



PATCO

Authorization for Representation

I Hereby authorize the Professional Air Traffic Controllers Organization, Inc. (PATCO), to represent me in negotiations for better wages, hours, benefits and working conditions.

NAME _____

ADDRESS _____

CITY/STATE _____

HOME PHONE (____) _____ E Mail _____

Job Title _____

Facility name & address _____

Employer _____

Office Phone _____

Address _____

Date _____

SIGNATURE: _____

Note: Your right to sign this document is protected by Federal Law. "I, the above signed, understand this does not obligate me to join or pay any fees or dues to any Union.

This information is strictly confidential

Mail original signed form to:

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