



**JUDGES OF THE PROBATE COURTS RETIREMENT FUND OF GEORGIA**

**POST OFFICE BOX 56 • GRIFFIN, GEORGIA 30224  
TELEPHONE - (770)228-8461 • FAX - (770) 412-1236**

**J. MIKE GREENE  
CHAIRMAN**

**ROBERT W. CARTER  
SECRETARY/TREASURER**

To: Probate Judges of Georgia

Greetings from the Probate Judges of Georgia Retirement Fund:

Let me congratulate you on your election to office and extend greetings from the Board of Commissioners and Staff of the Judges of the Probate Courts Retirement Fund of Georgia. We hope to welcome you as a new member to our Fund.

The Judges' Retirement Fund continues to grow and get better every year. We were able to make some changes in legislation in 1996 that greatly increase your retirement benefits. We will strive to make changes that will improve the Fund whenever possible. We have a very dedicated and hard working Board and office staff, who stand ready to help you in any way they can. Dues are \$105.00 a month payable by the 20<sup>th</sup> of the month. We offer direct draft from your bank account. You choose the way that is best for you. If at any time you have questions about your retirement benefits, please do not hesitate to call.

Your membership in the Probate Judges Retirement Fund will begin the day you were sworn, or any month within the first 12 months. With your application please send a copy of your birth certificate and the oath of office. These do not need to be certified copies.

Again, let me congratulate you on your election to office and hope we can welcome you soon as a member to the Probate Judges' Retirement Fund.

Sincerely,

Robert W. Carter  
Secretary/Treasurer



# *AUTOMATIC WITHDRAWAL AUTHORIZATION*

## **Judges of the Probate Courts Retirement Fund of Georgia**

P.O. Box 56

Griffin, GA 30224

Phone: (770) 228-8461 / FAX: (770) 412-1236

I authorize the Judges of the Probate Courts Retirement Fund of Georgia to initiate debit entries to my bank account identified below at the depository named below to debit the same to said account each month. Said debit entries to be used solely to pay my monthly dues (\$105.00) in the JUDGES OF THE PROBATE COURTS RETIREMENT FUND OF GEORGIA.

DEPOSITORY (BANK) NAME: \_\_\_\_\_

Bank Located in CITY: \_\_\_\_\_ STATE: \_\_\_\_\_

BANK ROUTING #: \_\_\_\_\_ ACCOUNT #: \_\_\_\_\_

*(Please attach a voided check showing the routing and account numbers)*

This authorization is to remain in full force and effect until the Judges of the Probate Courts Retirement Fund of Georgia has received written notification from me of its termination. Such notification is to be received in the office of the Fund in Griffin, GA by the first day of the month before such termination is desired.

Member's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Member's Name: \_\_\_\_\_

Mail Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Membership/Social Security #: \_\_\_\_\_