TO THE EXECUTIVE BOARD OF LOCAL 853:

Approved:	
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Date:

I am requesting that the Board please consider my hardship. I ask the Board please:

- 1. WAIVE Reinitiation Fee. Enclosed is payment for four (4) months dues and late charges for a total of \$_____.
- 2. WAIVE all back dues for the period from ______ through ______.
- 3. Enclosed please find payment of Reinitiation Fee, plus dues for four (4) months and late charges, for a total of \$_____.

Thank you for your consideration.

Name:	Signature:
Address:	Date:
City, State, Zip:	
Phone Number:	
Social Security Number:	
Employer:	

APPROVED BY EXECUTIVE BOARD DATE: _____

REJECTED BY EXECUTIVE BOARD DATE: _____

