

SIUC Annuitants Association  
Local Chapter of the State University Annuitants Association  
**Payroll Deduction Authorization Form**

Membership dues (\$45 a year) are collected annually. If your spouse would like to become a member, please deduct \$90 for two individual memberships. (Spouse membership is very important to our organization in reporting membership totals and in financing our activities.)

**Employee Information** (Please Print)

Name: \_\_\_\_\_  
Last First MI

AIS ID: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Email: \_\_\_\_\_

\*Spouse Name: \_\_\_\_\_  
Last First MI

\*Include if deduction amount includes a spouse.

Deduction Type:     New                       Change                       Revocation \_\_\_\_\_  
Effective Date

**One Annual Deduction Amount**

\_\_\_\_\_ Annual member payment of \$45                      \_\_\_\_\_ Annual member and spouse of \$90

**OR Perpetual Deduction Amount**

_____ Monthly Payroll Employee Membership (3 payments of \$15)	_____ Monthly Payroll Employee and Spouse Membership (3 payments of \$30)
_____ Semi-monthly Payroll Employee Membership (6 payments of \$7.50)	_____ Semi-monthly Payroll Employee and Spouse Membership (6 payments of \$15)
_____ Bi-weekly Payroll Employee Membership (6 payments of \$7.50)	_____ Bi-weekly Payroll Employee and Spouse Membership (6 payments of \$15)

**Employee Signature\*:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**\*Dues deduction will be perpetual until the member notifies SUAA and completes a new form indicating "revocation" in the deduction type. Deductions for subsequent years will be deducted in the month enrollment began.**

**Send form to :** SIUC                      Fax: 618-453-6693  
Human Resources - Benefits              Email: HRBenefits@siu.edu  
900 Normal Ave  
MC 6520  
Carbondale, IL 62901

**For SUAA Office Use Only:**  
SUAA Authorization: \_\_\_\_\_ Date: \_\_\_\_\_