



APPLICATION FOR CSEA MEMBERSHIP

CSEA, Inc. / Local 1000 AFSCME, AFL-CIO
PO Box 7125, Capitol Station, Albany, New York 12224



I HEREBY AUTHORIZE CSEA, INC., LOCAL 1000 AFSCME, AFL-CIO TO BE MY EXCLUSIVE REPRESENTATIVE FOR COLLECTIVE BARGAINING AND, THEREFORE, REVOKE ANY OTHER AUTHORIZATION OF ANY OTHER REPRESENTATIVE THAT I MAY HAVE PREVIOUSLY DESIGNATED. I UNDERSTAND THAT MY CSEA MEMBERSHIP BEGINS WHEN DUES ARE DEDUCTED.

TO THE FISCAL OR PAYROLL OFFICER OF MY EMPLOYER:

I have applied for membership in CSEA and hereby authorize you to deduct CSEA dues from my salary in the amount certified by CSEA in this and succeeding years of my employment and membership. I understand that membership dues, as of January 1, 2008, are \$5.59 bi-weekly if annualized salary is under \$5,000, \$8.35 bi-weekly if annualized salary is \$5,000 - \$9,999, \$11.46 bi-weekly if annualized salary is \$10,000 - \$12,999, \$14.01 bi-weekly if annualized salary is \$13,000 - \$15,999, \$15.72 bi-weekly if annualized salary is \$16,000 - \$21,999, \$17.50 bi-weekly if annualized salary is \$22,000 - \$27,999, \$17.83 bi-weekly if annualized salary is \$28,000 - \$29,999, \$18.93 bi-weekly if annualized salary is \$30,000 - \$31,999, \$19.90 bi-weekly if annualized salary is \$32,000 - \$33,999, \$20.27 bi-weekly if annualized salary is \$34,000 - \$35,999, \$21.31 bi-weekly if annualized salary is \$36,000 - \$37,999, \$22.36 bi-weekly if annualized salary is \$38,000 - \$39,999, \$23.11 bi-weekly if annualized salary is \$40,000 - \$44,999, \$23.71 bi-weekly if annualized salary is \$45,000 - \$49,999, \$24.31 bi-weekly if annualized salary is \$50,000 - \$54,999, \$24.92 bi-weekly if annualized salary is \$55,000 - \$59,999, \$25.51 bi-weekly if annualized salary is \$60,000 and above. I understand that this authorization for dues may be revoked at any time by written notice to you. 3% of my dues are appropriated for political action purposes and a portion is appropriated for a subscription to *The Work Force*, the official publication of CSEA.

I understand that: dues, contributions or gifts to CSEA are not deductible as charitable contributions for federal income tax purposes. Dues paid to CSEA, however, may qualify as business expenses and may be deductible in limited circumstances subject to various restrictions imposed by the Internal Revenue Service.

Fax: (518) 465-2382

Signature: _____ Date: _____

CSEA OFFICE USE ONLY

Mr. _____
Mrs. _____
Ms. _____
Miss _____

SOCIAL SECURITY NUMBER

FIRST NAME MI LAST NAME

PLEASE PRINT CLEARLY

AFSCME LOCAL 1000/ _____
INSERT YOUR CSEA LOCAL NAME HERE

NICKNAME _____

AGENCY/FACILITY _____
PLACE OF EMPLOYMENT

MAILING ADDRESS AS YOU WANT IT TO APPEAR IN OUR FILES _____

WORK ADDRESS _____

HOME PHONE () _____
AREA CODE LISTED UNLISTED

WORK PHONE () _____

JOB TITLE _____

E-MAIL _____

SALARY _____

CHECK BOX IF YOU ARE A VETERAN

• DO NOT STAPLE — Please fold and drop in any mailbox •

