

То:	Director of Finance			
From:	El Cajon Police Officers	' Association (	(ECPOA)	
Reference:	Addition of Member			
You are hereby authorized to deduct from my salary warrant, each pay period, the amount of \$: said amount to be paid to the El Cajon Police Officers' Association. Including \$2.00 per pay period to the ECPOA –Political Action Committee-(PAC) and \$2.00 per pay period to the ECPOA-Athletic Fund (AF)  (Initials)  This authorization may be terminated by me at any time through the filing of a written notice with the Finance Department and the ECPOA President or designee. The ECPOA must be made aware of any changes and I hereby agree to be responsible for any cost neutred by the ECPOA as a result of any changes to dues, insurance coverage, or any other ECPOA related expense paid for on my behalf by the ECPOA.				
Effective imm	nediately:	 te		
Pri	nt Name	_	Signature	
	SSN			
ECPOA R	Representative	-		