



## *North Las Vegas Police Officers Association, Inc.*

### **Honorary Retiree Information Sheet**

Constitution and Bylaws  
(November 2007)  
Article VI-Membership  
Section 4-Classes of Members

B (6). All retirees will be required to submit a written statement to the Secretary by January (31<sup>st</sup>) of each year and any other time that their personal information changes. This statement will include their correct address, phone number, and if their beneficiary has changed. If this information is not obtained, the life insurance policy will be discontinued for that retiree.

(PLEASE PRINT)  
Member Information

Date: \_\_\_\_\_  
Member's Name: \_\_\_\_\_ P #: \_\_\_\_\_  
DOB: \_\_\_\_\_ SS#: \_\_\_\_\_  
Date of Hire: \_\_\_\_\_ Date of Separation: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Home Number: \_\_\_\_\_  
E-Mail: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

#### Beneficiary Information

Name: \_\_\_\_\_ SS#: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_  
State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone Number: \_\_\_\_\_

I understand that it is my responsibility to keep the union updated with my personal information as mentioned above in Bylaws Article VI-Section 4B (6)

**Member's Signature:** \_\_\_\_\_