

**NOTICE OF
BOARD OF ADMINISTRATION DECISION**

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

Division _____ **Plant or Location** _____

Address _____
(Number and Street) (City) (State) (Zip Code)

Employee Involved _____ **Local
Committee
Case No.** _____

DECISION OF BOARD

(General Motors Corporation Representatives)

(International Union-IUE Representatives)

Date _____

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- Copies: Board – General Motors
Board – IUE-CWA
Local Committee – Management
Local Committee – Union
Employee