



Thank you. Your EMPAC deduction form has been received. Please print out this page, read the agreement and sign in the space provided.

I, the undersigned, hereby authorize my employer to deduct voluntary EMPAC contributions, in the amount designated above, from my wages/pension on a monthly basis for transmittal to SEANC in a lump sum with my SEANC dues. This authorization shall continue until cancelled by me by written notice to EMPAC.

North Carolina law requires the Employees Political Action Committee to report the name, address, occupation and employer of individuals whose contributions exceed \$50 in an election cycle. Contributions are limited to \$4,000 per individual per election cycle.

Signature:

Print Name:

Date:

We cannot process your EMPAC deduction until we have a signature on file. After printing and signing this agreement, please send:

1) By fax -- 800-296-4999 or 919-829-5829

OR

2) By mail -- SEANC, P.O. Drawer 27727, Raleigh, NC 27611