



UNION OF AMERICAN PHYSICIANS AND DENTISTS
Membership Application and Payroll Deduction Authorization
University of California

Name (Last, First, Middle Initial) _____

Degree _____ Specialty _____ FTE _____

Home Address _____ City _____ State _____ Zip _____

Home Phone _____ Cell Phone _____

Office Phone _____

Non-Work Email _____

Employee ID Number _____ Campus _____

Monthly Membership Dues: 0.9% total gross pay.

I hereby authorize The Regents of the University of California to deduct from each of my salary warrants the amount consistent with the rate stated above and to transmit said sum to the Union of American Physicians and Dentists (UAPD). I also consent to the increase or decrease of such deduction rate to reflect any change in union dues instituted by the UAPD, in accordance with the Collective Bargaining Agreement. This authorization will remain in effect unless revoked by me in accordance with the provisions of the Collective Bargaining Agreement.

UAPD Political Action Program: I further authorize The Regents of the University of California to deduct \$10 per month from my salary warrants as a voluntary contribution to the UAPD Political Action Program. I understand that the UAPD Political Action Program uses the money it receives for political purposes, that my contribution is voluntarily made without any interference, restraint or coercion, and that I will suffer no reprisal if I choose not to authorize this deduction. I may revoke this authorization at any time by giving written notice. Contributions to the UAPD Political Action Program are not tax deductible as charitable contributions for federal income tax purposes. YES NO

Payroll deductions, including those legally required and those authorized by an employee, are assigned priorities. In the event there are insufficient earnings to cover all deductions, deductions will be taken in the order assigned by the University and no adjustment will be made in a subsequent pay period for membership deductions or contributions to the UAPD Political Action Program not deducted by reason of insufficient earnings.

Employee Signature

Date