

**NOTICE OF
BOARD OF ADMINISTRATION DECISION**

**Supplemental Unemployment Benefit Plan
Pursuant to Agreement Between General Motors Corporation and the UAW**

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-UAW Representatives) |

Date _____

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