

A B C POLITICAL CHECKOFF AUTHORIZATION FORM

I hereby authorize the employer to deduct from my pay the sum of .25 .50 1.00 other _____ each week and to forward same amount to the United Food and Commercial Workers Union Local 227 Active Ballot Club.

I understand that this authorization is voluntarily made and that I may contribute more or less than this amount by any lawful means, other than this checkoff, or may refuse to contribute, and that the making of payments to the UFCW Active Ballot Club is not a condition of membership in the Union or of employment with the employer and that I have a right to refuse to sign this authorization and not to contribute to the UFCW ABC without reprisal. I also understand that my contribution will be used for political purposes, including the support of candidates for federal, state and local office. I expressly reserve the right to revoke at any time this authorization in writing.

I understand that contributions or gifts to the UFCW Active Ballot club are not deductible as charitable contributions for federal tax purposes.

Print Name _____ Company _____ Store No. _____

Signature _____ Social Security No. _____ Date Signed _____

Email _____ Cell Phone _____ Home Phone _____