

## AMERICAN MARITIME OFFICERS VACATION PLAN

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## DEDUCTION AUTHORIZATION FOR THE AMERICAN MARITIME OFFICERS VOLUNTARY POLITICAL ACTION FUND

| I   | , hereby authorize and direct the American   |                  |
|---|--|------------------|
| (Please Print)  | •  |                  |
|   | deduct from vacation benefits due n  |                  |
| \$and to forwa  | ard said amount to the American Ma   | aritime Officers |
| Voluntary Political Action Fund. <sup>1</sup>   |  |                  |
| This authorization for a contribution to t  | the American Maritime Officers Voluntary   | Political Action |
|   | art and has not been obtained by phy   |                  |
| • • • • • •   | nreat thereof, but is purely a voluntary con   |                  |
| part made of my own free will and choic   | - · ·  | ·                |
|   |  |                  |
| <del></del>   | cancelled by me at any time by writin  | •                |
|   | I direct, however, that this authorization s   |                  |
| -   | e revoked in writing by me, and shall be en  |                  |
| •   | nt to the date of this authorization and the treafter, provided I have not revoked this au |                  |
| vacation benefits each calendar year their  | earter, provided I have not revoked this au  | uiorization      |
|   |  |                  |
|   |  |                  |
| Member Signature  | Mariner Reference Number Date  |                  |
| Wellber Signature   | Warmer Reference Number Date   |                  |
|   |  |                  |
|   | aritime Officers Voluntary Political Action  |                  |
| deductible as charitable contributions for F other provisions of the Internal Revenue Coc | Federal income tax purposes; they may be tax   | deductible under |
| oner provisions of the internal revenue cou   |  |                  |
|   | appropriate Supervisory Office is available for  |                  |
| Superintendent of Documents, United States  | Government Printing Office, Washington, D.C  | C. 20462.        |

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