

SIGNATURE PAGE

FOR THE UNION:

THE SOUTHWEST REGIONAL COUNCIL OF CARPENTERS AFFILIATED WITH THE UNITED BROTHERHOOD OF CARPENTERS AND JOINERS OF AMERICA

By: \_\_\_\_\_  
Signature of Authorized Union Representative

\_\_\_\_\_  
Local Union Number

\_\_\_\_\_  
Date Signed

FOR THE EMPLOYER:

\_\_\_\_\_  
Contractor or Firm Name (Print exactly as listed with State License Board)

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City State Zip Code

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Contractors License Number

By: \_\_\_\_\_  
Signature of Authorized Employer Representative

\_\_\_\_\_  
Print Name and Title of Person Signing This Addendum

\_\_\_\_\_  
Date Signed

\_\_\_\_\_  
Date Insurance Coverage Starts