

Local Committee Case No. \_\_\_\_\_

**NOTICE OF  
LOCAL COMMITTEE DECISION**

**Supplemental Unemployment Benefit Plan  
Pursuant to Agreement Between Delphi Corporation and the IUE-CWA**

TO: \_\_\_\_\_

Division

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Plant or Location

\_\_\_\_\_

\_\_\_\_\_

Your appeal, **LOCAL COMMITTEE CASE No.** \_\_\_\_\_, dated

\_\_\_\_\_, has been considered by the Local Committee. The Local

Committee's decision is as follows:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Management Representatives)

(Union Representatives)

Date \_\_\_\_\_

Copies: Employee  
Management  
Union