

C-FS, PG, RI, PAT-IBT, ALL CC & VP

International Brotherhood of Teamsters

Teamsters Disaster Relief Fund

25 Louisiana Avenue, N.W.
Washington, D.C. 20001

Phone: (202) 624-7471
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FAX TRANSMISSION COVER SHEET

To: Teamsters Local Union 19 – (713) 672-9622
Teamsters Local Union 919 – (281) 872-7443
Teamsters Local Union 988 – (281) 560-2001
Teamsters Local Union 997 – (817) 568-0585
Teamsters Joint Council 58 – (281) 560-2001
Teamsters Joint Council 80 – (214) 398-3216
BLET – (216) 241-6516
BMWED – (248) 662-2659
GCC/IBT – (202) 624-8145

From: Antonio Christian, Secretary
Teamsters Disaster Relief Fund

Date: May 12, 2016

Message: Texas Disaster Alert Notice – DR-4269

This facsimile consists of 5 pages, including this cover sheet. Please contact Linda Benzer at (202) 624-6873 if you do not receive all of the pages.

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MEMORANDUM

VIA FACSIMILE

To: Local Unions 19, 919, 988 and 997
 Joint Council 58 and 80
 BLET
 BMWED
 GCC

From: Antonio Christian, Secretary
 Teamsters Disaster Relief Fund

Re: Disaster Relief

Date: May 12, 2016

The Teamsters Disaster Relief Fund recently received a "Disaster Alert Notice" for the state of Texas regarding the recent severe storms and flooding that caused major damage during the period April 17-24, 2016, in the following counties:

**Austin, Colorado, Fayette, Fort Bend, Grimes, Harris,
 Liberty, Montgomery, Parker, San Jacinto, Waller and Wharton**

On behalf of General President Hoffa, we would like to request your assistance to aid Teamster members in your area that have suffered a loss. We recognize the devastation in your area and, although our funds are limited, we would like to help as many people as possible. Enclosed is the "Notice to Post" and "Request for Help" form. Please inform us if any of your members have been impacted by the disaster. The completed "Request for Help" form (including all requested documentation) must be returned by June 17, 2016.

The IBT realizes the difficult task of rebuilding lives and the need to do an outreach to agencies that can assist. In that regard, please advise our office at (202) 624-8971 of any needs you may have, and we will do our best to accommodate them.

05/12/2016 16:39 FAX 202 624 6845

Office of the GS-T



**To: Local Unions 19, 919, 988 and 997
Joint Council 58 and 80
BLET
BMWED
GCC**

**From: Antonio Christian, Secretary
Teamsters Disaster Relief Fund**

Date: May 12, 2016

**PLEASE POST
DISASTER ALERT NOTICE
FEMA - #DR - 4269**

Texas Severe Storms and Flooding

On April 25, 2016, the Federal Emergency Management Agency (FEMA) declared a major disaster for the state of Texas opening the way for the use of federal disaster funds for people affected by the severe storms and flooding that occurred during the period April 17-24, 2016. Assistance is available to individuals and households in the following counties who may have experienced a loss due to this disaster:

**Austin, Colorado, Fayette, Fort Bend, Grimes, Harris,
Liberty, Montgomery, Parker, San Jacinto, Waller and Wharton**

Teamster members, please contact your Local Union office if you have suffered losses from this storm; fill out a "Request for Help" form (include all requested documentation) if you would like to request a grant from the Teamsters Disaster Relief Fund.

**DISASTER RELIEF FORMS MUST BE RETURNED TO THE
TEAMSTERS DISASTER RELIEF FUND BY JUNE 17, 2016**

REQUEST FOR HELP
TEAMSTER DISASTER RELIEF FUND
Reference Number-Texas-DR-4269

****Requested Documentation: Copies of Insurance Policies, Damage Claim forms, Repair or Reconstruction Estimates, Correspondence from Governmental or other Private Aid Agencies and pictures.**

****Important Information:**

Please be advised that this form must be completed in full and all documents must be attached for consideration. Please note that only claims over \$500.00 will be considered and any grants given will be at the sole discretion of the Board of Directors of the Disaster Relief Fund. Must have FEMA notification letter attached.

Please print all information

Name _____

Daytime Phone _____
(where you can be reached)

Address _____

S.S.N. _____

Parish or County: _____

Local Union No. _____

Principal Officer Signature _____

Check one: ___ IBT ___ BMWED ___ GCC ___ BLET

Check one: ___ Married ___ Single ___ Widow/Widower ___ Legally Separated or Divorced

No. of Dependents & Age (excluding yourself): _____

Employment Status: ___ Working ___ Unemployed due to disaster ___ Unemployed (pre-disaster) ___ Retired

Employer: _____

If working, what is your current rate of pay \$ _____

Other Current Sources of Household Income (please check all that apply):

Spouse earnings ___ Alimony/Child Support ___ Pension ___ Savings/Investment ___ Government Benefits ___

Estimated current weekly household income from all sources \$ _____

Estimated current weekly household expenses (food, housing, transportation, clothing) \$ _____

Extent of Damage:

____ Total loss of primary residence.

Described briefly:

Estimated Losses: PRIMARY RESIDENCE \$ _____ Dollar Amount OWN RENT

ITEMIZE BRIEFLY: (DWELLING STRUCTURE, FOUNDATION, ROOF, SIDING, SHEDS, ETC.)

Are any of these losses covered by insurance? _____ NO _____ YES

if yes, what is the policy deductible \$ _____ what is the policy limit \$ _____

Have you already applied to: Red Cross: ___ Yes ___ No F. E. M. A.: ___ Yes ___ No

Are you receiving federal, state, or other disaster relief? _____ Yes _____ No

If so, what type: _____ Total already received \$ _____

For each type of loss described above, please estimate the amount that you do not expect to be covered by insurance or other sources of disaster relief (include any insurance deductibles not covered by any other sources of relief):

Previous aid received from Teamster Disaster Relief Fund: Total \$ _____

I certify the above statements to be true and correct to the best of my knowledge and belief.

Signature Date

DUE BY JUNE 17, 2016

Send To: Teamster Disaster Relief Fund, 25 Louisiana Ave., N. W., Washington, D.C. 20001

Committee Use Only

Reviewed by: _____ Recommended by: _____

Amount: _____

Check Received by: _____ Date: _____