

POWER WORKERS' UNION RETIRED WORKERS' CHAPTER AUTHORIZATION FORM FOR AUTOMATIC DUES CHECK OFF

NAME:	EMPLOYEE NUMBER:
ADDRESS:	
EMAIL:	
PHONE:	
Please Check Off You	r Assigned Employer Below:
Ontario Powe	r Generation
Nuclear [Non-Nuclear
Hydro One	
Bruce Power	
Re: Deduction of dues of the PWU Reti	red Workers' Chapter
I hereby authorize you to deduct from I dues, currently \$15.00/year, set by the	
I may revoke this authorization in writii	ng.
 Date	
Date	Signature
Witness	

Return to: Treasurer, Retired Workers' Chapter, 244 Eglinton Avenue East Toronto, Ontario M4P 1K2

Please date and sign this form in front of a Witness and have the Witness sign.