

- TRANSFER CERTIFICATE -

Transportation • Communications Union

		TCU Men	nber ID #	
THIS IS TO CERTIFY THAT	i.	and/or Em	ployee #	
Address	4 1 4		•	
(Street)		(City)	(State)	(Zip Code)
	REQUESTS TRANS	SFER		
from Lodge No.	Located at			
		(City)	(State)	
to Lodge No.	Located at			
	*	(City)	(State)	
Member to be employed by				
	(Name of Employer)		(Employer Number, if known)	
working under agreement				
	(Name of Agreement)		(Agreement Number, if known)	
I hereby certify that dues and assessm	nents are paid up to and including th	ne month of		
TRANSFER EFFECTIVE DATE	Ξ.			
	·			
(Must be dated first day of month)		(FST Signature)		

Original to Grand Lodge / Copy retained by Lodge