



WAIVER OF LOCAL JURISDICTION
FORM MLO-113

We, of Local ____, CWA, acting in accordance with the CWA Constitution and the Bylaws of this Local, hereby request the below-described jurisdiction now held by this Local be waived:

(Type complete Jurisdictional language to be waived here. Note: Line extends as you type)

Reason for Waiving Jurisdiction: _____

(If only waiving partial Jurisdictional language, please type the complete new language so that we may appropriately create the local's new charter.)

To be completed by
Vice President's Office:
Date Approved:_____

Signed: (five signatures required)

Local President

By:_____

Local Secretary or Secretary-Treasurer

Effective date
of revised Charter:_____

Third Signature

Fourth Signature

Copy for
International (original w/signatures)
District (copy)
Sector (copy)
Local (copy)

Fifth Signature

Date signed:_____