

Instructions

Drivers employed by **Yellow-Checker-Star** and **Henderson** are represented by ITPE. Please download the membership application and/or dues deduction authorization form identified as (ITPE) for Yellow-Checker-Star and (ITPE-HT) for Henderson Taxi, complete and mail as follows:

ITPE
T. Ruthie Jones, Vice President
5300 West Sahara Avenue, Suite #102/103
Las Vegas, NV 89102

Drivers employed by **ABC Union, A-North Las Vegas, Ace, Bell Trans, Vegas Western, and Whittlesea** are represented by USW, Local 711-A. Please download the membership application and/or dues deduction authorization form identified as (USW), complete and mail as follows:

USW, Local 711-A
Hussein Abdelgilil, President
USW, Local 711-A
1800 South Industrial Road, Ste. 204
Las Vegas, NV 89102

Join the union now by completing your membership application and be eligible for membership benefits.

Also remember, if you attend the event on October 10, 2006, you are eligible for \$5,000 cash door prizes!

Don't wait. Please complete your application now and start benefiting from your membership benefits and cash door prizes on October 10, 2006!

ALLIANCE

(USW)

For Taxi and Limousine Drivers

For drivers of ABC Union, A North Vegas, Vegas Western, Ace Cab, Whittlesea Bell, and Bell-Trans Limousine:

USW MEMBERSHIP APPLICATION

Date ___/___/___
Mo. Day Year

I hereby request and accept membership in the United Steelworkers, Local Union 711A, AFL-CIO, CLC, hereinafter "USW," and of my own free will do hereby authorize the USW, its agents or representatives, to act for me as a collective bargaining agency, in all matters pertaining to rates of pay, wages, hours of employment, or other conditions of employment, and to enter into contracts with my employer covering all such matters, including contracts which may require the continuance of my membership in the USW as a condition of my continued employment.

Date: _____
Signature

Address: _____

Employed by: _____
Company _____ Social Security ___/___/___

Form 532

USW DUES DEDUCTION AUTHORIZATION

Date ___/___/___
Mo. Day Year

TO: _____ (Employer and/or its successors)

(Please Print) LAST NAME FIRST NAME M.I.

I am a member of the United Steelworkers ("USW") and you are hereby authorized to withhold from wages or other compensation due me regular monthly UNION DUES AND (if owing by me) an initiation fee in such amount as you are notified of in writing by the USW. Amounts so withheld shall be remitted to USW.

In executing this authorization, I understand that I may revoke this authorization at any time by notifying my Employer in writing. Such revocation shall be effective on receipt by the Employer. A copy of any such revocation will be given by me to the Financial Secretary of the Local Union.

Date _____
Las Vegas, Nevada Signature of Employee

PLEASE PRINT PLAINLY Telephone No. (____) _____

Name: _____ Employee No. _____

Address _____
Street City State Zip Code

PLEASE COMPLETE ENTIRE APPLICATION

ALLIANCE

(ITPE)

For Taxi and Limousine Drivers

For drivers of Yellow, Checker and Star Taxi:

ITPE MEMBERSHIP APPLICATION

Date / /
Mo. Day Year

I, the undersigned, do hereby apply for membership in the Industrial, Technical & Professional Employees Union, AFL-CIO, hereinafter "ITPE," and designate ITPE to act as sole collective bargaining agent on all matters affecting my wages, hours, and working conditions, with _____ (name of company and/or its successor). I am applying for membership of my own free will and without inducement, insistence or coercion of any officer or authorized representative of ITPE.

Name: _____ Social Sec. # / /
Last First Middle

Address: _____
Number and Street

_____ City State Zip

_____ Signature Hire Date ITPE Branch

() _____ () _____
Home Phone Cell Phone

_____ E-mail Official Signature

ITPE DUES DEDUCTION AUTHORIZATION

Date / /
Mo. Day Year

To: _____ (Company) and/or its successors:

I hereby authorize you to deduct from my wages each pay period commencing _____ (date) a proportionate amount of my monthly membership dues or nonmember fees as designated by Industrial, & Professional Employees Union, AFL-CIO ("ITPE"), while I am an employee of the Company or its lawful successor. The aforesaid membership dues or nonmember fees shall be remitted promptly by you to a designated official or employee of ITPE.

This authorization shall be irrevocable, regardless of whether I remain a member of ITPE, for a period of one (1) year from the dates appearing above or until the termination date of the current collective bargaining agreement between the company, or its lawful successor, and ITPE, whichever occurs sooner. I further direct you to maintain this authorization in effect, regardless of whether I remain a member of the ITPE, after the expiration of the shorter of the periods specified above for further successive periods of one (1) year provided there is then in effect a collective bargaining agreement between the Company, or its lawful successor, and the ITPE providing for checkoff of Union dues and/or nonmember fees.

The authorization may only be revoked during the 15 days following the expiration of any such year or during the 15 day period following the termination date of the collective bargaining agreement between the Company, or its successor, and then ITPE covering my employment if such date shall occur within one of the aforesaid annual periods. I further agree that this authorization may be revoked by written notice signed by me and received by the Company and ITPE during any such 15-day period. Any such revocation shall become effective immediately upon receipt by the Company and ITPE, and no dues shall be deducted from my wages following such receipt.

Signature _____

_____ Social Security No.

_____ Print Name

_____ Witness

PLEASE COMPLETE ENTIRE APPLICATION

ALLIANCE

For Taxi and Limousine Drivers

(ITPE—HT)

For drivers of Henderson Taxi:

AUTHORIZATION FOR DEDUCTION FROM WAGES OF UNION DUES

TO: HENDERSON TAXI

I am a member of ITPE UNION (AFL-CIO). You are hereby authorized to withhold from wages or other compensations due me regular monthly UNION DUES, in an amount as you are notified in writing by the Union. Amounts so withheld shall be remitted to the Union.

**This authorization is the authorization contemplated by
§ 608.110 of the Nevada Revised Statutes**

(Employee Signature)

(Date)

Please **PRINT** the following:

NAME: _____

ADDRESS: _____

(City) (State) (Zip)

SOCIAL SECURITY No. _____

*** There is NO INITIATION FEE
Your total Union Dues (\$20.00)
per month will be automatically
deducted by HENDERSON TAXI

TELEPHONE No.: _____

DATE OF BIRTH: _____ **EMP. No.** _____

WITNESS: _____