

**UFF-PAC PAYROLL DEDUCTION AUTHORIZATION FORM**

United Faculty of Florida – Political Action Committee  
306 Park Avenue  
Tallahassee, FL 32301 850-224-8220

Please Print:

University/College \_\_\_\_\_ Dept.: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

UFF-PAC Payroll Deduction (For State University Employees)

I authorize the Board of Trustees, through the University, to deduct from my pay, starting with the first full biweekly pay period commencing not earlier than seven full days from the date this authorization is received by the University, contributions to the UFF-Political Action Committee in the amount of \$1.00 per pay period, and I direct that the sum so deducted be paid over to the UFF.

The above deduction authorization shall continue until either revoked by me through written notice to my University personnel office or my transfer out of this bargaining unit.

\_\_\_\_\_  
Member's Signature

\_\_\_\_\_  
Date

**PLEASE RETURN YOUR SIGNED UFF-PAC DEDUCTION AUTHORIZATION FORM TO:**

Professor Jack Fiorito, President  
UFF-FSU Chapter  
P.O. Box 3061110  
Tallahassee, FL 32306-1110