



Opt-Out Authorization Form (EZC-NYS-OOA)

Instructions:

1. Fill out the "Contact Information" section in this form (EZC-NTC-OOA) leaving the remainder of the form to be filled out, initialed and signed by hand where appropriate.

PERSONAL INFORMATION

_____ _____

 Prefix First Name as appears on Employee ID (required) Middle Init. Last Name as appears on Employee ID (required) Suffix

 Civil Service Title (required) Email Address (required)

 Name of Union or Association including "Local" (required) Address of Union or Association (required)

 Civil Service Employee Number (required*)

— or — XXX-XX-

 Last 4 Digits of Your Social Security Number (required*)

** If you are not able to provide your Civil Service Employee Number, you must provide the last 4 digits of your Social Security Number for authorization.*

2. Print your form out to continue.
3. Place your initials in the applicable spaces provided for each authorization† you select.

UNION/ASSOCIATION MEMBERSHIP OPT-OUT AUTHORIZATION

I have decided to opt-out of my union. Effective upon receipt of this notice, I hereby revoke any affirmative consent (if any exists) to deduct union dues from my paychecks. This instruction revokes any perceived earlier authorization and instructs my employer to refrain making payroll deductions related to union dues for the earliest pay period possible.

Initial Here to Affirm this Section: _____

FRINGE BENEFIT FUNDS ADMINISTRATION AUTHORIZATION — Only applicable to Civil Service Workers Employed by The City of New York.

Effective upon receipt of this notice, I hereby instruct my union and the NYC Office of Payroll Administration to forward my share of the Health Benefit provisions of the collective bargaining agreement to EEZEE Choice Inc. I have decided to have these existing union provided health benefits to be administered and provided through EEZEE Choice Inc. for implementation. EEZEE Choice will at its sole discretion set a specific date for implementation of this authorization of which you will be notified.

Initial Here to Affirm this Section: _____

ANNUITY FUND ADMINISTRATION AUTHORIZATION — Only applicable to Civil Service Workers Employed by The City of New York.

Effective upon receipt of this notice, I hereby instruct my union and the NYC Office of Payroll Administration to forward my share of any Annuity provisions of the collective bargaining agreement to EEZEE Choice Inc. I have decided to have my share of the existing union administered annuity funds to be self-directed and administered by EEZEE Choice Inc. for implementation. EEZEE Choice will at its sole discretion set a specific date for implementation of this authorization of which you will be notified.

Initial Here to Affirm this Section: _____

4. Present your printed form along with a government issued photo ID³ to a convenient NYS Notary Public¹. Your Notary Public will complete the "New York Notary Acknowledgement" section by witnessing and officially acknowledging your signature.

NEW YORK STATE NOTARY PUBLIC ACKNOWLEDGEMENT

State of New York)
) ss;
 County of _____)

On the ____ [Day] day of _____ [Month] in the year _____ [Year] before me, the undersigned, personally appeared _____ [Name of Individual] personally known to me or proved to me on the basis of satisfactory evidence to be the individual whose name is subscribed to the within instrument and acknowledged to me that they executed the same in their capacity and that by their signature on the instrument, executed the instrument.

 Signature of Employee

 Signature and office of individual taking acknowledgement

 Seal

5. Send your completed and notarized form to EEZEE Choice by any of these methods:
 - a. Mail to or Hand deliver to: EEZEE Choice - c/o Seelig Law Group, 299 Broadway, Suite 1600, New York, NY 10007
 - b. Fax to: 212-766-0601
 - c. Scan³ & Email to: Services@EEZEEChoice.com

† EEZEE Choice provides each of these services to Participants. As a civil service worker employed by The City of New York you may choose to authorize EEZEE Choice for one, two, none or all of these options. EEZEE Choice recommends that you provide authorization for all 3 services to receive the best protection and benefits available.

1 Examples of valid "government issued photo ID" are: Drivers License, Employment ID Card, US Passport. Photocopies are not acceptable.

2 EEZEE Choice can provide notarization services through local partnerships. Click here to see a list for EEZEE Choice affiliated Notaries Public in your area. You may use any Notary Public authorized by the Department of State of New York.

3 Scans must be made on a flatbed or sheetfed scanner at a minimum resolution of 150dpi at 100% scale. Photographs of your completed forms taken on a digital camera or other mobile device are not acceptable.