

## Article 17.6

- B The authorization of such deductions shall be in the following form:

### **AUTHORIZATION FOR DEDUCTION OF DUES UNITED STATES POSTAL SERVICE**

I hereby assign to the National Postal Mail Handlers Union, A Division of the Laborers' International Union of North America, AFL-CIO, Local Union No. \_\_\_\_\_, from any salary or wages earned or to be earned by me as your employee (in my present or any future employment by you) such regular and periodic membership dues as the Union may certify as due and owing from me, as may be established from time to time by said Union. I authorize and direct you to deduct such amounts from my pay and to remit same to said Union at such times and in such manner as may be agreed upon between you and the Union at any time while this authorization is in effect.

This assignment, authorization and direction shall be irrevocable for a period of one (1) year from the date of delivery hereof to you, and I agree and direct that this assignment, authorization and direction shall be automatically renewed, and shall be irrevocable for successive periods of one (1) year, unless written notice is given by me to you and the Union not more than twenty (20) days and not less than ten (10) days prior to the expiration of each period of one (1) year.

This assignment is freely made pursuant to the provisions of the Postal Reorganization Act and is not contingent upon the existence of any agreement between you and my Union.

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Signature of Employee

Date

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Name of Employee  
(Print, Last Name, First, Middle)

Social Security Number

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Home Address  
(Street and Number)

(City and State)

(Zip code)

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Postal Installation

Installation Finance Number

FOR USE BY LOCAL UNION OFFICIAL

National Postal Mail Handlers Union, A Division of the Laborers' International Union of North America, AFL-CIO \_\_\_\_\_  
Local Union No. \_\_\_\_\_

I hereby certify that the regular dues of this Local Union for the above named member are currently established at

\$ \_\_\_\_\_ per pay period.

\_\_\_\_\_  
Signature and Title of Authorized Union Official      Date

FOR USE BY EMPLOYER REPRESENTATIVE

\_\_\_\_\_  
Date of Delivery to Employer

\_\_\_\_\_  
Signature and Title of Employer Representative

- C Notwithstanding the foregoing, employees' dues deduction authorizations (Standard Form 1187) which are presently on file with the Employer on behalf of the Union, shall continue to be honored and given full force and effect by the Employer unless and until revoked in accordance with their terms.
- D The Employer agrees that it will continue in effect, but without cost to employees, its existing program of payroll deductions at the request and on behalf of employees for remittance to financial institutions including credit unions. In addition, the Employer agrees without cost to the employee to make payroll deductions on behalf of such organization or organizations as the Union shall designate to receive funds to provide group automobile insurance for employees and/or homeowners/tenant liability insurance for employees, provided only one insurance carrier is selected to provide such coverage.

(The preceding Sections, Articles 17.2, 17.3, 17.4, 17.5 and 17.6, shall apply to Mail Handler Assistant employees.)

[See Memo, page 209]