



Mark Fullington, Executive Director

Date: _____

I, _____, am requesting that CFSF hold my paycheck at the
Name *(please print)*
Port Orchard office so that I may pick it up.

Should I choose to have my check picked up by someone other than myself I will notify the Port Orchard receptionist (360-895-7889) in advance and ensure the person has valid photo i.d.

Return completed form to CFSF, PO Box 1459, Port Orchard, WA 98366 or email to maciana@cfsf.net.