R.P.E.P. AFSCME RETIREE CHAPTER 13
Application for Membership

APPLICANT $24.00 New _____ Renew _____
SPOUSE $24.00 New _____ Renew _____

NAME_____SPOUSE_____

STREET_____

CITY_____STATE_____ZIP_____+4_____

If NEW Address, please list old address:

_____

PHONE_____CELLPHONE_____

E-MAIL (PRINT CLEARLY) _____

Sub-Chapter #_____

Current Dues are $24.00 for you or $48 for you and Your Spouse
Make check payable to RPEP-CHAPTER 13 (Retired Public Employees of PA)
Mail to: AFSCME Retiree Chapter 13 * 150 South 43rd Street * Harrisburg, PA 17111