## Member Power Teamster Power



## Stand Together Win Together

## YES! I want to become a member of Teamsters Local 2010 and continue to stand with my coworkers to win fair wages, benefits, and working conditions for all!

I recognize the need for a strong union and believe everyone represented by our union should pay their fair share to support our union's activities. Therefore, I voluntarily authorize my employer to deduct from my earnings and transfer to Teamsters Local 2010 an amount equal to the regular monthly dues uniformly applicable to members of Local 2010, and I agree that this authorization shall remain in effect for the duration of the existing collective bargaining agreement, if any, and yearly thereafter until a new CBA is ratified, unless I give written notice via U.S. mail to both the employer and Local 2010 during the 30 days prior to the expiration of the CBA or, if none, the end of the yearly period. My check-off authorization will renew automatically, regardless of my membership status, unless revoked during the window period described. Union dues are not tax deductible under current federal law. My signature below strengthens our Union to win fair wages and benefits!

Last Name	First Name			M.I.	Payroll Title	Hire Date	
Home Mailing Address		C	City	State		Zip	
Home Phone	Mobile Phone	Personal E	Email		Account Name	CAMPUS ☐ MED CTR ☐	
Current Work Location/	/Address	C	City	State	Zip	Employee I.D. #	
Department	Building			Floor/Room Number		SSN	
Work Phone	Work Email			It's okay to use my name & likeness for Teamster Publications  Teamster Publications  Teamster Publications  Teamster Publications  Teamster Stocal 2010 does not charge for text messages, but cell phone provider message & data rates may apply.			

As a member in good standing, I proudly pledge to faithfully uphold the Constitution and bylaws of the International Brotherhood of Teamsters and Local 2010. I will faithfully perform any duties entrusted to me to the best of my ability. I will conduct myself at all times in a manner as not to bring reproach upon my Union. I am proud to join with my Union Sisters and Brothers to accept my responsibilities during any authorized strike or lockout. As a member in good standing I shall be entitled to all of the rights and privileges of membership!

Signature Date I want to hold politicians accountable to working families TEAMSTERS LIFE WITH DUES I authorize my employer to withhold the amount below each \$5,000 life insurance benefit week to forward to Teamsters Local 2010 as a contribution to free to Teamster members D.R.I.V.E. (Democratic Republican Independent Voter Education) Member's Social Security # (Last 4 Only) Member's Birthday Weekly DRIVE amount \$ Name XXX - XX -Signature Beneficiary #1 Date of Birth This authorization is made voluntarily based on my specific understanding that: 1) I am not required to sign this form or make voluntary contributions to DRIVE as a condition of my employment or membership in the union; 2) I may refuse to contribute without reprisal; 3) Under law, only union Beneficiary #2 Date of Birth members and union staff who are U.S. Citizens or lawful permanent residents are eligible to contribute to DRIVE; 4) DRIVE uses the money it receives for political purposes – including making contributions to and expenditures on behalf of candidates for federal, state, and local offices - and Beneficiary #3 Date of Birth addressing political issues of importance to working families. This authorization shall remain in effect until revoked by me in writing via U.S. mail to Teamsters Local 2010. Contributions or gifts to DRIVE are not tax deductible as charitable contributions.

FOR UNION USE ONLY							
Organizer/Representative	R.O.C.						

FOR UNIVERSITY USE ONLY										
Tran Code	Employee ID	Date	Element No.	Bal CD	Amount					
1 2	4 12	13 18	19 22	23 23	30					
X1		MO DY YR	6	G						
X1			6	G						