

Cover Page for Fax

(Please include this page when faxing)

Fax to Local 100

To: TWU Local 100 Solidarity	From:
Fax: 212-873-5438	Date: September 30, 2010
Phone :	Pages:

PASS # _____

PRINT NAME# _____

The following are included in my fax:

- ☐ Copy of Cobra Continuation Coverage Election form that was sent to SHS Continuation services
- ☐ Solidarity Fund Health Benefits Application & Agreement
- ☐ Cobra Bills for payment
- ☐ Cobra Bills (already paid) for reimbursement