



Mail Completed Application and
Dues Remittance in Full to:
NTEU
1750 H Street, N.W.
WASHINGTON, DC 20006

APPLICATION FOR CASH DUES PAYING MEMBERSHIP

APPLICATION FOR MEMBERSHIP The National Treasury Employees Union		Chapter No.	Located At												
APPLICATION NAME (Print, Last Name, First, Middle Initial)		ID NO. (Social Security)													
PAY PLAN (GS, WG, LG/GG, ETC.)	CURRENT GRADE	CURRENT STEP	WORK LOCATION												
HOME ADDRESS (Street & No.)		(City and State)	(Zip)												
HOME PHONE () ()		WORK PHONE () ()													
AGENCY (Include Bureau, Division, Branch or other Designation)															
<p>SELECT (✓) choice of membership below and make your remittance for that amount.</p> <table style="width: 100%;"> <tr> <td style="width: 30%;">MEMBERSHIP TYPE</td> <td style="width: 20%;">ANNUAL DUES</td> <td style="width: 20%;">OPTIONAL QUARTERLY DUES</td> <td style="width: 30%;">PRORATA*</td> </tr> <tr> <td>ACTIVE EMPLOYEE</td> <td><input type="checkbox"/> \$ _____</td> <td><input type="checkbox"/> \$ _____</td> <td><input type="checkbox"/> \$ _____</td> </tr> <tr> <td>RETIRED/SEPARATED</td> <td><input type="checkbox"/> \$ _____</td> <td style="text-align: center;">N/A</td> <td><input type="checkbox"/> \$ _____</td> </tr> </table>				MEMBERSHIP TYPE	ANNUAL DUES	OPTIONAL QUARTERLY DUES	PRORATA*	ACTIVE EMPLOYEE	<input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	RETIRED/SEPARATED	<input type="checkbox"/> \$ _____	N/A	<input type="checkbox"/> \$ _____
MEMBERSHIP TYPE	ANNUAL DUES	OPTIONAL QUARTERLY DUES	PRORATA*												
ACTIVE EMPLOYEE	<input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____	<input type="checkbox"/> \$ _____												
RETIRED/SEPARATED	<input type="checkbox"/> \$ _____	N/A	<input type="checkbox"/> \$ _____												

*NEW MEMBERS pay dues only thru September 30.

Contributions or gifts (including dues) to the labor organization shown are not tax deductible as charitable contributions. However, they may be tax deductible under other provisions of the Internal Revenue Code.

Amount Paid _____ Check No. _____

I have paid this date for my membership in NTEU and will to the best of my ability observe and abide by the laws as set forth in its Constitution and By-Laws.

(SIGNATURE) _____ (DATE)

While NTEU Headquarters Cenary Member Copy Pink (Chapter Copy)



Exhibit 6-3

NTEU HEADQUARTERS