

To Whom It May Concern,

I, \_\_\_\_\_, hereby rescind dues deduction authorization  
(Name)

for the North Carolina Association of Educators, effective immediately. I do not wish to  
continue my membership.

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(Printed Name)

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(Signature)

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(Date)

**Mail to:**

North Carolina Association of Educators  
700 S. Salisbury Street  
Raleigh, NC 27601