

VOTE/COPE

The undersigned authorizes the Rockland BOCES school district to deduct from each of my paychecks (10) the sum of (please check one)

\$20.00 \$10.00 \$5.00 \$2.50 other: _____

And to forward that amount to VOTE/COPE, Post office Box 5190 Albany, NY 12205-0190. The authorization is made voluntarily and without fear of reprisal and with the understanding that the making of payments to VOTE/COPE are not conditions of membership in any labor organization or of employment with the school district and that VOTE/COPE will use the money it receives to make political contributions and expenditures in connection with federal, state and elections and issues. This authorization shall remain in full force and effect for all purposes while I am employed in this school district, or until revoked by me in writing between September 1st and September 15th of any given year.

Please Print

Name:

Address:

Signature:

Date: