

**UAW REGION 4 TECHNICAL, OFFICE AND PROFESSIONALS (TOP) COUNCIL ANNUAL
DUES FORM
FOR YEAR 20_____**

UAW LOCAL _____

DATE OF PAYMENT _____

CHECK NO. _____

Annual dues on _____ members \$ _____ as per the following schedule:

| | |
|---|----------------------------|
| 25 members or less | \$25.00 per calendar year |
| More than 25, but less than 100 | \$50.00 per calendar year |
| More than 100, but less than 200 members | \$100.00 per calendar year |
| More than 200, but less than 500 members | \$150.00 per calendar year |
| More than 500, but less than 1,000 members | \$175.00 per calendar year |
| More than 1,000, but less than 5,000 members | \$200.00 per calendar year |
| More than 5,000, but less than 9,000 members | \$250.00 per calendar year |
| More than 9,000, but less than 13,000 members | \$300.00 per calendar year |
| More than 13,000 members | \$350.00 per calendar year |

Make your check payable to **UAW REGION 4 TECHNICAL, OFFICE AND PROFESSIONALS (TOP) COUNCIL**

Mail your check and the form to:

UAW Region 4 Office
900 E Center Street
Ottawa, IL 61350
ATTN: Bookkeeper

Print Name: _____

Local Union Address: _____

City, State & Zip _____

Phone: _____