



Delta Pilot Payroll Deduction

You can return the completed form by one of two methods:

- Emailing a scanned copy with signature to dalfinance@alpa.org.
- Postal Mail to ALPA, 100 Hartsfield Centre Parkway, Suite 800, Atlanta, GA 30354.

Please contact DAL MEC Treasurer, Keith Costo at 800-USA-ALPA or Keith.Costo@alpa.org if you have any questions.

Authorization for Payroll Deduction

\$ _____ Start a deduction from my semi-monthly pay for remittance to the DPCF.

\$ _____ Change my semi-monthly contribution to the DPCF.

Stop my semi-monthly contribution to DPCF.

Signature

Full Name: _____

Authorized Signature: _____ Date: _____

Employee Number: _____

Effective Date: _____

Start/Change or Stop: _____
(must be 15th or 30th/31st)

Email Address: _____

Do we have your permission to feature your donation in our newsletters & online news articles?
Yes _____ No _____

Would you like to donate in Memory of someone?

Name for Memoriam: _____

All of us at DPCF would like to thank you for your contribution to our fund. We are a nonprofit 501c3. This contribution is tax-deductible. Please allow one to two pay periods to take effect.