

VOTE/COPE PAYROLL DEDUCTION

The undersigned authorizes the Comptroller of the County of Suffolk to deduct from each of my paychecks (not to exceed 21 checks per year between the first paycheck in September through the last paycheck in June) the sum of \$ _____ and to forward that amount to VOTE/COPE, P.O. Box 5190, Albany, N.Y. 12205-0190.

This authorization is made voluntarily and without fear of reprisal and with the understanding that the making of payments to VOTE/COPE are not conditions of membership in any labor organization or of employment with the County of Suffolk or Suffolk County Community College and that VOTE/COPE will use the money it receives to make political contributions and expenditures in connection with federal, state and local elections. This authorization shall remain in full force and effect for all purposes while I am employed at Suffolk Community College, or until revoked by me in writing between September 1st and September 15th of any given year.

Name (print clearly) _____ Last 4 digits of Social Security # _____

Signature _____ Campus _____ Date _____

VOTE/COPE is the Political Action Committee of the New York State United Teachers

Return this form to: Faculty Association, 224J Southampton Bldg., 533 College Rd., Selden, NY 11784

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