

Fairfax County Employees' Retirement System (FCERS)

APPLE FEDERAL CREDIT UNION DEDUCTION REQUEST FORM

(Fairfax County Public Schools Employees that belong to FCERS only)

Schools Retiree Name (please print): _____

Date: _____

Social Security Number (last 4 digits): _____

Start a total deduction in the amount of \$ _____ per month.

Cancel Monthly Deduction

Change Monthly Deduction according to instructions: _____

Retiree Signature: _____ Date: _____

Please return this form to:

Fairfax County Retirement Systems

10680 Main Street, Suite 280, Fairfax, VA 22030

Fax: 703-273-3185 Phone: 703-279-8200

TTY: 711 Toll-Free: 1-800-333-1633



#ES040_12/29/2015