

FOLSOM CORDOVA EDUCATION ASSOCIATION
Advocacy for Education Committee

3083 Gold Canal Drive, Suite 200, Rancho Cordova, CA 95670
PHONE 916.635.3202 FAX 916.635.7982 EMAIL support@fcea.com

Monthly Payroll Deduction Authorization

I _____ hereby request that the FCUSD Payroll Department withhold an additional **monthly** amount of:

\$1 \$5 \$10 \$15 \$20 \$_____

This monthly amount is to be directed to the FCEAAEC and is in addition to my current membership dues, effectively immediately. I understand that annual contributions to a Political Action Committee in excess of \$99 become a matter of public record.

(Employee Signature)

(Date)

(Print Name)

(Employee ID #)

[PLEASE RETURN THIS FORM TO FCEA]

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