

Office of Human Resources 1419 Salt Springs Road Phone: 315.445.4155 Fax: 315.445.6023

IUPPE Dues Authorization Form

I hereby authorize Le Moyne College to deduct and withhold form my wages on a monthly basis the amount specified as dues by the **International Union of Plant Protection Employees, Local 18** and to remit the same on a monthly basis to my Union. This authorization shall be irrevocable for a period of one year or the period of the initial Agreement between Le Moyne College and the International Union of Plant Protection Employees, Local 18, dated July 1, 1998, whichever shall occur sooner, and shall thereafter be renewed automatically for one year periods unless revoked by me no later than 30 days immediately preceding the termination of such agreement or one year from the date shown below, whichever occurs sooner. Such revocation must be in writing and contain my signature.

Your Union Representative is Richard Bailey, Security Officer. The union dues are \$15 per month, deducted bi-weekly. Additionally, there is a \$100 initiation fee which will be deducted by payroll over 4 pay periods in the amount of \$25.

IUPPE monthly dues deductions will begin with your first paycheck (\$7.50/paycheck; \$15.00/month).

Employee Name:	SSN:
Address:	
Signature:	Date: