



HARDSHIP FUND

for Local 8 Members in Need

Hardship Fund Deduction Authorization



I hereby authorize my Employer _____ to deduct \$_____ per month from my paycheck and forward this amount to the Secretary-Treasurer of OPEIU Local 8, AFL-CIO, by the last day of each month or in accordance with my Collective Bargaining Agreement. This authorization is signed voluntarily and with the understanding that OPEIU Local 8 will use this money to assist fellow members who are experiencing an immediate, severe and temporary financial situation due to an emergency. The remittance check will be made payable to OPEIU Local 8 Hardship Fund. **Contributions to OPEIU Local 8's Hardship Fund are now tax deductible!**

Signature _____ Date _____

Print Name _____

Home Address _____

City _____ State _____ Zip _____

Non-Work Phone _____ Personal Email _____

Check if this is a change of address.

Return this form to:
OPEIU Local 8
2900 Eastlake Ave E Ste 220
Seattle, WA 98102-3012

s:office forms/Hardship Fund Payroll Deduction Authorization.doc
psiel#1239/afl-cio
updated 2.19.21

OFFICE AND PROFESSIONAL EMPLOYEES INTERNATIONAL UNION LOCAL 8
1-800-600-2433 or 206-441-8880 ★ Fax: 206-441-0207 ★ www.opeiu8.org

Find us on  www.facebook.com/OPEIULocal8