

_____ Last Name	_____ First	_____ MI	_____ SSN ( Last - 4)	<b>LOCAL #</b>
_____ Employer	_____ Occupation	_____ Date of Hire		
_____ Home Address	_____ City	_____ State	_____ Zip	Work: Full Time <input type="checkbox"/> Part Time <input type="checkbox"/>
_____ * Cell Phone	_____ Email			

I hereby apply for membership in the American Federation of State, County and Municipal Employees, Council 67, AFL-CIO (hereafter the "Union") and I agree to abide by its Constitution and Bylaws. I authorize the Union, and its successor or assign, to act as my exclusive bargaining representative for purposes of collective bargaining with respect to wages, hours and other terms and conditions of employment with my employer.

Effective immediately, I hereby voluntarily authorize and direct my employer to deduct from my pay each pay period, regardless of whether I am or remain a member of the Union, the amount of dues certified by the Union, and as they may be adjusted periodically by the Union. I further authorize my Employer to remit such amount to the Union, and I recognize that neither this authorization nor its continuation is a condition of my employment.

This voluntary authorization and assignment shall be irrevocable, regardless of whether I am or remain a member of the Union, for a period of one year from the date of execution or until the termination date of the collective bargaining agreement (if there is one) between the Employer and the Union, whichever occurs sooner, and for year to year thereafter, unless I give the Employer and the Union written notice of revocation not less than ten (10) days and not more than twenty (20) days prior to such anniversary date, or other time that may be permitted under my collective bargaining agreement, ordinance, or regulation. The applicable collective bargaining agreement is available for review, upon request. This card supersedes any prior check-off authorization card I signed.

Payments to the Union are not deductible as charitable donations for federal income tax purposes. However, they may be tax deductible as ordinary and necessary business expenses.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\* By providing my cell phone number, I understand that the Union and its affiliates may use automated calling technologies and/or text message me on my cell phone on a periodic basis. The Union will not charge for text message alerts; carrier message and data rates may apply to such texts.

<p><b>Deduction Per Pay Period</b></p> <p><input type="checkbox"/> \$4.17    <input type="checkbox"/> \$8.35</p> <p><input type="checkbox"/> Other \$</p> <p>Circle jacket size:  <b>S M L XL 2XL 3XL 4XL</b></p> <p><b>For Office Use Only</b></p> <p><input type="checkbox"/> Jacket Received</p>
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I hereby authorize my employer and associated agencies to deduct, each pay period, the amount certified in the box provided as a voluntary contribution to be paid to the treasurer of American Federation of State, County and Municipal Employees, PEOPLE, AFSCME, AFL-CIO, P.O. Box 65334, Washington, D.C. 20035 - 5334, to be used to support pro-worker candidates in federal, state, and local elections. My contribution is voluntary, and I understand that it is not required as a condition of membership in any organization, or as a condition of continued employment, and is free of reprisal. I understand that any contribution guideline is only a suggestion and I am free to contribute more or less than that amount and will not be favored or disadvantaged due to the amount of my contribution or refusal to contribute, and that I may revoke this authorization at any time by giving written notice.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

In accordance with federal law, AFSCME PEOPLE will accept contributions only from members of AFSCME and their families. Contributions from other persons will be returned. Contributions or gifts to AFSCME PEOPLE are not deductible as charitable contributions for federal income tax purposes.



We are stronger together. The more members who join the union, the stronger we will be to negotiate the best possible collective bargaining agreement to improve wages, benefits and working conditions. That's AFSCME Strong. The other benefit of solidarity an membership is you have access to numerous member-only benefits and discounts through the AFSCME Advantage Program, including:

- AFSCME Scholarship Programs
- Annuities
- Auto Buying
- Auto Insurance
- Computer Discounts
- Supplemental Insurances
- Credit Counseling
- Travel Center
- Goodyear Tire and Service Discounts
- Health Club Discounts
- Legal Service
- Mortgage Program
- Motor Club
- Pet Services
- Car and Truck Rental Discounts