

**Eastern Michigan University**  
**Union Dues/Agency Fee Payroll Deduction Form**

*I hereby authorize the following deduction(s) from my salary checks, and the remittance of these deductions(s) to the indicated agencies.*

<b>EID #</b> _____	<b>Eclass</b> _____
<b>Name</b> _____ (Last name first-please print)	
<b>Date</b> ____/____/____	

\_\_\_\_\_ **EMU-FT LECT(202)**

\_\_\_\_\_ **EMU-Adj LECT(211)**

**Signature:** \_\_\_\_\_

ORIGINAL SIGNATURE TO RESPECTIVE UNION  
COPIES OF COMPLETED FORM WITH SIGNATURE TO PAYROLL / EMPLOYEE