TRADESHOW AND SIGN CRAFTS LOCAL UNION 831 1155 CORPORATE CENTER DR. MONTEREY PARK, CA 91754 (626) 296-8086

Ignore Form if you previously signed up for the quarterly upload

Re:	Vacation Authoriz	lembers ation			
Dear I	Members:				
Vacat	ion Authorization for	r dues is available to all mer	nbers. All participan	ts will receive a S	6.00*credit
	•	dues <u>when the Vacation </u>			
	•	understand how the Vacat			<u></u>
-	Vacation Assignmen		ion Authorization wii	I WOIK.	
		rm must be received by:			
vacati	ion Authorization joi	m must be received by:			
	Nov. 24th, '19	Upload will take plac	e shortly thereafter a	and will apply to	1 st quarter 2020
	Feb. 24 th , '20		u .	will apply to 2	2 nd quarter 2020
	May 24 th , '20		<i>u</i>	will apply to 3	3 rd quarter 2020
	Aug. 24 th , '20		"	will apply to 4	I th quarter 2020
Note:	Should your deducti	on pay a portion of the bala	unce due for the curre	ent quarter then	vou will he
					-
-		re directly to the Union offic			*
		or suspension fees will be ac	٠,	•	redit will not be
issuea	until your Vacation	account can cover your due	es account balance in	full.	
		(Cut on dotted line an	d return lower portion.)	
~~~	To begin the Vacatio	n Authorization, please comp	lete the form below ar	nd return to the LU	831 office. ~~~~
	UNION YES [√] FEDE	RAL CREDIT UNION VACATION	N ACCOUNT ASSIGNMI	ENT/ AUTHORIZAT	ION FORM
	DI	RAL CREDIT UNION VACATION STRIBUTION INFORMATION AND ASS			TION FORM
PLEASE	DI				
PLEASE	DI				SION FORM 831
PLEASE	DI			L UNION 831	
PLEASE	DI PRINT	STRIBUTION INFORMATION AND ASS	IGNMENT OF DUES TO LOCA	L UNION 831	831
PLEASE	PRINT  (Last Name)	STRIBUTION INFORMATION AND ASS	IGNMENT OF DUES TO LOCA	L UNION 831	831
	PRINT  (Last Name)	STRIBUTION INFORMATION AND ASS  (First Name)	IGNMENT OF DUES TO LOCA (Date of Birth	L UNION 831	831 (Local No.)
(Street A	PRINT  (Last Name)  Address)	STRIBUTION INFORMATION AND ASS  (First Name)	(Date of Birth	L UNION 831	831 (Local No.) (Telephone No.)
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