

## UNITED SCHOOL EMPLOYEES OF PASCO

EMPLOYEE ID	PRINT NAME (LAST NAME, FIRST NAME)	WORKSITE	JOBTITLE
ADDRESS		CITY	STATE      ZIP CODE
(      ) -	PERSONAL E-MAIL ADDRESS (not your @pasco.k12.fl.us email)		<b>For USEP Use Only</b> Date Received: _____  Sent to District: ____/____/____ MS: ____/____/____    MP: ____/____/____
HOME PHONE			
<b>USEP CONTINUING MEMBERSHIP APPLICATION</b>			
<input type="checkbox"/> <b>PAYROLL DEDUCTION</b> I authorize the District School Board of Pasco County to deduct membership dues from my paycheck to be remitted to the United School Employees of Pasco. I understand that I may terminate these deductions at any time by officially notifying USEP in writing and following revocation process.			
Signature _____		Date _____	
<input type="checkbox"/> <b>CASH PAY</b>			
<b>IRS TAX DISCLOSURE REQUIREMENT</b>			
Dues paid to United School Employees of Pasco may not be deductible for federal income purposes; however, under limited circumstances, dues may qualify as a business expense.			

Recruiting Member (please print)

**PLEASE PRINT CLEARLY AND RETURN THROUGH THE COURIER**