

Signature



I will do my part to make elected officials listen to working people.

Sign me up to contribute to SEIU's Committee on Political Education (COPE)

Please complete all fields. Employer Name _____ Address City, State, Zip Birth Date _____ Home Phone _____ Social Security Number (last 4 digits) Internal Use Only I authorize SEIU 521 COPE to deduct the following amount each month: per month & transfer funds to SEIU COPE \$5 per month & transfer funds to SEIU COPE \$10 per month & transfer funds to SEIU COPE Option A: Automatic COPE deduction from bank account Option B: Automatic COPE deduction from credit/debit card Card: MasterCard VISA Discover Bank Name Account Type Savings Checking (attach voided check) American Express Debit Card Routing Number (9 digits) ____ ___ ___ ___ ___ ___ Expiration Date _____/___ My signature below shows that I have received and agree with the terms on the both sides of this card.

Help Working Families Gain a Stronger Voice Contribute to SEIU's Committee on Political Education (COPE)

Date ___

I am volunteering to contribute to the SEIU Committee on Political Education (COPE) to help make elected officials stand up for working people.

I understand that: 1) I am not required to sign this form or make COPE contributions as a condition of my employment by my employer or membership in the union; 2) I may refuse to contribute without any reprisal; 3) Only union members and executive/administrative staff who are U.S. citizens or lawful permanent residents are eligible to contribute to SEIU COPE; 4) The amounts on this form are merely a suggestion, and I may contribute more or less by this or some other means without fear of favor or disadvantage from the union or my employer; 5) SEIU COPE uses the money it receives for political purposes, including but not limited to addressing political issues of public importance and contributing to and spending money in connection with federal, state and local elections.

Contributions to SEIU COPE are not deductible for federal income tax purposes. This authorization shall remain in effect until revoked in writing by me.

Please sign the reverse side of this card to indicate that you have read and agree with these terms.