

PAID PER CHECK NO. _____

\$ _____

AMALGAMATED TRANSIT UNION LOCAL 308

SERVICE RENDERED

and Brief Explanation

NAME _____

ID _____

FOR BOARD WORK _____ APPLICATIONS _____ MISCELLANEOUS _____ \$ _____

Date(s)	HOURS
Monday	
Tuesday	
Wednesday	
Thursday	
Friday	

Date(s)	HOURS
Monday	
Tuesday	
Wednesday	
Thursday	
Friday	

PLEASE REMEMBER - DO NOT ADD UP YOUR DAYS ON THIS SHEET

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**ATU LOCAL 308 PART-TIME UNION OFFICIALS VERIFICATION
OF CTA-RELATED UNION BUSINESS FOR PENSION CREDIT**

NAME: _____ **BADGE:** _____ **DATE:** _____
WEEK OF (1st): _____ **CLASS:** _____ **WORK LOCATION:** _____
WEEK OF (2nd): _____ **MONTH/YEAR:** _____

Day/Date	CTA	Write below	Union	Write below	Description of Union Business
	Scheduled Start Time(s): Scheduled End Time(s): Hours Worked: CTA Hourly Rate:		Start Time(s): End Time(s): Hours Worked: Union Hourly Rate:		
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**ATU LOCAL 308 PART-TIME UNION OFFICIALS VERIFICATION
OF CTA-RELATED UNION BUSINESS FOR PENSION CREDIT**

We hereby certify that the contents of this document are true and that the union business listed includes only pensionable activities as defined in the agreement among the Chicago Transit Authority, Amalgamated Transit Union Local 241, Amalgamated Transit Union Local 308, and the Amalgamated Transit Union International executed on January 20, 2005 and does not include any nonpensionable earnings as defined therein.

Part-Time Union Official

President/Business, Local 308

Financial Secretary, Local 308