



501(c)(3) Non-Profit Organization

Concerns of Police Survivors Louisiana Chapter

LA-C.O.P.S.
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There is no membership fee to join C.O.P.S., for the price paid is already too high!

C.O.P.S. provides resources to assist in the rebuilding of lives of surviving families and affected co-workers of law enforcement officers killed in the line of duty as determined by Federal criteria. Furthermore, C.O.P.S. provides training to law enforcement agencies on survivor victimization issues and educates the public of the need to support the law enforcement profession and its survivors.

C.O.P.S. relies on the generosity of the private sector and the law enforcement community to continue to provide the healing programs and emotional support needed by survivors devastated by the sudden, often violent death of their law enforcement officer. C.O.P.S. is there for each of our survivors for the rest of their lives. Please help us provide the support they need. We ask you to contribute to our Blue Line Team Payroll Deduction Program and help these families and co-workers of those who have made the ultimate sacrifice while protecting our families and communities. *C.O.P.S. is a 501 (c)(3) corporation. Donations are tax-deductible according to current IRS guidelines.*

TO AUTHORIZE PAYROLL DEDUCTION, PLEASE COMPLETE THIS FORM AND SUBMIT TO THE PAYROLL DEPARTMENT OF YOUR DEPARTMENT/AGENCY.

DATE: _____

I HEREBY AUTHORIZE:

(AGENCY NAME) _____

TO DEDUCT:

[] \$1 [] \$2 [] \$3 [] \$4 [] \$5 [] \$10 OTHER AMOUNT \$ _____

FROM MY SALARY EACH PAY PERIOD AND REMIT TO LOUISIANA CHAPTER OF CONCERN OF POLICE SURVIVORS.

THIS DEDUCTION WILL CONTINUE UNTIL WRITTEN REQUEST OF REVOCATION IS RECEIVED BY PAYROLL.

PRINTED NAME: _____

SSN (LAST4): _____ OR EMPLOYEE NUMBER: _____

DEPT./UNIT: _____

SIGNATURE: _____

Honoring the Fallen & Supporting the Survivors!