

# REQUEST AND AUTHORIZATION FOR DEDUCTION OF ORGANIZATION DUES

## Employee information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_

*City State ZIP Code*

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Job Title: \_\_\_\_\_ Social Security No.: \_\_\_\_\_ Department: \_\_\_\_\_

Work Address \_\_\_\_\_

### Campus Where Employed:

University of Missouri- Kansas City  University of Missouri- Campus-Columbia

University of Missouri- Hospital- Columbia  \_\_\_\_\_

## Authorization

Beginning \_\_\_\_\_, I the undersigned, do hereby assign to Laborers' International Union of North America **Local 955** and hereby authorize the Curators of the University of Missouri to deduct from any net wages due to me and pay to said Union such sum monthly as shall equal the monthly membership dues as may be from time to time established and certified by said Union to the Curators of the University of Missouri.

This assignment and authorization shall remain in full force and effect until the first January 1 after delivery by me to the Curators of the University of Missouri of a written revocation, during the period of December 1 through December 31, annually.

Dues, contributions or gifts paid to **Laborers' Local 955** are not deductible as charitable contributions for federal income tax purposes. Due paid, however, may qualify as business expenses and may be deductible in limited circumstances subject to various restrictions imposed by the Internal Revenue Service.

## Signature

Employee  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Union Representative  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### FOR HUMAN RESOURCES USE ONLY

Deduction Code \_\_\_\_\_ Deduction Effective Date \_\_\_\_\_ Deduction Amount \_\_\_\_\_

Hourly Rate \_\_\_\_\_ Pay Period Amount \_\_\_\_\_