REPRESENTATION AUTHORITZATION AND REQUEST FOR AN EMPLOYEES' ELECTION UNDER THE STATE EMPLOYMENT REALTIONS BOARD

I AM AN EMPLOYEE OF			
Job Classification		_ Dept	Shift
HOME ADDRESS			
	(Please Print Clearly)		
CITY			ZIP CODE
I Authorize TEAMSTERS LOCAL UNION NO. 413, affiliated with the International Brotherhood of Teamsters, to represent me in negotiations for better wages, hours and working conditions.			
BE SURE YOU DATE AND SIGN THIS CARD Home Phone ()_			
Sign	ature		
Date			
(PLEASE PRINT NAME HERE)			