

# AFL-CIO State or Central Labor



## **APPLICATION FOR AFFILIATION**

**Thank you for affirming your commitment to solidarity with other Local Unions in our area by affiliating with your local AFL-CIO Central Labor Council. Your support and active involvement in the Council will help us build a stronger and more effective Labor Movement for our members and their families.**

### ***Union Information***

International Union:	APWU	Local # or Council:	
Street (Mailing) Address:			
City:		State:	Zip:

### ***Principal Officers***

Primary Officer:		Title:	
Email:		Phone:	Fax:

Financial Officer:		Title:	
Email:		Phone:	Fax:

### ***Per Capita Calculation***

Number of Members:	
(x) Per Capita Rate:	
Total Per Capita Payment:	

