
LAST NAME

FIRST

MIDDLE

CARD NO.

SOCIAL SECURITY NO.

**UNITED ASSOCIATION OF JOURNEYMAN & APPRENTICES OF THE PLUMBING AND PIPE
FITTING INDUSTRY OF THE UNITED STATES AND CANADA**

BENEFICIARY OF BURIAL EXPENSE

To the Secretary of Local Union 52 of Montgomery, Alabama.

In compliance with the provisions of the Constitution of the United Association of which I am a
member I hereby designate:

LAST NAME

FIRST

MIDDLE

RELATIONSHIP

as the person to whom shall be paid any "Burial Expense Benefit" to which I may be entitled at
the time of my death. This in lieu of any former such designation by me made.

Dated this _____ day of _____, _____

Member's signature

Witness:

