

# AMERICAN FEDERATION OF STATE, COUNTRT & MUNICIPAL EMPLOYEES, AFL-CIO

APPLICANTS'S NAME (Print) .....

ADDRESS .....

CITY, STATES & ZIP .....

PHONE ..... EMAIL .....

EMPLOYER .....

DEPT .....CLASSIFICATION .....

"I hereby apply for membership in the American Federation of State, Country and Municipal Employees, AFL-CIO (AFSCME), and designate that organization and its subordinate bodies as my representative on all matters affecting my wages, hours and other conditions of work. I hereby authorize my employer to make deductions every pay period in the amount certified by the Union as my current dues. The monies deducted shall be mailed to Council 73 or the Local Union as directed. Dues, contributions or gifts to AFSCME Council 73 are not deductible as charitable contributions for federal income tax purposes."

SIGNATURE .....DATE .....