



PIONEER RETIREMENT INFORMATION

PLEASE PRINT OR TYPE ALL INFORMATION

<hr/>		
Last Name	First Name	Middle Initial
<hr/>		
Birthday (Month/Day)	Male/Female	ATTUID
<hr/>		
Employment Start Date	Retirement Date	
<hr/>		
Home Telephone Number	Home Email Address	
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Home Address (Street, Apt. #)	City, State, Zip	
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Chapter Name _____	Date _____	
Would you prefer your Life Member Package presented? ____ or mailed? _____		

Completed form should be mailed or faxed to:

AT&T Pioneers, C/O Shirley Sanz, 7337 Trade St, MS 4950, San Diego, CA 92121

Fax to 858-536-8703