

# Forms

## DONATION REQUEST

To: UAW Local 1112  
11471 Reuther Drive SW  
Warren OH 44481-9561

Date \_\_\_\_\_

Name of Person(s) making request: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Member of Local 1112: Yes \_\_\_\_\_ No \_\_\_\_\_

Request on behalf of: \_\_\_\_\_

Please give a brief description of the reason for the request:

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(Use back if additional space is required)

If you have a prepared letter, please attach it to this form.

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Make Check Payable To: \_\_\_\_\_

Mail Check To (Name): \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**ALL CHECKS WILL BE MAILED FOLLOWING PROPER EXECUTIVE BOARD AND/OR MEMBERSHIP ACTION.**