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Request for Relief from Payment of Dues and Assessments, including JB/ISP Assessments,
Other than Insurance premiums,

in the

SMART TD/UNITED TRANSPORTATION UNION

I, _____
(Please Print Name in Full)

Member of Local No. _____, not having been engaged in transportation service or in the service of the SMART TD/United Transportation Union for a full calendar month (excluding vacation), hereby make application to be relieved from the payment of dues and assessments, including JB/ISP assessments, other than insurance premiums, beginning with the month of _____, for the following reason.

Out of Service Date _____

- 1. Reduction in Force
- 2. Disabled by sickness or injury
- 3. Dismissed from service
- 4. Resigned from service (JBF/ISP Automatically Terminated)
- 5. Entered military service
- 6. Retired* (JBF/ISP Automatically Terminated)
- 7. Other (specify)

*If totally disabled or having twenty (20) years continuous membership and retired from transportation service, the following is to be completed:

Have been a member continuously since _____

I agree to promptly report to the local Treasurer the date of my return to the active service of my employer and to pay full dues and assessments, including JB/ISP assessments, beginning with the first month thereafter.

Applicant's Signature _____
(Name in Full)

To be completed in duplicate:
Original – to General Secretary and Treasurer
Duplicate – to be retained by the Local Treasurer

For Office Use Only: EFFECTIVE DATE: _____