

**Transport Workers Union of America, AFL-CIO  
EXONERATION REQUEST**

Date \_\_\_\_\_

Local No. \_\_\_\_\_

Name \_\_\_\_\_

Section No. \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_

Card No. \_\_\_\_\_

I hereby Request Exoneration from dues amounting to \$ \_\_\_\_\_ for the month (s) of \_\_\_\_\_

Reason: (State if sick, injured, or furloughed) \_\_\_\_\_

Dates Of Absence: From \_\_\_\_\_ To \_\_\_\_\_

Number of working days paid for each month \_\_\_\_\_

Signature of member \_\_\_\_\_ Title/Occupation \_\_\_\_\_

I have investigated the reasons for the requested exoneration and found same to be true. I recommend that this request be granted in accordance with Article XVII of the constitution of the Transport Workers Union of America, AFL-CIO.

Approved by \_\_\_\_\_

Local Union Secretary Treasurer

opeiu-153 **LOCAL COPY**

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