

**NATIONAL NON-DESTRUCTIVE TESTING AGREEMENT
DUES CHECKOFF AUTHORIZATION**

I, _____, hereby authorize any Employer signatory to the National Non-Destructive Testing Agreement to make the following deductions from my wages and to remit those deductions, monthly, to the Quality Control Council of the United States, 12200 N. Ambassador Drive, Suite 303, Kansas City, Missouri 64163:

MONTHLY MEMBERSHIP DUES: As prescribed by the Union, to be deducted from the first paycheck issued in each calendar month.

WAGE WORK ASSESSMENT: as prescribed by the Union, to be deducted from each paycheck.

ALSO, those amounts specified by the Union as necessary to bring my membership status into good standing (to be deducted from the first weekly paycheck).

This assignment, authorization and direction shall be irrevocable for the period of one (1) year, or until the termination of the current Agreement between the Employer and the Union, whichever occurs sooner; and I agree and direct that this assignment, authorization and direction shall be automatically renewed and shall be irrevocable for successive period of one (1) year each, or for the period of each succeeding applicable Agreement between the Employer and the Union, whichever shall be shorter, unless written notice is given by me to the Employer and the Union not more than twenty (20) days and not less than ten (10) days prior to the expiration of each period of one (1) year, or of each applicable collective agreement between the Employer and the Union, whichever occurs sooner.

Union dues, wage work assessments, contributions or gifts to the International Brotherhood of Boilermakers, Iron Ship Builders, Blacksmiths, Forgers and Helpers, AFL-CIO; United Association of Journeymen and Apprentices of the Plumbing and Pipefitting Industry of the United States and Canada, AFL-CIO; and/or the Quality Control Council of the United States are not tax deductible as charitable contributions for Federal Income Tax purposes. However, they may be deductible as ordinary and necessary business expenses.

Signature

Registration Number or
Social Security Number

Union Representative

Date