RETIRED EMPLOYEE'S AUTHORIZATION FOR CHECK-OFF OF DUES

I hereby assign to the International Ur	nion, United Automobil	e, Aerospace and Agricultura	al Implement Workers of A	America (UAW), from any mon	thly retirement benefits	
payable to me as a retired employee the International Union, UAW, the sur retirement benefits, and be remitted to This assignment, authorization and di made pursuant to the provisions of Se Contributions or gifts to the	n of \$3.00 or more to the Union at such time rection shall remain in ection 302(c) of the La	as monthly membersh nes and in such manner as n full force and effect until writ bor Management Relations A	ip dues. I authorize and on ay be agreed upon by you ten revocation is received act of 1947, as amended.	direct that such amounts be de ou and the Union while this aut If by the Company and the Uni	thorization is in effect. on. This authorization is	
Name - Type or Print Name			1	Local Union No.	Region	
Street			Social Security No.			
City		State		Zip	— (UAW)	
Phone	Email				Rev. 07/14 FORM RW 1221	
Return to: UAW Retired Workers Dept. 8000 E. Jefferson - Detroit, MI 48214		Signature of Retired Employee here			OPEIU PRINTID IN U.S.A. AFL-CIQ.	