



## APPOINTED/ELECTED POSITION

I hereby certify that I, \_\_\_\_\_ have served in an  
Elected or Appointed position as the \_\_\_\_\_ of the following  
Fire/EMS organization \_\_\_\_\_  
and/or have served on the \_\_\_\_\_ Committee of the  
\_\_\_\_\_ for a full calendar Year, beginning on  
January 1, \_\_\_\_\_ and ending on December 31, \_\_\_\_\_:

**Choose one below:**

[1] I hereby request 25 points for the following Elected Position: \_\_\_\_\_

[2] I hereby request 25 points for the following Committee: \_\_\_\_\_

***I am currently or will be receiving LOSAP benefits beginning January 1st of next year and I'm making this request in October in order for my points to be processed. I fully understand that if I do not remain in the above position for the full calendar year, my 25 Points for APPOINTED/ELECTED Position will not be counted towards my 50 Points.***

I hereby certify under the penalty of perjury that the information contained on this form is true and correct to the best of my knowledge, and that I have not received any monetary compensation for any of the above.

(Any person who knowingly makes or causes any false statement or report to be made in any application or document required under law is subject to a fine of \$1000.00)

\_\_\_\_\_  
Volunteer Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Authorizing Signature

\_\_\_\_\_  
Organization & Position

\_\_\_\_\_  
Date