



## Report to Work Slip

**INTERNATIONAL UNION Name LOCAL 0000**

To: MAJOR CONTRACTOR, INC.

We are referring to your job in direct compliance with your request for .

S.I.N.: 111-11-0032      Name: JOHN A. SAMPLEMON

Classification: Resurfacing

Address: 12345 INCOM ST  
SOMEPLACEVILLE, AA 98765-4321

Amount of Union Dues to be deducted and remitted once a month to the Secretary-Treasurer of the United Association of Journeyman and Apprentices of the Plumbing and Pipefitting Industry, LOCAL 0000.

Dues to be deducted are : \$21.00/mth

Date Work Slip Issued: 11/27/2006      Authorized Signature: \_\_\_\_\_

Notes: This is an example note for this dispatch request. This is an example referral note.