



# A Message from Your Union Officers

## Owe Back Dues? Get Paid Up Quick & Easy

**TWU Local 100 members who are in dues arrears now have a simple and relatively painless way to restore good standing membership.**

On filling out this form which is now being carried into the field by union representatives and your elected officers, the MTA will begin double dues deductions each check until you are paid off. A member signature, pass number, and social security number validates the form. Restoring your good

standing membership is especially important now, as we hold the line against contract. Taking a stand in the street, on the airwaves, and in court costs money: that's why it's so important for every member in bad standing to get right with the union today. And now it's easy. Double up and pay it off!

Call the union hall at 212-873-6000, extension 2083, to find out how much you owe if you don't already know. Then fill out, sign the form, and return it in to the union hall, either by mail or in a sealed envelope to your rep or officer.

### **VOLUNTARY AUTHORIZATION FOR PAYROLL DEDUCTION OF BACK DUES**

**For Transport Workers Union of America, Local 100, AFL-CIO**



I, (name) \_\_\_\_\_, hereby acknowledge that I have been notified that I am in arrears on my dues obligation in the amount of \$ \_\_\_\_\_ due to TWU, Local 100. (Call 212-873-6000 ext. 2083 to find out how much you owe.)

I hereby request and authorize my Employer, the New York City Transit Authority, or the Manhattan and Bronx Surface Transit Operating Authority, or MTA Bus Company (**hereinafter "Employer"**) deduct from my wages, in each payroll period, an additional dues deduction equal to my regular dues deduction, for the purpose of paying arrears in my dues obligation to the Transport Workers Union Local 100 (**hereinafter "Union"**). The deduction which pays the final balance on an arrearage may be for an amount less than a full regular dues deduction, should a lesser deduction be sufficient to pay such balance, and such additional deductions shall cease unless I have additional arrearages.

In signing this request and authorization, and for good and valuable consideration for the Employer making such deductions, I HEREBY WAIVE any right I may have now or in the future to make any claim against the Employer and/or its agents for either any deductions made or any failure to make any additional deductions from my wages.

I acknowledge that I may revoke this authorization for additional dues deductions by sending a written request to cease such deductions to the Union President and/or the Secretary-Treasurer. Such authorization shall be terminated within 60 days from receipt of such revocation by the Union President and/or Secretary-Treasurer.

Date: \_\_\_\_\_ Badge No. or Pass: \_\_\_\_\_ SSN \_\_\_\_\_

Division or Department: \_\_\_\_\_

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

Address: \_\_\_\_\_

Signature: \_\_\_\_\_

**Sign in Ink Only**



**Give to a Union Representative or  
Fax to Secretary Treasurer Earl Phillips at  
212-245-4101**