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**AUTHORIZATION FOR REPRESENTATION UNDER THE  
NATIONAL LABOR RELATIONS ACT**



**Transport Workers Union of America, AFL-CIO**

I authorize the Transport Workers Union of America to represent me in collective bargaining and to negotiate and reach agreements concerning wages, benefits and other terms and conditions of employment with my employer.

Name \_\_\_\_\_  
Employed by \_\_\_\_\_ How Long \_\_\_\_\_  
Job Class \_\_\_\_\_ Emp. No. \_\_\_\_\_  
Home Address \_\_\_\_\_  
Phone No. \_\_\_\_\_ Cell No. \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
E-mail \_\_\_\_\_  
Date \_\_\_\_\_ Sign Here \_\_\_\_\_

**THIS CARD IS CONFIDENTIAL AND YOUR EMPLOYER WILL NEVER SEE IT.**

ATD Form 22-



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