



# ACE-AFSCME Local 2250

■ Yes! I am AFSCME Strong. I want a strong voice at work and in my community.

Yes, sign me up to:

- Talk to colleagues at work
- Make phone calls to AFSCME members for campaigns
- Knock on AFSCME members' doors during campaigns
- Willing to attend Board of Education meetings



## Membership Application

Please Print

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

Occupation: \_\_\_\_\_ Employer/Work-site: \_\_\_\_\_

EIN: \_\_\_\_\_ Hire Date: \_\_\_\_\_  20 hours or less per week  MSEA/NEA Payroll Deduction

Home Phone:(\_\_\_\_\_) \_\_\_\_\_ \*Cell Phone:(\_\_\_\_\_) \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Personal Email: \_\_\_\_\_ Last four of SSN: \_\_\_\_\_

I hereby apply for membership in Local 2250 of the American Federation of State, County and Municipal Employees, AFL-CIO (hereafter the "Union") and I agree to abide by its Constitution and Bylaws. I authorize the Union, and its successor or assign, to act as my exclusive bargaining representative for purposes of collective bargaining with respect to wages, hours and other terms and conditions of employment with my employer.

sooner, and for year to year thereafter, unless I give the Employer and the Union written notice of revocation not less than ten (10) days and not more than twenty (20) days prior to such anniversary date. The applicable collective-bargaining agreement is available for review, upon request. This card supersedes any prior check-off authorization card I signed."

Effective immediately, I hereby voluntarily authorize and direct my employer to deduct from my pay each pay period, regardless of whether I am or remain a member of the Union, the amount of dues certified by the Union, and as they may be adjusted periodically by the Union. I further authorize my Employer to remit such amount to the Union, and I recognize that neither this authorization nor its continuation is a condition of my employment.

Payments to the Union are not deductible as charitable donations for federal income tax purposes. However they may be tax deductible as ordinary and necessary business expenses.

This voluntary authorization and assignment shall be irrevocable, regardless of whether I am or remain a member of the union, for a period of one year from the date of execution or until the termination date of the collective bargaining agreement (if there is one) between the Employer and the Union, whichever occurs

\_\_\_\_\_  
Signature Date

\*By providing my cell phone number, I understand that the Union and its affiliates may use automated calling technologies and/or text message me on my cell phone on a periodic basis. The Union will never charge for text message alerts; carrier message and data rates may apply to such texts.



# ACE-AFSCME Local 2250

14440 Old Mill Road • Upper Marlboro, Maryland 20772

## PEOPLE Contribution

### Deduction Per Pay Period (26 pay periods annually)

- 10 Month Employee
  - \$4.55 per pay period (MVP)
  - \$\_\_\_\_\_ per pay period

- 12 Month Employee
  - \$3.85 per pay period (MVP)
  - \$\_\_\_\_\_ per pay period

Circle jacket size:  
S M L XL 2XL 3XL 4XL

I hereby authorize my employer and associated agencies to deduct, each pay period, the amount certified as a voluntary contribution to be paid to the treasurer of American Federation of State, County and Municipal Employees PEOPLE, AFSCME, AFL-CIO, P.O. Box 65334, Washington, D.C. 20035-5334, to be used to support pro-worker candidates in federal, state, and local elections. My contribution is voluntary, and I understand that it is not required as a condition of membership in any organization, or as a condition of continued employment, and is free of reprisal. I understand that any contribution guideline is only a suggestion and I am free to contribute more or less than that amount and will not be favored or disadvantaged due to the amount of my contribution or refusal to contribute, and that I may revoke this authorization at any time by giving written notice.

\_\_\_\_\_  
Signature Date

Contributions or gifts to AFSCME PEOPLE are not deductible as charitable contributions for federal income tax purposes. In accordance with the federal law, AFSCME PEOPLE will accept contributions only from members of AFSCME and their families. Contributions from other persons will be returned.

### For Office Use Only

JACKET RECEIVED