



Authorization for Payroll Deduction of Work Assessment Fee
Payable to I.A.T.S.E. Local No. 30

Date: _____

I hereby assign to Local Union No. 30, an affiliate of the International Alliance of Theatrical Stage Employees and Moving Picture Technicians, Artists and Allied Crafts, of the United States, its Territories and Canada, from any wages earned or to be earned by me, the amount established by the Union each pay period as my work assessment I authorize and direct you to deduct such amounts from my paycheck for each pay period and to remit same to the Union.

Signature of Employee

_____-_____-_____-

Social Security Number

Printed Name