

The Governor needs to hear from YOU! Visit...

www.bit.ly/SB1288Call

We've made it really easy! Just visit the web page above, read the instructions, and then type in where you live in the short form at the bottom of the web page. Then we'll call you and connect you to the Governor's office. We've even given you a suggested script to use when you make your call!

AFTER 42 YEARS we finally have a chance to enforce safe staffing ratios—SB 1288 is now on the Governor's desk. Let's make sure he hears from us, because our employers and the California Hospital Association are trying to convince the Governor that this really isn't an issue; staffing problems hardly ever happen. Too many of us know that unsafe staffing levels happen frequently in our hospitals. Learn more: **www.bit.ly/SB1288**.

YES! I want to be a part of our efforts in 2018 to push for laws that improve patient and nurse safety, and elect leaders who value the care we provide!

Name			
Address			
City, State, ZIP			
Home phoneCell*			
Hospital			
•			
Collected by Date			
*By providing my mobile phone number, I understand that SEIU and its locals and affiliates			

*By providing my mobile phone number, I understand that SEIU and its locals and affiliates may use automated calling technologies and/or text message me on my mobile phone on a periodic basis. SEIU will never charge for text message alerts. Carrier message and data rates may apply to such alerts. Text STOP to 787753 to stop receiving messages. Text HELP to 787753 for more information

SEIU COPE CHECKOFF AUTHORIZATION

I hereby authorize my Employer to deduct the indicated amount shown below. By my signature, I state that I have reviewed and agree with the terms as set forth below. I authorize my local union to file this payroll deduction with my employer and for my employer to forward the amount specified to SEIU COPE.

\$10 per month	\$15 pe	er month	\$20	per month
I already contrib	ute to Co	OPE. Ple	ase incre	ease my
contributions by	\$2	\$3	\$5	Other

I understand that: 1) I am not required to sign this form or make COPE contributions as a condition of my employment by employer or membership in the union; 2) I may refuse to contribute without any reprisal; 3) Only union members and union executive/administration staff who are U.S. citizens or lawful permanent residents are eligible to contribute to SEIU COPE; 4) The contribution amounts on this form are merely a suggestion, and I may contribute more or less by this or some other means without fear of favor or disadvantage from the union or my employer; 5) SEIU COPE uses the money it receives for political purposes, including but not limited to addressing political issues of public importance and contributing to an spending money in connection with federal, state and local elections. Contributions to SEIU COPE are not deductible for federal income tax purposes. This authorization shall remain in effect until revoked in writing by me.

Employee signature		
Date	Social Security #	



