



CHECKOFF FORM

Assignment and Authorization for Checkoff of ALPA Dues and Assessments, or Service Charges

TO: EXPRESSJET AIRLINES, INC.

I, _____, hereby authorize and direct ExpressJet Airlines, Inc. to deduct from my pay each month such dues and assessments as are now or may hereafter be established in accordance with the ALPA Constitution and By-Laws, or a service charge in an amount equal to such dues and assessments, for remittance to the Air Line Pilots Association, International.

If the checkoff agreement is terminated, the authorization will be automatically terminated. In the absence of a termination of the checkoff agreement, this authorization may be revoked by me at any time following thirty (30) days written notice to ExpressJet Airlines, Director of Human Resources, and the ALPA Membership Services Department by Certified or Registered Mail, Return Receipt Requested.

Amount to be Deducted Each Month - 1.85% Plus Assessments, (if any)

ALPA Member Number _____

Street Address _____

City _____ State _____ Zip _____

Employee Number _____

Signature _____

Date _____

Please Return this Form to ALPA Membership Administration Department.

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.

SAVE

PRINT

SUBMIT

CLEAR