

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:

(Use back if additional space is required)

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

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.