Authorization to Discontinue Union Dues or Service Fee Deductions

Employee Name: ______________________________
______________________________________________________________________________

Last    First    MI    (Please Print)

ZPid:_________________________________________  Union Group:_________________________________________

I hereby authorize Michigan State University to discontinue my payroll deductions for Union Dues or Service Fees. I understand that this authorization will become effective within thirty (30) days following its receipt in the University payroll office.

Employee Signature: ___________________________________________  Date:___________________

Several collective bargaining agreements require that authorization be sent to BOTH the Payroll Office AND the Union office via certified mail. Submit completed form to both:

Payroll Division  AND  Applicable Union Office
Hannah Administration Building  Union addresses may be found online at
426 Auditorium Road Room 350  http://www.hr.msu.edu/documents/unionaddr.htm
East Lansing, MI 48824

For Payroll Use Only:
Date Received:___________  Initials:_____________  Date Entered:_____________  Date Effective:___________

The following collective bargaining agreements require that authorization be sent to BOTH the Payroll Office AND the Union office via certified mail. Cards will not be accepted through email, fax, walk-in traffic, campus mail or any other method other than certified mail.

• Union of Nontenure-track Faculty (UNTF)
• AFSCME Local 999
• AFSCME Local 1585
• Clerical Technical Union of MSU (CTU)
• Graduate Employees’ Union (GEU)
• IUOE Local 324
• IATSE Local 274
• APA
• APSA

Please keep your postal receipts as proof of submission.

Union addresses may be found online at http://www.hr.msu.edu/documents/unionaddr.htm