

AUTHORIZATION FOR DEDUCTION FROM WAGES

The undersigned hereby authorizes any and all of the Employers for whom he performs under the terms and conditions of a Collective Bargaining Agreement between the Employer and affiliated Local Unions of the Downstate Illinois Laborers' District Council to make a deduction of ninety two cents (\$.92) per hour worked for District Council Check Off effective August 1, 2023, and remit same amount to the offices of the Downstate Illinois Laborers' District Council, 20 Bronze Pointe North, Swansea, IL, 62226.

This authorization shall be irrevocable for a period of one (1) year from date, or until the termination date of current Collective Bargaining Agreement, whichever is sooner and shall automatically re-new from year-to-year thereafter, unless written notice is given by the undersigned to his then current Employer and his Local Union at least thirty (30) days prior to any annual expiration date.

Name (Please Print) **Social Security #**

Street Address **City** **State** **Zip**

Telephone # **Local Union #** **Email address**

Signature **Date**

(PLEASE READ AND SIGN ON SIGNATURE LINE)

Copies: White-SWILDC **Canary-Local Union** **Pink-Company** **Goldenrod-Employee**

