

# UNION DUES PAYROLL DEDUCTION AUTHORIZATION FORM

Authorization for Voluntary Payroll Deduction

## EMPLOYEE INFORMATION

Employee Name: \_\_\_\_\_  
Employee ID: \_\_\_\_\_ Job Title: \_\_\_\_\_  
Department: \_\_\_\_\_ Work Location: \_\_\_\_\_  
Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

## UNION INFORMATION

Union Name: \_\_\_\_\_ Local Number: \_\_\_\_\_

## DEDUCTION AUTHORIZATION DETAILS

- I hereby authorize my employer to deduct union initiation fees in the amount of \$ \_\_\_\_\_
- I hereby authorize my employer to deduct regular monthly union dues as certified by the Union.
- I hereby authorize my employer to deduct a specific amount/percentage of: \_\_\_\_\_ % or \$ \_\_\_\_\_ per pay period.

## AUTHORIZATION AGREEMENT

I hereby authorize my employer to deduct from my wages each pay period the amount certified by the Union as my regular dues and/or initiation fees, and to transmit this amount to the Union. This authorization is voluntary and is not a condition of my employment. This authorization shall remain in effect and shall be irrevocable for a period of one year from the date of execution, or until the termination of the applicable collective bargaining agreement, whichever occurs sooner. I agree and direct that this authorization shall be automatically renewed and shall be irrevocable for successive periods of one year each, or for the period of each succeeding applicable collective bargaining agreement, whichever shall be shorter, unless written notice of revocation is given by me to the employer and the Union within the window periods designated by applicable law or agreements.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date