

UNION DUES AUTHORIZATION / CANCELLATION

Employee Name: _____
 (Please Print) Last First MI

Empl ID: _____ SSN XXX-XX-_____
 (Refer to paystub/advice) (Last 4 digits)

Company Name: _____ Effective Date: _____
 (Refer to paystub/advice)

If this is a cancellation of Union dues proceed to the end the form - otherwise continue.

AUTHORIZATION OF MEMBERSHIP DUES DEDUCTIONS

I hereby authorize and direct the Company to deduct from my pay an amount equal to the Union dues/fees certified by the Union and to pay same to said Local Union in accordance with the terms of the Collective Bargaining Agreement between the Company and the Union. This Authorization is made voluntarily and is not conditioned on my present or future membership with the Union.

This Authorization is subject to the terms and conditions of the applicable Collective Bargaining Agreement and shall remain in effect in accordance with the specific provisions of the applicable Collective Bargaining Agreement. I understand that based on the specific provisions of the applicable Collective Bargaining Agreement that the Authorization may be irrevocable for a stated period of time outlined in the Agreement and that revocation of this Authorization must comply with the provisions of the Agreement, I agree this authorization shall be automatically renewed unless properly revoked by written notice by certified mail to the Company and the Union within time periods specified in the Agreement. Unless properly revoked, this Authorization shall remain in effect while I am employed in a job classification in the bargaining unit covered by an applicable Collective Bargaining Agreement and as long as there is an Agreement in effect providing for the payroll deduction on Union dues/fees.

Employee Signature: _____

PLEASE INDICATE WHICH UNION YOU ARE JOINING FROM THE LIST BELOW.

(If you are in doubt as to which Union applies, Contact your Union Representative)

KINGSPORT POWER COMPANY

- IBEW LOCAL 934 - CLASS 1 UD7011
- IBEW LOCAL 934 - CLASS 2 UD7021

APPALACHIAN POWER COMPANY

- IBEW LOCAL 978 - CLASS 'BA' UD7012
- IBEW LOCAL 978 - CLASS 'A' UD7022
- USWA LOCAL 8621 UD7041 /UD7051
- UMWA DISTRICT 17 THIS FORM IS NON-APPLICABLE FOR THIS UNION - PLEASE COMPLETE FORM Union Dues - Local 5396 Sporn Plant

KENTUCKY POWER COMPANY

- IBEW LOCAL 978 UD7012

INDIANA MICHIGAN POWER COMPANY

- IBEW LOCAL 876 UD7000 /UD7013
- IBEW LOCAL 1392 - CLASS 'BA' UD7023
- IBEW LOCAL 1392 - CLASS 'A' UD7061
- USWA LOCAL 13729 UD7031 /UD7301
- UWUA LOCAL 418 UD7042
- UWUA AFL/CIO LOCAL 418 UD7052

WHEELING POWER COMPANY

- UWUA LOCAL 264 UD7014

OHIO POWER COMPANY

- UWUA LOCAL 111 UD7015
- IBEW LOCAL 696 UD7025
- IBEW LOCAL 1466 - CLASS 'BA' (FORMALLY IBEW LOCAL 981) UD7032
- IBEW LOCAL 1466 - CLASS 'A' UD7221
- UWUA LOCAL 116 UD7043
- UMWA LOCAL 296 UD7053
- UWUA LOCAL 264 UD7062
- UWUA LOCAL 468 UD7072
- UMWA LOCAL 492 UD7081
- UMWA DISTRICT 12 LOCAL 2463 UD7091
- (Payroll Note: Requires Assessment 740 & Initiation Fee)
- UWUA LOCAL 478 UD7111
- IBEW LOCAL 978 - CLASS 'BA' UD7121
- IBEW LOCAL 978 - CLASS 'A' UD7141

COLUMBUS SOUTHERN POWER COMPANY

- IBEW LOCAL 1466 - CLASS 'BA' UD7016
- IBEW LOCAL 1466 - CLASS 'A' UD7026

RIVER TRANSPORTATION DIVISION

- USWA (BTH) (PAYROLL NOTE: REQUIRES An Initiation Fee) UD7017 /UD7127
- USWA (BSA) (PAYROLL NOTE: REQUIRES An Initiation Fee) UD7027 /UD7127

CONESVILLE COAL PREPARATION COMPANY

- UMWA DISTRICT 6 UD7018

AMERICAN ELECTRIC POWER SERVICE CORPORATION

- UWUA LOCAL 544 UD7101
- UMWA DISTRICT 17 UD7162

PUBLIC SERVICE COMPANY OF OKLAHOMA

- IUOE LOCAL # 627 UD7240
- IBEW LOCAL 1002 - CLASS 'BA' UD7401
- IBEW LOCAL 1002 - CLASS 'A' UD7402

SOUTHWESTERN ELECTRIC POWER COMPANY

- IBEW LOCAL # 329 - CLASS 'BA' UD7260
- IBEW LOCAL # 329 - CLASS 'A' UD7250
- ELECTRICAL WORKERS LOCAL # 386 CLASS 'BA' UD7280
- ELECTRICAL WORKERS LOCAL # 386 CLASS 'A' UD7270
- IBEW LOCAL # 738 - CLASS 'BA' UD7302
- IBEW LOCAL # 738 - CLASS 'A' UD7290

CANCELLATION OF UNION DUES

I hereby authorize the company to cancel my Union Dues.

Employee Signature: _____
 (Must also notify the Union in writing during the appropriate time period to properly cancel this authorization.)

PAYROLL USE ONLY	
Entered by: _____	Date: _____
Verified by: _____	