

RETURN COMPLETED FORM TO:
IBEW Local Union No. 22/NECA
Electrical Industry Center
8960 "L" Street, Suite 101
Omaha, Nebraska 68127

Questions regarding Vacation/Holiday?
Call (402) 593-7565
Fax (402) 593-7609

APPLICATION FOR VACATION

In accordance with the provisions of the Vacation Agreement, I hereby apply for such vacation pay as has accrued to my account:

Name: _____ Social Security Number: _____

Mail check to the following address:

Street Address

City, State and Zip Code

Check here if the address listed above is a New Address.

I am requesting: ___ 1 Week ___ 2 Weeks ___ 3 Weeks ___ All or \$ _____
(Show a specific amount)

Date

Signature

(Do not write below this line)

\$ _____
Amount Sent

Date

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