



Homecare

Membership Application

SEIU Local 503, OPEU PO Box 12159 Salem OR 97309-0159

(Please print or type clearly.)

SOCIAL SECURITY NUMBER: _____ / _____ / _____ BIRTH DATE: _____ / _____ / _____
MONTH DAY YEAR

PROVIDER or EMPLOYEE I.D.#: _____ HOME E-MAIL: _____

NAME: _____ HOME PHONE: _____

RESIDENCE ADDRESS: _____
(REQUIRED) STREET CITY STATE ZIP

MAILING ADDRESS: _____
STREET CITY STATE ZIP

I desire to be represented by SEIU Local 503, OPEU and hereby designate SEIU Local 503, OPEU as my bargaining agent for all matters pertaining to collective bargaining. I request my employer to deduct from my salary, wages, or other sums due me by virtue of my employment, the amount of my dues for membership in SEIU Local 503, OPEU as provided in its Bylaws, and disburse same to SEIU Local 503, OPEU, unless notified by me in accordance with any union security agreement in effect.

The SEIU Local 503, OPEU Bylaws (Art. XIV, Sec. 9) provide for a contribution as determined from time to time by the member-elected General Council for the benefit of the Union's political action program. You may opt to have this contribution go to the SEIU Local 503, OPEU Scholarship Fund instead of the political action program by checking the box at the right.

Voluntary SEIU Local 503, OPEU Political Action Check-off Citizen Action for Political Education (CAPE)

\$4.16/month (2¢ per hour) \$8.33/month (4¢ per hour)

**This contribution qualifies for the Oregon Political Tax Credit.
Single filers are eligible for a credit of up to \$50 per year; joint filers up to \$100 per year.**

I hereby authorize my Employer to deduct the designated amount from my monthly earnings as a contribution to SEIU Local 503, OPEU CAPE. My contribution will be used to support member-endorsed candidates and for expenditures in connection with elections for Local, Legislative, Statewide and Federal offices. These elected officials make critical decisions on salaries, healthcare, retirement and other benefits and laws affecting SEIU Local 503, OPEU members. A portion of this contribution (as much as 48% for the average contributor) may be used by SEIU for federal elections. This contribution is not deductible for federal income tax purposes. I would like to make a contribution other than the above amounts: \$_____ (other)

The contribution amounts indicated above are only suggestions and I may choose not to contribute or to vary my contribution amount without reprisal from my Union or my Employer. As per federal law, only union members and union executive/administrative staff who are U.S. citizens or lawful permanent residents are eligible to contribute to SEIU COPE (the Federal Committee on Political Education). This authorization is made voluntarily and is not a condition of my employment or membership in the union. This authorization shall remain in effect until revoked in writing by me. This contribution is in addition to union dues.

Dues and fees to SEIU Local 503, OPEU are not deductible as charitable contributions for federal income tax purposes. Dues paid to SEIU Local 503, OPEU may qualify as business expenses, and may be deductible in limited circumstances subject to various restrictions imposed by the Internal Revenue Code. Changes which may from time to time occur in state and federal law will not alter these deduction requests, unless so indicated by me.

**SIGNATURE
REQUIRED**

SIGNATURE: _____ **DATE:** _____