

FRATERNAL ORDER OF POLICE LEGAL DEFENSE PLAN APPLICATION AND BANK DRAFT NOTIFICATION FORM

| MEMBERSHIP ENROLLMENT INFORMATION | | |
|---|----------------------|--|
| Last Name: | First Name: | |
| Address: | | |
| City: | State: Zip Code | |
| Home Telephone: | Employer: | |
| Social Security Number (last 4): | DOB: | |
| Lodge Number: | Email Address: | |
| PAYMENT ARRANGEMENTS | | |
| Check One: D I do wish to participate in the bank draft (complete bank draft section) | | |
| D I do not wish to participate in the bank draft (complete other payment section) | | |
| BANK DRAFT CONFIGURATION | | |
| \$55.75 will be deducted each quarter from the account which you indicate below. | | |
| Name of Bank: | Date to begin Draft: | |
| Routing Transit Number: | Account Number: | |
| Checking or Savings Account: (check one) | D Checking D Savings | |
| OTHER PA | YMENT OPTIONS | |
| Make all annual payments payable to the SC Fraternal Order of Police Legal Defense Plan | | |
| DCheck or money order enclosed in the amount of \$223.00 check / money order # | | |
| By not participating in a bank draft, I agree to make annual payments to the SC Fraternal Order of Police Legal Defense Plan. I also understand that I will not receive notification and that my annual payment will be due the first of September every year. I also understand that I may start my bank draft later if I so choose. | | |
| Drafts will be in the amount of my current payment to the South Carolina Fraternal Order of Police Legal Defense Plan. | | |
| I hereby agree to keep on depos it in the above account sufficient funds to pay such drafts and to indemnify the South Carolina Fraternal Order of Police and First Community Bank from any loss whatsoever arising from an overdraft of my account with the above stated institution. Should the Fraternal Order of Police sustain any loss, they may charge same against any account I have with or take other steps to make collection as they deem necessary. | | |
| | | |

Procedures for Executing Legal Defense Plan for Active members

This is to outline the proper procedures for executing an effective Legal Defense Plan. When a member enrolls in the legal defense plan, the application along with the payment should be submitted to the state lodge legal defense coordinator. The legal defense coordinator should check the accuracy of the application, ensure that a voided check is provided if the individual plans to take advantage of the bank draft program and verify that the correct amount is being submitted for the coverage period. The local lodge should then make a copy of the application and keep an up-to-date list of all lodge members currently on the plan.

When enrolling a legal defense member you must remember the following things:

- 1. We can only add members to the plan on the first of each calendar month.
- 2. We must have the application and the payment received by the twenty fifth of the month prior to the start date. Example: The member enrolls on March 5th, you submit application and payment by March 25th, and they are added to the plan on April 1
- 3. To ensure that the member is paying the correct amount without being over or undercharged, please refer to the pro-rated legal defense plan payments below to determine what amount the member must pay if they are not using the bank draft program. From the example in item 2, this member should pay \$92.90.
- **4.** Those members using a bank draft system are also subject to a pro-rated amount which should accompany their application. (See Schedule 2).
- **5.** All annual invoiced renewals are due August 31st for an effective date of September 1st. 30 day grace period reinstated, 31 or more terminated
- 6. Legal defense years run September 1st August 31⁵¹.

Schedule 1 (yearly invoice)

| COVERAGE BEGINS | PRO-RATED AMOUNT |
|-----------------|------------------|
| September 1 | \$223.00 |
| October 1 | \$204.41 |
| November 1 | \$185.83 |
| December 1 | \$167.24 |
| January 1 | \$148.66 |
| February 1 | \$130.07 |
| March 1 | \$111.49 |
| April 1 | \$92.90 |
| May 1 | \$74.32 |
| June 1 | \$55.73 |
| July 1 | \$37.15 |
| August 1 | \$18.58 |

Schedule 2 (for participants on bank draft)

| COVERAGE BEGINS | PRO-RATED AMOUNT | |
|-----------------|------------------|--|
| September 1 | \$55.75 | |
| October 1 | \$37.17 | |
| November 1 | \$18.58 | |
| December 1 | \$55.75 | |
| January 1 | \$37.17 | |
| February 1 | \$18.58 | |
| March 1 | \$55.75 | |
| April 1 | \$37.17 | |
| May 1 | \$18.58 | |
| June 1 | \$55.75 | |
| July 1 | \$37.17 | |
| August 1 | \$18.58 | |

Drafts are:

November 5 for December, January, February
February 5 for March, April, May
May 5 for June, July, Aug ust
August 5 for Sept., October, November

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