employees. If your county is one of these, you should complete the bottom of this form and turn it into your Personnel/Payroll Department to begin deductions from your paycheck.

I hereby authorize and direct deduction from my salary for the payment of monthly dues to Superior Court Clerks' Retirement Fund of Georgia (P.O. Box 56, Griffin, GA 30224). This authorization is to remain in effect as long as I am employed or until cancelled by me in writing.

Employee's Name: _____

SCCRF Member #: _____ SSN: _____

Employer: _____

Employee Signature: _____ Date: _____