



# Independent Association of Publishers' Employees The Newspaper Guild CWA Local 1096

## Payroll Deduction Authorization Form

**To: Dow Jones & Company (hereinafter called the Publisher)**

I hereby assign to the Independent Association of Publishers' Employees, Inc. and authorize you to deduct from any salary earned or to be earned by me, as your employee, an amount equal to all membership dues, lawfully levied against me by the Independent Association of Publishers' Employees, Inc. for each calendar month following the date of this assignment, as certified by the Treasurer of the Independent Association of Publishers' Employees, Inc.

I hereby authorize and request you to check off and deduct such amounts during the months for which such dues are lawfully levied, and the Independent Association of Publishers' Employees, Inc. so notifies you, from any salary then standing to my credit as your employee, and to remit the amount deducted to the Independent Association of Publishers' Employees, Inc.

This assignment and authorization shall remain in effect until revoked by me, but shall be irrevocable for a period of one year from the date of this assignment or the termination date of the current collective bargaining agreement, whichever is sooner. During the thirty (30) day period following expiration of this assignment, I will notify the Independent Association of Publishers' Employees, Inc. and the Company by registered mail of my intention to revoke this voluntary dues deduction. Unless such notification is given during this thirty (30) day period, this authorization and assignment shall be irrevocable for a further period of one year or the termination date of the then current agreement between the Company and the Independent Association of Publishers' Employees, Inc.

The within assignment shall, where applicable, apply to the sums required to be paid to the Union under Article X.

This assignment and authorization supersedes all previous assignments and authorizations heretofore given to you by me in relation to my Independent Association of Publishers' Employees, Inc. dues.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Employee Number

\_\_\_\_\_  
Job Title

\_\_\_\_\_  
City Employed

\_\_\_\_\_  
Date

*Revised February 2010*