

# Authorization For Representation

I authorize IBEW Local Union 98 to represent me in collective bargaining with my employer.

Name \_\_\_\_\_

Please Print Legibly – First, Middle, Last

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

Employer \_\_\_\_\_ Location \_\_\_\_\_

Department \_\_\_\_\_ Manager \_\_\_\_\_

Job Title \_\_\_\_\_ Shift 1st \_\_\_\_\_ 2nd \_\_\_\_\_ 3rd \_\_\_\_\_

\_\_\_\_\_  
Date of Authorization

\_\_\_\_\_  
Signature