



CUE-IBT Membership Application

2855 Telegraph Ave. #301
Berkeley, Ca 94705
(510) 845-2221 (Phone), (510) 845-7444 (Fax)
www.cueunion.org records@cueunion.org

WHO'S ELIGIBLE TO JOIN CUE IBT

Any non-supervisory career, casual or probationary employee whose payroll title is in UC's clerical and allied services unit, including: Administrative Assistants; ___Assistants; Administrative Services (at LBNL); Bibliographers; Cashiers; Child Care Assistants; Clerks, Coders, Collections Representatives; Key Entry Operators; Library Assistants; Program Assistants; Public Safety Dispatchers; Secretaries; Survey Workers; Word Processing Specialists, and others. (Contact CUE IBT if you're unsure whether you're eligible.)

MEMBER INFORMATION

PAYROLL DEDUCTION AUTHORIZATION

Please print legibly

Last Name	First Name	M.I.	Payroll Title (not working title)
Mailing Address – Number & Street, Apt., P.O. Box, etc.			Department
City	State	Zip	Room # or Floor Building Name (if any)
Home Phone Work Phone			Building Street Address (if any)
Work Email Address			City and Zip Code (if off-campus location)
Non work Email Address			Use My <input type="radio"/> Work <input type="radio"/> Non Work email address to contact me. (Please check one)
Campus	Loc	Employee ID #	MONTHLY DEDUCTION
			ENROLL CURRENT AMOUNT
Date			DUES X 0.5% (1/2 OF 1%) PER MONTH
Action on this for to become effective the paycheck beginning:			TOTALS 0.5% (1/2 OF 1%) PER MONTH
			ORGANIZATION NAME: TEAMSTER LOCAL 2010

I authorize the Regents of the University of California to withhold monthly or cease withholding from my earnings as an employee, membership dues, initiation fees and general assessments as indicted above. I understand and agree to the arrangement whereby one total monthly deduction will be made by the University based upon the current rate of dues, initiation fees, and general assessments. I also understand that changes in the rate of dues, initiation fees and general assessments may be made after notice to that effect is given to the university by the organization to which such authorized deductions are assigned and I hereby expressly agree that pursuant to such notice the university may withhold from my earnings amounts either greater than or less than those shown above without obligation to inform me before doing so or to seek additional authorization from me for such withholdings. The University will remit the amount deducted to the official designated by the organization. This authorization shall remain in effect until revoked by me---allowing up to 30 days' time to change the payroll records in order to make effective this assignment or revocation thereof---or until another employee organization becomes my exclusive representative. It is understood that this authorization shall become void in the event the employee organization's eligibility for payroll deduction terminates for any reason. Upon termination of my employment with the University, this authorization will no longer be in effect. This authorization does not include dues, initiation fees and general assessments to cover any time prior to the payroll period in which the initial deduction is made. 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 required and authorized deductions, it is understood that deductions will be taken in the order assigned by the University and no adjustment will made in a subsequent pay period or membership dues, initiation fees and general assessments.

Employee Signature	Date
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I understand that my membership makes TEAMSTER LOCAL 2010 possible and entitles me to participate in union decisions and activities, and that as a member I enjoy all rights and privileges guaranteed by the union constitution.

ACTIVE MEMBERSHIP MAKES A STRONG UNION

- PLEASE ADD ME TO THE **TEAMSTER LOCAL 2010** LITERATURE DISTRIBUTION NETWORK I CAN DISTRIBUTE NEWSLETTERS AND FLYERS IN MY DEPARTMENT OR BUILDING.
- PLEASE CALL ME. I CAN CONTRIBUTE TIME TO HELP BUILD THE UNION.

Please sign and date, and then return completed form to **TEAMSTER LOCAL 2010**. Do not submit directly to campus payroll or labor relations.

For University use only

Tran Code	Employee ID #	Date	Element No.	Bal CD	Amount					
1	2	4	12	13	18	19	22	23	23	30
X1		MO	DY	YR	6		G	.	.	.
X1		.	.	.	6		G	.	.	.
X1		.	.	.	6		G	.	.	.



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Four easy steps to a stronger union:

1. Fill out the membership form legibly. Be sure it is signed and dated
2. Use this cover sheet to mail your completed form to CUE IBT Local 2010. Tape closed. **DO NOT STAPLE!**
3. Drop in US Mail Only. Don't use campus mail.
4. **GET INVOLVED!** Call the phone number below for your campus. A union is only as active as its members.

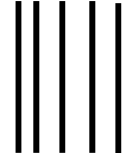
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BUSINESS REPLY MAIL

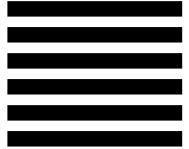
FIRST-CLASS MAIL PERMIT NO. 3821 BERKELEY, CA.

POSTAGE WILL BE PAID BY ADDRESSEE

CUE IBT LOCAL 2010.
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Berkeley, Ca 94705



NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES



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	BERKELEY / UCOP	(510) 841-0700
	DAVIS	(916) 419-6457
	LAWRENCE BERKELEY NATIONAL LAB	(510) 841-1332
	LOS ANGELES	(310) 473-7428
	SAN FRANCISCO	(415) 346-3537
	IRVINE	(949) 509-6562
	SANTA CRUZ	(831) 420-0258
	RIVERSIDE	(951) 845-5185
	SAN DIEGO	(619) 296-4937
	SANTA BARBARA	(805) 685-5550
	MERCED	(559) 645-2599