

**PSC UNION DEFENSE FUND  
DIRECT CONTRIBUTION CARD  
25 West 43<sup>rd</sup> St., 5<sup>th</sup> Floor, New York, NY 10036**

**NAME:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**COLLEGE:** \_\_\_\_\_ **TITLE:** \_\_\_\_\_

**AMOUNT OF CONTRIBUTION:** \_\_\_\_\_ **CASH:** \_\_\_\_\_ **CHECK#:** \_\_\_\_\_

**I PLAN TO CONTRIBUTE THROUGH BI-WEEKLY PAYROLL DEDUCTIONS -  
PLEASE CONTACT ME. \_\_\_\_\_ AMOUNT \_\_\_\_\_**

**Thank you for your contribution; please make check payable to PSC Union Defense Fund.**

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**FOR PSC OFFICE USE ONLY:**  
**DATE RECEIVED:** \_\_\_\_\_ **DATE DEPOSITED CU:** \_\_\_\_\_

Opeiu#153

