



COMMUNICATIONS WORKERS OF AMERICA

INCOMING MEMBERS

501 3rd Street, NW

Washington, DC 20001-2797 **LOCAL:**

Attention: **MEMBERSHIP DUES DEPARTMENT**

DATE:

<u>NAME, ADDRESS, SS#</u> <u>(INCLUDE SS# ON ALL)</u>	<u>STATUS</u> *	<u>DH</u> Add / Remove	<u>DATE</u> <u>EFFECTIVE</u> <u>(Init Date)</u>	<u>EMPLOYER</u> <u>PU# or Call</u> <u>letters</u>
<u>SSN:</u>				
<u>NAME:</u>				
<u>ADDRESS:</u>				
<u>CITY/STATE/ZIP:</u>				
<u>SSN:</u>				
<u>NAME:</u>				
<u>ADDRESS:</u>				
<u>CITY/STATE/ZIP:</u>				
<u>SSN:</u>				
<u>NAME:</u>				
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<u>SSN:</u>				
<u>NAME:</u>				
<u>ADDRESS:</u>				
<u>CITY/STATE/ZIP:</u>				

COMMENTS:

***STATUS CODES:**

N = NEW MEMBER

T#(local #) =TRANSFER from LOCAL #(Complete TRANSFER REQUEST)

W = FROM WITHDRAWAL

O = COMING BACK FROM OUT

L = LEAVE OF ABSENCE (ANY LOA)

AFP= Agency Fee Payer (code as AFP)

Mark Add or Drop in DH column if changing DH status only and is to remain active member

LOCAL TREASURER'S SIGNATURE