



Staff Council

Secretariat

UNDP/UNFPA/UNOPS STAFF ASSOCIATION CONTRIBUTION FORM

(For STAFF in New York and Geneva and
International Professional Staff in Country Offices)

(Please print or type)

I _____, Index No. _____ hereby authorize the UN Payroll Section to make the following deduction automatically from my salary as my contribution to the UNDP/UNFPA/UNOPS Staff Association.

Payroll:

A **MONTHLY** contribution which amounts to one five-hundredth (0.002%) \$_____ of my **NET SALARY**, rounded to the nearest dollar and adjusted annually to reflect changes in my net salary (see suggested contribution below).

I understand that my **AUTHORIZATION** for deduction remains **VALID** until cancelled in writing.

Signature

Date

GRADE	1	2	3	4	5	6	7	8
Director	18.00	20.00						
Professional	8.00	10.00	12.00	14.00	16.00			
Gen.Service	5.00	6.00	7.00	8.00	9.00	10.00	11.00	
Security	7.00	8.00	9.00	10.00	11.00	12.00	13.00	
Trades/Crafts	7.00	8.00	8.00	9.00	10.00	10.00	11.00	12.00
Lang.Teacher	11.00							
Public Info.	6.00	7.00	8.00					

Please **RETURN** form to: STAFF COUNCIL OFFICE (FF-810)
Or **FAX** to: (212) 906-6987

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