

United Mine Workers of America

Financial Secretary's Record Card

NAME: _____

EMPLOYEE NO.: _____

ADDRESS: _____

INITIATION FEE: \$ _____

TELEPHONE NUMBER: _____

PAID: _____

MONTH/YEAR

| MONTH | 20____ | 20____ | 20____ | 20____ | 20____ | 20____ | 20____ | 20____ | 20____ |
|-----------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| JANUARY | | | | | | | | | |
| FEBRUARY | | | | | | | | | |
| MARCH | | | | | | | | | |
| APRIL | | | | | | | | | |
| MAY | | | | | | | | | |
| JUNE | | | | | | | | | |
| JULY | | | | | | | | | |
| AUGUST | | | | | | | | | |
| SEPTEMBER | | | | | | | | | |
| OCTOBER | | | | | | | | | |
| NOVEMBER | | | | | | | | | |
| DECEMBER | | | | | | | | | |

FORM L-014

☒ = Dues Payroll Deducted

Amount = Cash Dues Paid

R = Refund

IF = Initiation Fee Assessment

C = COMPAC

L = Legal

L.U. = Local Union

