

**C.O.P.S. LOCAL 911**  
 Coalition Of Police and Sheriff's Inc.  
 3605 Katy Freeway, Suite 103, Houston, TX 77007  
 (713) 227-COPS (2677) \* Fax (713) 802-0517  
 Email: [ADMIN@copsweb.org](mailto:ADMIN@copsweb.org)  
 Web: [www.COPSweb.org](http://www.COPSweb.org)  
 Facebook: [COPS SPRINGER](https://www.facebook.com/COPS-SPRINGER)




**MEMBERSHIP APPLICATION FOR HARRIS COUNTY EMPLOYEES ONLY**

<b>FULL NAME</b>		
Address, City, State & Zip		
Personal Email Address		
Employer's Name		
<b>SSN:</b>	<b>EMPLOYEE ID#:</b>	<b>CELL PH#:</b>

*(see payroll statement)*

**COPS MEMBERSHIP PLANS (Check One)**

<input type="checkbox"/> PLAN A	<b>\$31.95 MONTH</b>	Basic ON-Duty Plan – Work Related Legal Issues Only
<input type="checkbox"/> PLAN B	<b>\$46.90 MONTH</b>	Basic + Off Duty Coverage + Legal Plus Gold for Member Only
<input type="checkbox"/> PLAN C	<b>\$61.85 MONTH</b>	Plans A & B FAMILY PLAN Includes Member and 1 adult dependent to this plan. Add add'l dependents at \$14.95 Mo/\$6.90 Bi-Weekly for each person such as parents, adult children, or significant other.
<input type="checkbox"/> PLAN D	<b>\$65.00 MONTH</b> 	<b>COMPLETE PACKAGE – BEST VALUE!</b> On & Off duty coverage, Legal PLUS Gold that reimburses member \$200/Dy for disciplinary suspensions and \$3000 if terminated after appeal (member only), Free Documents such as Wills and Power of Attorney, Family Firearm Protection Plan for SPOUSE, and more.

Optional Fees not Included In the Above Amounts:

\$ \_\_\_\_\_ AFLAC Monthly Premium/Contact Aflac Agent for Details

\$ \_\_\_\_\_ American Income Life/Contact AIL Agent for Details

**HOW TO PROCESS YOUR APPLICATION:**

1. Fill out the MEMBERSHIP APPLICATION, choose your PLAN and **SIGN** the PAYROLL DEDUCTION AGREEMENT form 777 and
2. Submit both forms to the C.O.P.S. Administrative Office electronically via email to [ADMIN@copsweb.org](mailto:ADMIN@copsweb.org) or fax to 713-802-0517.

Coverage will start immediately upon receipt of both forms. Preexisting legal Issue are not covered.



*C.O.P.S. is a local Charter of the International Union of Police Associations [I.U.P.A.]. Your membership with C.O.P.S. entitles you to all benefits and savings available to I.U.P.A. Members. [www.IUPA.org](http://www.IUPA.org)*

**THE SIGNED PAYROLL DEDUCTION AGREEMENT [ FORM 777 ] MUST BE ATTACHED!**



## PAYROLL DEDUCTION AGREEMENT

Date \_\_\_\_\_

I, the undersigned County (C) or Flood Control District (F) employee, hereby authorize the Harris County Auditor to make biweekly payroll deductions (amount will **not** be deducted from the third pay period of the month).

EMPLOYEE ID NUMBER	BUSINESS UNIT (DEPARTMENT)	EFFECTIVE DATE

### GENERAL DEDUCTIONS

DEDUCTION CODE	DESCRIPTION	BIWEEKLY AMOUNT	DEDUCTION CODE	DESCRIPTION	BIWEEKLY AMOUNT
003	Union 1550 Dues		014	Harris County Federal Credit Union (HCFCU use only)	
004	Afro-American Sheriff's Deputy League		015	Concerns of Police Survivors, Inc. local chapter (COPS) (min. \$2.50)	
005	Cleat		016	Harris County Sheriff's Office Benevolence Association (min. \$2.50)	
006	Harris County Deputies' Organization		017	United Way of Baytown Area (min. \$2.50)	
<b>X</b> 007	Coalition of Police & Sheriffs, Inc.		018	United Way of Greater Houston (min. \$2.50)	
008	Texas Municipal Police Association		019	Community Health Charities Texas (min. \$2.50)	
009	Mexican American Sheriff Organization		020	Harris County Official Court Reporters Association (min. \$25.00)	
010	Fraternal Order of Police Lodge #39		059	Houston Food Bank (min. \$2.50)	
011	Houston Federation of Teachers		060	The 100 Club (min. \$2.50)	
013	Non-owned Auto Liability				

### DEFERRED COMPENSATION

022	Nationwide Def. Comp. BT (before tax) (min. \$12.50, regular employees only)		025	Nationwide Def. Comp. AT (after tax) Roth (min. \$12.50, regular employees only)	
023	Valic Def. Comp. BT (before tax) (min. \$12.50, regular employees only)		026	Valic Def. Comp. AT (after tax) Roth (min. \$12.50, regular employees only)	
024	Voya Def. Comp. BT (before tax) (min. \$12.50, regular employees only)		027	Voya Def. Comp. AT (after tax) Roth (min. \$12.50, regular employees only)	

### DEFERRED COMPENSATION SPECIAL CATCH-UP (Vendor form required)

045	Nationwide Def. Comp. BT SPCL (before tax) (min. \$12.50, regular employees only)		048	Nationwide Def. Comp. AT SPCL (after tax) Roth (min. \$12.50, regular employees only)	
046	Valic Def. Comp. BT SPCL (before tax) (min. \$12.50, regular employees only)		049	Valic Def. Comp. AT SPCL (after tax) Roth (min. \$12.50, regular employees only)	
047	Voya Def. Comp. BT SPCL (before tax) (min. \$12.50, regular employees only)		050	Voya Def. Comp. AT SPCL (after tax) Roth (min. \$12.50, regular employees only)	

Such deductions as are made under this agreement are to be paid to:

In consideration for the County or Flood Control District making such payroll deductions, the undersigned employee releases the County Auditor, the County, and the Flood Control District from any and all liability, and waives all errors, if any, made by way of the deduction or failure to make a deduction.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Employee Name (Printed or Typed)

\_\_\_\_\_  
Witness Name (Printed or Typed)