

CHECKOFF FORM

Assignment and Authorization for Checkoff of Dues, Assessments by the Association and the FDX MEC, Insurance Premiums, and Service Charges

TO: Federal Express Corporation

I,, hereby authorize to deduct from my earnings for each regular and "off cyc	and direct l	Federal Express Co	rporatior
standard membership Association dues (or such standa	ırd member	ship dues as may	hereafter
be established by the Association), assessments by the MEC, service charges, insurance premiums (deducted of payments, as are now or may hereafter be established in By-Laws of the Association and as defined in Section 29	nce per mo n accordanc	nth), and arrangen e with the Constitu	nent plar ution and
Air Line Pilots Association, International. I agree that the revoked or until termination of the checkoff agreement be the Association, whichever occurs sooner.			
ALPA Member Number:			
Pilot's Name:			
Street Address:			
City:	State:	Zip:	
Employee Number:			
	Date		

E-mail: Membership@alpa.org

Fax: 703-464-2115

Mail: Air Line Pilots Association, Int'l

c/o Membership Administration Department

7950 Jones Branch Drive Ste 400S

McLean, VA 22102

Disclosure Statement Required by Federal Tax Law

Dues, contributions, and gifts to ALPA are not tax deductible as charitable contributions. However, they may be tax deductible as ordinary and necessary business expenses.







