

## **UNION DUES DEDUCTION AUTHORIZATION FORM**

of Monroeville or any successor employer to ded Association, Local 537 (the Union), those dues a	hereby voluntarily request and authorize the <b>Municipality</b> uct from my earnings and remit to the Utility Workers United and/or special assessments that may now or hereafter be to be remitted to the Union's Secretary-Treasurer not later has been made.
period of one year from the date appearing below for successive periods of one (1) year, unless <b>Monroeville</b> and to the Union is given by me, not	that I am and remain a member of the Union, or for a for a whichever first occurs, and shall be automatically renewed written notice by certified mail to the <b>Municipality of</b> more than twenty (20) days and not less than ten (10) days on shall become effective for the month following the month <b>Municipality of Monroeville</b> .
	(Signature)
(please print legibly)	(Date)
Print Name:	_
Address:	
Address:	<u> </u>
City:	_
County:	_
State:	_
Zip:	_
Hire Date:	