

2022 Reporting Form – Due by May 31, 2022

All persons are required to complete and return the properly NOTARIZED form:

Seattle Police Pension Fund
PO Box 94729
Seattle, Washington 98124-4729
Email: policepension@seattle.gov OR Fax: 206-470-6900

****KEEP A COPY FOR YOUR RECORDS****

1. I, _____,
(Your Last Name, First name, Middle)

I hereby certify that I receive a pension allowance from either the State of Washington, the City of Seattle, or both, as authorized under Title 41, Washington State Law.

Address _____

City, State, Zip _____

Home Phone _____ Cell Phone _____

Email Address _____

2. My Current Living Spouse:

Spouse's Name _____

Spouse's Date of Birth _____ Date of Marriage _____

Dependents' Name(s) & Date of Birth _____
(under the age of 18 only, biological & legally adopted only. Legal custody & Guardianships do not apply)

3. My Emergency Contacts (**both must be living outside of your home**):

Name: _____ Relationship: _____

Address: _____ Phone: _____

Cell Phone: _____ Email: _____

Name: _____ Relationship: _____

Address: _____ Phone: _____

Cell Phone: _____ Email: _____

_____(Initial) If I am unable to communicate, I give the Police Pension Office permission to talk to my emergency contact(s) on my behalf.

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PAGE 2

4. Power of Attorney Document(s):

Is your Power of Attorney Document on file at the Police Pension Office? If not, please attach a complete copy of your POA to this document. If you have already sent us a copy, you initial the first line. If you have updated your POA, we will need a copy. You can contact us directly to see if we have a copy or need a copy. Please call us at 206-386-1286 option 2 or email us at policepension@seattle.gov

_____ Initial if you have attached a copy of my complete Power of Attorney document(s)

_____ Initial if Police Pension has a copy of my current POA dated _____

_____ Initial here if you do not have Power of Attorney document(s).

ALL FIELDS IN THIS TWO SIDED DOCUMENT MUST BE COMPLETED, NOTARIZED AND RETURNED TO THE POLICE PENSION OFFICE BY MAY 31, 2022

Dated this _____ day of _____, 20_____.

NAME _____

SIGNATURE _____
(Sign only when in front of a Notary)

***** **NOTARY** *****

SUBSCRIBED AND SWORN TO OR AFFIRMED BEFORE ME THIS _____ day of _____, 20_____.

NOTARY SIGNATURE _____

Printed _____

NOTARY PUBLIC IN AND FOR THE STATE OF _____

RESIDING AT _____