ELGIN COMMUNITY COLLEGE FACULTY ASSOCIATION COPE DEDUCTION

I hereby authorize Elgin Community College to deduct from my salary the sum of \$5.00 ____, \$10.00 ____, \$____ (other amount) per pay period and forward that amount to the Elgin Community College Committee on Political Education (ECCFA COPE).

This authorization is signed freely and voluntarily and not out of any fear of reprisal and I will not be favored or disadvantaged because I exercise this right. I understand this money will be used to make political contributions by ECCFA COPE. ECCFA COPE may engage in joint fundraising efforts with the AFL-CIO.

This voluntary authorization may be revoked at any time by notifying the ECCFA COPE in writing of the desire to do so.

NAME:	SS #:
HOME ADDRESS:	
CITY/STATE:	ZIP CODE:
HOME PHONE:	
SIGNATURE:	DATE:
Contributions or gifts to ECCFA COPE are not deductible as charitable of	ontributions for federal income tax purposes. Please cons

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