

Please fill out and sign the payroll deduction form below and send in the enclosed return envelope and/or fax to TPOAM, attention Ed Jacques at 313-937-9165. This form needs to be received at our office by April 15, 2016. Non-payers will not be allowed to attend or participate in any union functions or programs, including the short/long term disability and life insurance programs, and will have no vote on officers, contract ratifications, by-laws, etc. Opting back into the Union after dues deduction begins will trigger a \$500.00 fine. It is important that every employee pay their fair share as we establish a strong, unified union and continue to provide services at a very competitive rate.

# Thank you!



Date \_\_\_\_\_

PAYROLL DEDUCTION AUTHORIZATION  
ATTENTION: PAYROLL DEPARTMENT

FOR THE: KENT COUNTY COURT EMPLOYEES

BY: \_\_\_\_\_  
(Last Name) (First Name) (Middle Initial)

EFFECTIVE: May 2, 2016.  
(Next Payroll)

I hereby request and authorize you to deduct from my earnings for the first and second Kent County pay period each month, an amount established by the Union as monthly dues. The amount deducted shall be paid to:

TECHNICAL, PROFESSIONAL AND OFFICEWORKERS  
ASSOCIATION OF MICHIGAN - TPOAM  
27056 Joy Road, Redford, MI 48239-1949

SIGNATURE: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Number Street City Zip

EMAIL ADDRESS: \_\_\_\_\_

FULL-TIME \_\_\_\_\_ PART-TIME \_\_\_\_\_