



STATE EMPLOYEES TRADES COUNCIL UNITED

We've been on your side since 1976



MEMBERSHIP FORM

DUES AUTHORIZATION

BENEFICIARY/ADDRESS CHANGE/EMAIL CHANGE

UC EMPLOYEES ONLY

I hereby request and accept membership in the State Employees Trades Council-United (SETC-United). I accept and assume all rights and obligations of membership in SETC-United, including the obligation to pay membership dues in an amount equivalent to the membership dues approved by the membership of the State Employees Trades Council-United.

I authorize my employer, the University of California, to deduct the monthly membership dues for SETC-United from my wages and remit these deductions directly to SETC-United. This authorization supersedes and revokes any and all prior authorizations for deduction of union dues from my wages earned as a UC employee.

Please complete the attached "Employee Organization Membership Payroll Deduction Authorization" form and submit to your campus steward or payroll office.

Please complete this form in its entirety and check all boxes that apply, sign and mail to: SETC-United Main Office, 6366 Commerce Blvd., #346 Rohnert Park, CA 94928 or fax to 707-293-9440.

PLEASE CHECK ALL THAT APPLY:

Employment Status:

- Career Employee
- Limited Employee

Beneficiary/Address Change/Email Address Change:

- Change of Address
- Change in Beneficiary
- Email address Change

Print Full Legal Name		Signature	
Employee I.D. No. (Optional)		Date of Birth	
Job Classification	Campus	Trade Shop	
Address	City	Zip	Cell Phone No. / Campus Phone No.
Campus Email Address (Required)		Personal Email Address (Optional)	

Beneficiary Information (Required)

Beneficiary Full Legal Name	Relationship to Member	Date of Marriage	Cell Phone No.
Address	City		Zip

Today's Date: _____



**EMPLOYEE ORGANIZATION MEMBERSHIP
PAYROLL DEDUCTION AUTHORIZATION**
UPAY 669 (R7/87)

CAMPUS	LOC	EMPLOYEE I.D.	DATE	
ACTION ON THIS FORM TO BECOME EFFECTIVE THE PAY PERIOD BEGINNING:				DATE
MONTHLY DEDUCTION				
LAST NAME, FIRST, MIDDLE INITIAL		ENROLL	CANCEL	CURRENT AMOUNT
DEPARTMENT EMPLOYED AT U.C.	DUES 1.2%	X		
TITLE AT U.C.	INITIATION FEES			
ORGANIZATION NAME (INCLUDE LOCAL NAME AND NUMBER) SETC-UNITED	GENERAL ASSESSMENT			
			TOTAL	

PLEASE PRINT OR TYPE.

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 indicated 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 be made in a subsequent pay period for membership dues, initiation fees and general assessments.

EMPLOYEE SIGNATURE	DATE
--------------------	------

FOR UNIVERSITY USE ONLY

TRAN. CODE	EMPLOYEE ID NO.	DATE	ELEMENT NO.	BAL CD	AMOUNT
1 2 4	12	13 MO DY YR	19 22	23	24 30
X1		MO DY YR	6	G	
X1		MO DY YR	6	G	
X1		MO DY YR	6	G	

RETENTION: 1 YEAR AFTER INACTIVE – ACCOUNTING OFFICE

SEE BELOW FOR PRIVACY NOTIFICATION.