

THE CIVIL SERVICE EMPLOYEES ASSOCIATION, INC.
LOCAL 1000, AFSCME, AFL-CIO

INDIVIDUAL CANDIDATE ELIGIBILITY AND CONSENT

THE FRONT AND BACK OF THIS FORM MUST BE PROPERLY COMPLETED PRIOR TO RECEIVING NOMINATING PETITIONS.

"Member in Good Standing" means that you have fully paid your dues continuously without interruption since June 1 of last year. If you have been on leave from payroll and accepted a gratuitous (dues free) membership status at any time since June 1 of last year, you are NOT a member in good standing for election purposes in this year's upcoming elections.

If you have any questions regarding your status, you may seek clarification by calling the Membership Department at 1-800-342-4146, ext. 1328.

* * Fill out properly depending on the position you are running for. * *

I CERTIFY THAT:

➤ (a) I have been a member in good standing of the 333 Local since June 1, 2008.
(Name)

- OR -

(b) I have been a member in good standing of the _____ Unit since June 1, _____.
(Name)

➤ I have not been a member of a competing labor association or union since June 1, _____.

➤ I am not currently serving a disciplinary penalty imposed by the CSEA Judicial Board.

➤ I am not currently the subject of a bonding claim by the Association or disqualified from being covered by the Association's surety bond.

Signature

Date

N-3

THE CIVIL SERVICE EMPLOYEES ASSOCIATION, INC.
LOCAL 1000, AFSCME, AFL-CIO

INDIVIDUAL PETITION REQUEST AND CANDIDATE ELIGIBILITY

THE FRONT AND BACK OF THIS FORM MUST BE PROPERLY COMPLETED PRIOR TO RECEIVING NOMINATING PETITIONS.

I HEREBY REQUEST NOMINATING PETITIONS FOR _____
WHO WISHES TO QUALIFY FOR _____

CANDIDATE INFORMATION:

Last 4 digits of Social Security Number: _____

Region#: _____ Local#: _____ Unit#: _____

Residence Address: _____

Work Site: _____

Phone Numbers: (work: _____) (home: _____)

REQUESTING MEMBER'S INFORMATION (if not the candidate):

Last 4 digits of Social Security Number: _____

Region#: _____ Local#: _____ Unit#: _____

Phone Numbers: (work: _____) (home: _____)

Signature

Date

Check one of the following:

___ Petitions will be picked up by: _____

___ Petitions are to be mailed to [Name & Address]:

