INFORMATION REQUEST FORM

ASEA/AFSCME Local 52, AFL-CIO
2601 Denali Street Anchorage AK 99503
(907)277-5200 • (907)277-5206 Fax

Union Staff

By: _

Revised 09/21/2026

ALL REQUESTS MUST BE APPROVED BY THE EXECUTIVE DIRECTOR
REPLY DUE WITHIN 10 DAYS

I. MEMBERSHIP INFORMATION REQUESTED:

*(**Note**: Pursuant to ASEA/AFSCME Local 52 Policy 17.00.000, a roster of Chapter Members may be requested only by a Chapter President, Secretary, or Chief Steward.)*

ROSTER: ☐ Dues Paying Members (in good standing) ☐ Non-Members (not paying dues) ☐ By Alpha ☐ by Department (Alpha within)

MAILING LIST: (for Mail House) ☐ by Alpha ☐ by Zip Code

REQUEST: ☐ Copy by Email ☐ Hard Copy

Pursuant to ASEA/AFSCME Local 52 Policy No.17.00.000, I agree to use the membership information requested (i.e., mailing lists/labels, member listings, etc.) for the mailing of ballots, newsletters, meeting announcements, and other chapter purposes which are consistent with the objectives and purposes of ASEA/AFSCME Local 52. Any other use may constitute a chargeable violation as listed in Article X of the *International Constitution*. I understand such request for information shall indicate the purpose for which the information will be used. Prior to distribution, newsletters or communications using the Local 52 logo, or identified as a Local 52 publication, and/or using address labels provided by Local 52, must be reviewed by the Executive Director.

Signature Printed Name Chapter Position Date

Email Address: _____

II. OTHER UNION INFORMATION REQUESTED *(One Item Per Form)*

A. _____

I do hereby state that I am a member in good standing with ASEA/AFSCME Local 52, and I do agree to use the information requested in a manner consistent with the objectives and purposes of ASEA/AFSCME Local 52. Any other use may constitute a chargeable violation as listed in Article X of the *International Constitution*. I understand such request shall indicate the purpose for which the information will be used.

Signature Printed Name Chapter Position Date

PURPOSE OF REQUEST I and/or II, ABOVE:

☐ **Chapter Notice (Copy Required)**
☐ **Chapter Newsletter (Copy Required)**
☐ **Ballots**
☐ **Other** _____

UNION USE ONLY

Priority Level:
___Urgent (Within 2-5 business days)
___Routine (Within 15 days)
___Extended (within ___days)

☐ **Approved** ☐ **Not Approved**

AUTHORIZED BY:
Executive Director Date

COMMENTS: _____