

## AUTHORIZATION FOR EMPLOYEE ORGANIZATION DEDUCTION

This form may be submitted in paper to a union officer or digitally via e-mail.  
 Contact a Union Officer at [cwastockton.org/contact-us](http://cwastockton.org/contact-us)

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PAYROLL NUMBER	SOCIAL SECURITY NUMBER			PRINT EMPLOYEE NAME		
<b>AUTHORIZATION FOR EMPLOYEE ORGANIZATION DEDUCTION</b> I hereby authorize the State of New Jersey to make bi-weekly deductions from my salary in an amount certified to you by the Union. The amount deducted shall be paid to the Secretary-Treasurer of the Union. I understand that this authorization shall remain in effect unless cancelled by me in writing pursuant to the provisions of the negotiated contract.						
EMPLOYEE ORGANIZATION	<b>CWA LOCAL 1031</b> Union membership dues and agency fees are not deductible as charitable contributions for Federal income tax purposes. Dues and agency fees, however, may be deductible in limited circumstances subject to various restrictions imposed by the Internal Revenue Code.			Name _____		
				Home Address _____		
				City/State _____ Zip _____		
				Phone _____ (Home) _____ (Work)		
				E-mail _____		
FOR PAYROLL CLERK USE ONLY				Job Classification Title _____		
CODE		BI-WEEKLY AMOUNT		Dept. & Location _____		
				Employee Signature _____ Date _____		
				Payroll Clerk Signature _____ Date _____		

EMPLOYEE ORGANIZATION DEDUCTION JTC 20274

N. J. DEPT. OF THE TREASURY -- DATA PROCESSING -- PAYROLL