## UNITED FACULTY OF FLORIDA UFF-FEA-NEA SAMPLE UFF-PAC PAYROLL DEDUCTION AUTHORIZATION FORM

United Faculty of Florida - Political Action Committee 115 N Calhoun Street, Suite 6 Tallahassee, FL 32301 850-224-8220

Please Print			
University/College	Dept.:		
Name:			
Address:			
City:	State:	Zip:	
UFF-PAC Payroll Deduction (For University of Florida Faculty)			
I authorize the UF Board of Trustees, through the University Administration, to deduct from my pay contributions to UFF Political Action Committee in the amount of \$1 per pay period, and I direct that the sum so deducted be paid over to UFF. The above deduction authorization shall continue until revoked by me through written notice to the Office of Human Resource Services and to UFF.			
Signature (for payroll deduction auth	orization)		Today's Date
Return to the UFF State Office listed above, or to the UFF-UF Office, P.O. Box 112070, 308 Yon Hall, UF.			