

**COMMITTEE ON POLITICAL EDUCATION (COPE)
DEDUCTION FORM**

TO THE STATE UNIVERSITIES RETIREMENT SYSTEM (SURS)

I hereby authorize and direct the State Universities Retirement System (SURS) through its officers, agents and employees, to deduct from the portion of my pension the amount of \$ _____ monthly, and to transfer and pay that amount to the Cook County College Teachers Union Committee on Political Education (COPE), 1901 W. Carroll Ave, Chicago, Illinois 60612.

This authorization is signed voluntarily on the understanding that the Cook County College Teachers Union Committee on Political Education will use the money contributed to carry out the political activities of the Union.

In consideration of the above described service rendered by the State Universities Retirement System (SURS), its members, officers, agents and employees, the undersigned hereby releases and discharges the State Universities Retirement System (SURS), its members, agents and employees, of and from any and all liability whatsoever arising as a result of the authorization herein given.

This voluntary authorization is revocable by me at any time by giving written notice to the State Universities Retirement System (SURS).

Signature

XXX-XX-

Social Security Number (Last 4 Digits)

Effective Date

Personal E-Mail

Home Phone Number

Mr.

Ms.

Last Name (Print)

First

Middle

Street Address

City

State

Zip Code