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Revised NRLCA Form 1187

UNITED STATES POSTAL SERVICE

RURAL CARRIER	
CLASSIFICATION	ı

AUTHORIZATION FOR DEDUCTION OF DUES			CLASSIFICATION			CLASSIFICATION		
		Regul	ar PTF	Relief ARC				
(USPS EMPLOYEE I.	D.NUMBER)							
				U				
LAST NAME		FIRST NAME MI						
MAILING ADDDESS	CITY		OTATE	ZID CODE : 4				
MAILING ADDRESS	CITY	<u>,</u>	STATE	ZIP CODE +4				
POSTAL INSTALLATION WHERE EMPLOYED	ZIP CODE OF INSTA	ALLATION	INSTALLAT	ION FINANCE NO.				
SECTION A - AUTHORIZA	TION BY EMPL	OYEE						
authorization is in effect. This assignment, authorization and direction shall be irrevocable you, and I agree and direct that this assignment, authorization and d for successive periods of one (1) year, unless written notice is given not less than ten (10) days prior to the expiration of each period of or This assignment is freely made pursuant to the provisions of the Posta agreement between you and my Union. Contributions or gifts (including dues) to the NRLCA are not tax deducted deductible under other provisions of the Internal Revenue Code.	irection shall be au by me to you and t ne year. I Reorganization Act	tomatically rehe Union no	enewed, and t more than natingent upon	d shall be irrevocable twenty (20) days and the existence of any				
EMPLOYEE SIGNATURE DATE	PHONE		EMAIL ADD	PRESS				
SECTION B- FOR USE I	BY STATE ASSO	CIATION						
R - NATIONAL RURAL LETTER CA	RRIERS'	ASSOC	CIATIO	ON				
SIGNATURE OF ACCEPTING UNION OFFICIAL	DAT		OC #	STATE				
I hereby certify that the dues of this organization for the above named mem	ber, for		<u> </u>	IL				
the applicable designation, are currently established at \$per page	y period.	D	ATE	REMIT #				
Christine De Nino	, STATE SECRET	ARY						
SECTION C- FOR USE BY	<u>-</u> :							
Date of Delivery to Employer (For National Office use)								
ANNIVERSARY DATE TO BE USED AT USPS PERSONNEL OFFICE								

Send to:

CHRISTINE DE NINO

ILRLCA STATE SECRETARY-TREASURER

PO BOX 98

GALENA, IL 61036-0098

Recruited by: Address:

EID #: __