Non-Member Reports Order Form

RETURN FORM TO: American Postal Workers Union, AFL-CIO
Anna Smith, Organization Director / 1300 L Street NW, Washington, DC 20005 / Fax; 202-216-2639 / E-mail: organization@apwu.org

Date: ____________________________
Requesters Name: ____________________________ Requesters Title: ____________________________
Local Name: ____________________________
Address: ____________________________
City: ____________________________ ST: _______ Zip: _______
Phone #: ____________________________ Email: ____________________________

Please check the format of how you would like the lists to be generated:

1. Non-Member List

☐ With or ☐ Without Addresses (check one)

Select order of list (check one)
☐ Alphabetically by Last Name
☐ Office Finance Number
☐ SCF

2. PSEs Only Non-Member List

☐ With or ☐ Without Addresses (check one)

Select order of list (check one)
☐ Alphabetically by Last Name
☐ Office Finance Number
☐ SCF

3. PSE Health Plan Eligibility List (Information is generated for the current month)

Select order of list (check one)
☐ Alphabetically by Last Name
☐ Office Finance Number
☐ Pay Location

* President and Secretary-Treasurers can retrieve Member information at www.apwu.org under the “Members Only” section
** Local President will be advised of all requests