

## Assignment and Authorization

for Check-off of Association Dues, Assessments, MEC Assessments and Agency Shop Fees for the Air Line Pilots Association, International

TO: FRONTIER AIRLINES, INC.

10.1KO	IVIIER/MILLINES, IIVC.	
I,	, her	reby authorize and direct Frontier Airlines, Inc. ("Frontier") to deduct
		d "off cycle" paycheck a sum equal to the membership dues, assessments,
-		ne Pilots Association, International ("Association") as are now or may
hereafter	be established in accordar	nce with the Constitution and By-Laws of the Association, and agency
shop fees	s established by the collective	ve bargaining agreement between Frontier and the Association.
expiratio	n of one year from the date	d direction may be revoked by me in writing at any time after the e hereof, or upon the termination date of the dues/assessment/agency ne Company and the Association, whichever occurs sooner.
Pilot	's Name:	ALPA Member Number:
Signature of Pilot:		Date:
Pilot	's Mailing Address:	
Emp	loyee Number:	
	Please return this form	to the ALPA Membership Administration Department.
E-mail:	Membership@alpa.org	
Fax:	703-464-2115	
Mail:	Air Line Pilots Association	n, Int'l

## 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.





c/o Membership Administration Department

7950 Jones Branch Drive Ste 400S

McLean, VA 22102



