

Branch 03512

CB no.	
CD III.	

RETIREMENT FUNCTION CLAIM

Please send to: Eddie Brand, Unison Branch Secretary @ Waterloo HQ with supporting receipts.

Name of retiring member Workplace			
Unison membership no.			
Name & address for payment, o	f member making requ	est (cannot be retiri	ng member).
Name of second member CONDITIONS (as of 1st october 2017) 1) 15 years minimum membership of London And 2) To receive payment you must no longer be will fithis is the case, then you should continue with 4) Both the requesting & supporting members of THE DECISION OF THE BRANCH COMMITTEE IS IT. Bank details if BACS payment	nbulance Unison required. £10 per yorking for, or preparing to come bac your Unison membership. nust be LAS Unison members. FINAL.	ck to the London Ambulance S 3) This is not ope	•
Payment by BACS SIGNED	Cheque (T	ick one)	GRAND TOTAL £
OFFICIAL USE ONLY Date received Date processed Cheque no.	Bacs ref.		by by h Secretary auth. ship Officer auth.