

PARTICIPATING WITHDRAWAL CARD HOLDERS
VACATION DEDUCTION AUTHORIZATION

NAME: _____ Social Security Number: _____

ADDRESS: _____

MY SIGNATURE WILL AUTHORIZE I.B.E.W. LOCAL UNION 363 TO DEDUCT THE FOLLOWING FROM VACATION MONEY DUE FROM 2017 CONTRIBUTIONS: (PLEASE CIRCLE YOUR OPTION)

2018 \$50.00 – PAC CONTRIBUTION YES NO

**PLEASE FILL OUT ALL ABOVE INFORMATION
YOUR CHECK WILL BE MAILED TO THE ABOVE ADDRESS**

THIS SIGNATURE WILL SERVE AS YOUR APPLICATION FOR YOUR VACATION CHECK.

THE PAC CONTRIBUTION TO LOCAL UNION 363 IS NOT DEDUCTIBLE AS A CHARITABLE CONTRIBUTION FOR FEDERAL INCOME TAX PURPOSES.

SIGNATURE _____ DATE

PLEASE FILL OUT THE INFORMATION ON THIS FORM AND RETURN IT TO
I.B.E.W. LOCAL UNION 363 @ 67 COMMERCE DRIVE SOUTH, HARRIMAN, N.Y. 10926

OR

YOU CAN FAX IT TO 845-783-3555