AFGE

REQUEST FOR PAYROLL DEDUCTIONS FOR LABOR ORGANIZATION DUES

Section 5525 of title 5 United States Code (Allotments and Assignments of Pay) permits Federal agencies to collect this information. This completed form is used to request that labor organization dues be deducted from your pay and to notify your labor organization of the deduction. Completing this form is voluntary, but it may not be processed if all requested information is not provided.

This record may be disclosed outside your agency to: I) the Department of the Treasury to make proper financial adjustments; 2) a Congressional office if you make an inquiry to that office related to this record; 3) a court or an appropriate Government agency if the Government is party to a legal suit; 4) an appropriate law enforcement agency if we become aware of a legal violation; 5) an organization which is a designated collection agent of a particular labor organization; and 6) other Federal agencies for management, statistical and other official functions (without your personal identification).

Executive Order 9397 allows Federal agencies to use the social security number (SSN) as an individual identifier to avoid confusion caused by employees with the same or similar names. Supplying your SSN is voluntary, but failure to provide it, when it is used as the employee identification number, may mean that payroll deductions cannot be processed.

Your agency shall provide an additional statement if it uses the information furnished on this form for purposes other than those mentioned above.

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PLEASE PRINT IN BLOCK UPPERCASE LETTERING USING BLACK/BLUE INK. 1. Last Name First																																																
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full pay period of each month, the amount certified below as the regular dues of the: that Standard Form 1188, Cancellation of Payroll Deduction available from my employing agency, and that I may cancel the Form 1188 or other written cancellation request with the payron 1188 or other writ																					-																											
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AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES, AFL-CIO, LOCAL																																																
I hereby certify that the regular dues of this organization for the above named member are currently established at \$ per biweekly pay period.																																																
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*IRS Form 1099 or W-2 will be issued based on current income tax laws by the payer.