



AUTHORIZATION AGREEMENT FOR DIRECT DEBIT

I hereby authorize the Communications Workers of America Committee on Political Education Political Contributions Committee, hereinafter called the CWA-COPE PCC to initiate a monthly debit entry to my

Checking Account Savings Account

in the amount of \$_____ (\$4.00 minimum) and the depository hereinafter called DEPOSITORY, to debit the same such account in this amount and in the event a debit is made to my account in error, I authorize the CWA-COPE PCC to make a correcting entry under the condition that I am notified of said adjustment.

IMPORTANT:

PLEASE CHECK THE APPROPRIATE BOX ABOVE.

THIS AUTHORIZATION MUST BE ACCOMPANIED BY A VOID CHECK or DEPOSIT SLIP FROM THE ACCOUNT TO BE DEBITED.

Please complete the following:

DEPOSITORY: _____
(Name Of Banking Institution)

(City) (State)

This authorization is to remain in full force and effect until the CWA-COPE PCC and the DEPOSITORY have received written notification from me of its termination in such time and in such manner as to afford the parties a reasonable opportunity to act on it.

Check one: _____ New Enrollment _____ Change of Amount _____ Cancel Deduction

(Employee Signature) (Date)

(Print Name) (E-mail Address)

(Mailing Address) (City) (State / ZIP)

(Name of Employer) (Occupation) (Social Security Number)

LOCAL NUMBER _____

This Authorization is voluntarily made based on my specific understanding that:

- The signing of this authorization card and the making of contributions to CWA-COPE PCC are not conditions of membership in the union nor of employment with the Company and that I may refuse to do so without fear of reprisal.
- I am making a contribution to CWA-COPE PCC and understand that the CWA-COPE will use my contributions for political purposes, including but not limited to, the making of contributions to or expenditures on behalf of candidates for federal, state and local offices and addressing political issues of public importance.
- Federal law requires us to use our best efforts to collect and report the name, mailing address, occupation and the name of employer of individuals whose contributions exceed \$200 in a calendar year.
- Contributions or gifts to CWA-COPE PCC are not deductible as charitable contributions for federal income tax purposes.

(Signature of Union Representative Certifying that Employee is Eligible to Participate)

REMEMBER – PLEASE ATTACH VOID CHECK or DEPOSIT SLIP

**RETURN TO: CWA-COPE PCC
Attn: Krystal Dehaba, COPE Specialist
501 THIRD STREET, NW
WASHINGTON, DC 20001-2797**

**Original – International
Copy - District/Sector
Local**



CWA-COPE MEMBERSHIPS

Name (please print) _____ Date _____

Home Address _____

City _____ State _____ Zip _____

E-Mail _____ CWA Local _____

(Please select the membership level that applies to you, by circling the gift you would like to receive.)

<p style="text-align: center;">MEMBERSHIP CLUB \$1/WEEK <i>Tumbler</i></p>	<p style="text-align: center;">PLATINUM QUORUM \$5/WEEK <i>Stadium Blanket</i> or <i>Mag-Lite Solitaire</i></p>	<p style="text-align: center;">TRIPLE QUORUM \$7/WEEK <i>Multi-Tool</i> or <i>12-Pack Cooler</i></p>	<p style="text-align: center;">PRESIDENT'S CLUB \$10/WEEK <i>Men's Watch</i> or <i>Women's Watch</i></p>
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Methods of Payment: (Please choose one.)

- 1. Check or Money Order made payable to CWA-COPE PCC in the amount of \$_____ (enclosed)
- 2. Deductions by employer from paycheck of \$_____ per week. (Please fill out a deduction card and return it to your employer.)
- 3. Direct Debit from bank account of \$_____ per week.

Return this form to your:
CWA District Office
Attn: Legislative/Political Coordinator

For CWA District Office Use Only

Date received: _____

Date sent to Headquarters: _____

A copy of our report is filed with the Federal Election Commission and is available from the Federal Election Commission, Washington, D.C. Contributions or gifts to CWA-COPE and CWA-COPE PCC are voluntary and are not deductible as charitable contributions for federal income tax purposes.

CWA

POLITICAL ACTION

Incentive Award Program Participant

Please accept a gift from the appropriate level as a "Thank you" for supporting CWA-COPE.

Membership Club
\$1/week



Tumbler

Platinum Quorum
\$5/week



Stadium Blanket

OR



Mag-Lite Solitaire

Triple Quorum
\$7/week



Multi-Tool

OR



12-Pack Cooler

President's Club
\$10/week



Men or Women's Watch