

SEIU Local 199 Membership Card

I hereby authorize my employer to deduct membership dues in Service Employees International Union (SEIU), from wages due to me and to transmit the same to SEIU at it's office in Coralville. The amount of the dues shall be the amount established by the Constitution and By-laws of SEIU and as certified to my employer by SEIU. This authorization shall be effective with the first paycheck after receipt of this card by the employer, and continue in effect until revoked by me, pursuant to all relevant laws and collective bargaining agreement provisions.

Name (Print) _____ DOB _____

Home Address _____ City _____

State _____ Zip _____ Email: _____

Social Security # _____ Home Phone _____

Employer _____ Job Title _____

Unit/Location/Dept _____ Work Phone _____

Date _____ Signature _____

Witness _____