

MEMBERSHIP FORM

Please print clearly!!

Name: _____

Home _____

Address: _____
Street City Zip code

Campus _____

Address: _____
Department Campus Mail code (if any)

Telephone: _____
Home Work Email

UC-AFT dues are 1.35% of gross monthly salary for librarians and non-Senate faculty who do not have exclusive representation. Dues are .996% of gross monthly salary for Academic Senate faculty and academic researchers who do not have exclusive representation. In either case, dues are capped at \$65.00 per month. Dues will be deducted each month from your payroll check. Dues paid to UC-AFT may not be tax-deductible for federal tax purposes; however, under limited circumstances, dues may qualify as a business deduction. Check with your tax consultant.



EMPLOYEE ORGANIZATION MEMBERSHIP PAYROLL DEDUCTION AUTHORIZATION
 UPAY 669 (10/80)

PLEASE PRINT OR TYPE

CAMPUS	LOC	EMPLOYEE I.D.	DATE
			DATE
ACTION ON THIS FORM TO BECOME EFFECTIVE THE PAY PERIOD BEGINNING			
MONTHLY DEDUCTION			
	ENROLL	CANCEL	CURRENT AMOUNT
DEPARTMENT EMPLOYED AT U.C.	✓		
TITLE AT U.C.			
ORGANIZATIONAL NAME (INCLUDE LOCAL NAME AND NUMBER)			
AFT LOCAL			
TOTAL			

I authorize The Regents of the University of California to withhold monthly or cease withholding from my earnings as an employee, membership dues, initiation fees and general assessments as indicated above.

I understand and agree to the arrangement whereby one total monthly deduction will be made by the University based upon the current rate of dues, initiation fees, and general assessments. I ALSO UNDERSTAND THAT CHANGES IN THE RATE OF DUES, INITIATION FEES AND GENERAL ASSESSMENTS MAY BE MADE AFTER NOTICE TO THAT EFFECT IS GIVEN TO THE UNIVERSITY BY THE ORGANIZATION TO WHICH SUCH AUTHORIZED DEDUCTIONS ARE ASSIGNED AND I HEREBY EXPRESSLY AGREE THAT PURSUANT TO SUCH NOTICE THE UNIVERSITY MAY WITHHOLD FROM MY EARNINGS AMOUNTS EITHER GREATER THAN OR LESS THAN THOSE SHOWN ABOVE WITHOUT OBLIGATION TO INFORM ME BEFORE DOING SO OR TO SEEK ADDITIONAL AUTHORIZATION FROM ME FOR SUCH WITHHOLDINGS.

The University will remit the amount deducted to the official designated by the organization.

This authorization shall remain in effect until revoked by me-allowing up to 30 days time to change the payroll records in order to make effective this assignment or revocation thereof – or until another employee organization becomes my exclusive representative.

It is understood that this authorization shall become void in the event the employee or organization's eligibility for payroll deduction terminates for any reason. Upon termination of my employment with the University, this authorization will no longer be in effect.

This authorization does not include dues, initiation fees and general assessments to cover any time prior to the payroll period in which the initial deduction is made. Payroll deductions, including those legally required and those authorized by an employee are assigned priorities. In the event there are insufficient earnings to cover all required and authorized deductions, it is understood that deductions will be taken in the order assigned by the University and no adjustment will be made in a subsequent pay period for membership dues, initiation fees and general assessments.

EMPLOYEE SIGNATURE	DATE
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FOR UNIVERSITY USE ONLY

TRAN CODE	EMPLOYEE ID NO.	DATE	ELEMENT NO.	BAL CD	AMOUNT
1	2 4	12 13	18 19	22 23	24 30
X1		MO DY YR	6	G	
X1		MO DY YR	6	G	
X1		MO DY YR	6	G	

RETENTION: 1 YEAR AFTER INACTIVE . ACCOUNTING OFFICE

Return to: Treasurer, UC-AFT, 11728 Wilshire Blvd., #B1007, Los Angeles, CA 90025