



BROTHERHOOD OF TEAMSTERS LOCAL UNION NO. 70

ALAMEDA, COUNTY, CALIFORNIA

Auto Truck Drivers, Line Haulers, Car Haulers and Helpers,
Solid Waste, United Parcel Service and Port Drivers

Affiliated with the International Brotherhood of Teamsters

REQUEST FOR WITHDRAWAL CARD

APPLICANT INFORMATION

Name:	SSN:	-	-
Date of Birth:	Phone:		
Address:			
City:	State:	ZIP Code:	

EMPLOYMENT INFORMATION

Reason for Withdrawal Request:	
Employer:	Dues Paid Thru:

Upon my return to active employment, I understand that it is my responsibility to re-activate my membership with Local 70 by notifying them in writing within thirty (30 days) of my return to work.

I have read and understand the above statements.

Signature of Applicant:	Date:
--------------------------------	--------------

Please E-mail to titan@teamsterslocal70.org

OR

Fax to (510) 569-1906