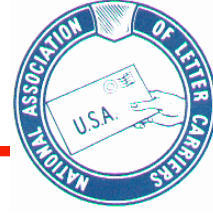


**National Association of Letter Carriers
Capital City Branch 380
Trenton, New Jersey**



AFL-CIO

NALC RELEASE FORM

I _____ give my consent and authorization to all officials of the NALC to obtain any and all information and documents relating to my CA-1 claim, (file # _____).

I further authorize these individuals to serve as my representatives in all issues related to this matter.

Sign: _____ Date: _____

Print : _____