

## APPENDIX C

### PAYROLL DEDUCTION AUTHORIZATION

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#### LOCAL 3080, METRO BROWARD PROFESSIONAL FIRE FIGHTERS, INTERNATIONAL ASSOCIATION OF FIRE FIGHTERS REVOCATION OF PAYROLL DEDUCTION AUTHORIZATION

Employee Name: \_\_\_\_\_ Employee #: \_\_\_\_\_

Employer: \_\_\_\_\_ Date: \_\_\_\_\_

I hereby authorize the Payroll Department to **stop** the payroll deduction of Union dues from my wages to the Local 3080, Metro Broward Professional Fire Fighters, International Association of Fire Fighters.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
District Vice President or Treasurer Signature

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#### LOCAL 3080, METRO BROWARD PROFESSIONAL FIRE FIGHTERS, INTERNATIONAL ASSOCIATION OF FIRE FIGHTERS PAYROLL DEDUCTION AUTHORIZATION

Employee Name: \_\_\_\_\_ Employee #: \_\_\_\_\_

Employer: \_\_\_\_\_ Date: \_\_\_\_\_

I hereby authorize the Payroll Department to **start** the payroll deduction of Union dues from my wages to the Local 3080, Metro Broward Professional Fire Fighters, International Association of Fire Fighters.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
District Vice President or Treasurer Signature