

AMERICAN TRAIN DISPATCHERS ASSOCIATION

4239 West 150th Street

Cleveland Ohio 44135

Phone 216-251-7984

Fax 216-251-8190



WAGE ASSIGNMENT AUTHORIZATION

I hereby assign to the AMERICAN TRAIN DISPATCHERS ASSOCIATION that part of my wages necessary to pay my union dues and initiation fees and/or assessments (not including fines and penalties) as reported to the Company by the Organization as provided under the Deduction Agreement entered into by and between the Organization and the Company; and I hereby authorize the Company to deduct from my wages all such sums and to pay them over to the Organization. This authorization may be revoked by the undersigned in writing after the expiration of one (1) year, or upon the termination date of the aforesaid Deduction Agreement, whichever occurs sooner.

First Name MI Last Name

Street Address

City State Zip Code

Soc. Sec. Number RR. Employee Number

EMPLOYER

OFFICE

CRAFT

SIGNATURE _____

Please complete form, print, then fax or mail to the Secretary-Treasurer