

(Last Name)	(First Name)	(Social Security Number)	7500 (Local No.)
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**PAYROLL DEDUCTION AUTHORIZATION FOR UNION DUES**

Beginning in \_\_\_\_\_, I hereby authorize Santel ("Company") to deduct each pay period from my wages, sickness or accident disability payments, other benefit payments, or vacation payments the amount certified to the Company by the Secretary-Treasurer of the Communications Workers of America. Each amount so deducted shall be remitted by the Company to the Secretary-Treasurer of Communications Workers of America or its duly authorized agent. If for any reason the Company fails to make a deduction, I authorize the Company to make such deduction in a subsequent payroll period. This authorization shall continue in effect until cancelled by written notice from the Secretary-Treasurer of the Communications Workers of America, or until cancelled by written notice signed by me, and individually delivered to the Company, postmarked during the fourteen (14) day period prior to each anniversary date of the current or any subsequent Collective Bargaining Agreement, or during the fourteen (14) day period prior to the termination date of the current or any subsequent Collective Bargaining Agreement.

Signature \_\_\_\_\_

Dated \_\_\_\_\_

Resident Address \_\_\_\_\_

\_\_\_\_\_

**COMMUNICATIONS WORKERS OF AMERICA**

I hereby request and accept membership in the Communications Workers of America and when accepted by the Local, agree to be bound by the Constitution of the Union and Amendments thereto and Rules & Regulations now in effect or subsequently enacted by the Union and/or the Local to which I am assigned.

Date \_\_\_\_\_ Signature \_\_\_\_\_

Net Credited Service Date \_\_\_\_\_ Present Title \_\_\_\_\_

Department \_\_\_\_\_ Base/Work Location \_\_\_\_\_

Resident Phone # \_\_\_\_\_ Home Email \_\_\_\_\_

Accepted                       Rejected

AUTHORIZING SIGNATURE \_\_\_\_\_

Union membership dues are not deductible as charitable contribution for Federal income tax purposes. Dues, however, may be deductible in limited circumstances subject to restrictions imposed by the IRS Code.

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(Please print the above information)			

**PAYROLL ALLOTMENT AUTHORIZATION FOR CWA-PAC**

I hereby authorize Santel ("Company") to deduct from my wages the sum of \$ \_\_\_\_\_ each pay period and remit such amount to the Communications Workers of America Committee on Political Education/Political Action Fund (COPE/PAF).

I understand and agree that this authorization shall be governed by and controlled in accordance with the Terms and Conditions Plan for payroll deduction for CWA-PAC entered into between the Company and the Communications Workers of America ("Union").

NEW                       CHANGE                       CANCEL  
This authorization is made voluntarily and supersedes all previous authorizations executed by me for deductions of such payments.

Dated \_\_\_\_\_

Signature \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

This Authorization is voluntarily made based on my specific understanding that:

- The signing of this authorization card and the making of contributions of Committee on Political Education/Political Action Fund Contributions Committee (CWA COPE PAF CWA-COPE/PAF) are not conditions of membership in the Union nor of employment with the Company and that I may refuse to do so without fear of reprisal.
- I am making a contribution to a joint fund-raising effort sponsored by CWA-COPE/PAF and that they will use my contributions for political purposes, including but not limited to, the making of contributions to or expenditures on behalf of candidates for federal, state and local offices and addressing political issues of public importance.
- Federal law requires us to use our best efforts to collect and report the name, mailing address, occupation and the name of employer of individuals whose contributions exceed \$200 in a calendar year.
- Contributions or gifts to CWA-COPE PAF and AFL-CIO COPE PCC are not deductible as charitable contributions for federal income tax purposes.

Approved \_\_\_\_\_

Title \_\_\_\_\_

Dated \_\_\_\_\_