

INTERNATIONAL BROTHERHOOD OF TEAMSTERS

JAMES P. HOFFA
General President
25 Louisiana Avenue, NW
Washington, DC 20001



KEN HALL
General Secretary-Treasurer
202.624.6800
www.teamster.org

NATIONAL D.R.I.V.E. STOP DEDUCTION REQUEST FORM

I, _____, request that D.R.I.V.E. and my employer, _____,
(Please print)
stop all weekly voluntary salary deductions to National D.R.I.V.E. from my earnings.

I understand that upon receipt of this form, D.R.I.V.E. will remove my name from its contributor list and notify my employer of my request. **I further understand that this process can take four to six weeks and that during this period; further deductions might be made by my employer.**

It is also understood that this completed form must be submitted directly to the principal office of my local union and in turn forwarded to National D.R.I.V.E.

This form is a request for my deductions to and membership of D.R.I.V.E. to cease. This in no way affects the status of my union membership.

Name (please print)

Signature

Social Security Number

Street Address (please print)

Employer

City

State

Zip

Local Union

Telephone Number

Signature: Local Principal Officer

Local Union Please Forward to:
Fax: (202) 624-8796

National D.R.I.V.E.
Attn: Withdrawals
25 Louisiana Ave., NW
Washington, DC 20001

