

Print this page and Mail to:

Teamsters Local 118
1393 South Ave.
Rochester, NY 14620

WITHDRAWAL CARD REQUEST

Name: _____

S.S.#: _____ Phone _____

Address: _____

My Last Day of Work: _____

Name of Employer: _____

Reason for Leaving: _____

(quit, laid off, terminated. etc.)

Signature

Date