

# IBEW LOCAL 500 POLITICAL CHECK-OFF AUTHORIZATION (C.O.P.E.)

1 R. K.	2 EMPLOYEE NUMBER	3 CODE	ORGANIZATION	4 DEDUCTION AMOUNT
64	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> </div>	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> </div>	IBEW LOCAL 500	<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> <div style="border: 1px solid black; width: 20px; height: 20px;"></div> </div>

(Please Print)

EMPLOYEE'S LAST NAME	FIRST NAME	MIDDLE INITIAL

CHECK ONE:  \$2.00 PER MONTH  \$5.00 PER MONTH  OTHER \$ \_\_\_\_\_ PER MONTH

This authorization is signed voluntarily and not out of any fear of reprisal and on the understanding that the IBEW will use the money to make political contributions and expenditures connected with federal, state and local elections and this voluntary authorization may be revoked at any time by notifying the company and the LOCAL 500 in writing of a desire to do so.

EMPLOYEE SIGNATURE	DATE SIGNED
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I certify that the above named employee is a member of the above listed Employees' Association.

ORGANIZATION PRESIDENT	DATE SIGNED
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