

# The New York City District Council of Carpenters WOODWORK REPORT

Date: \_\_\_\_\_  
Job Name: \_\_\_\_\_  
Job Address & Floor #: \_\_\_\_\_  
Your Employer: \_\_\_\_\_  
General Contractor: \_\_\_\_\_  
Woodwork Manufacturer: \_\_\_\_\_  
Union Label Number: \_\_\_\_\_  
State: \_\_\_\_\_  
District Number: \_\_\_\_\_  
Woodwork Installer: \_\_\_\_\_

Woodwork consists of any type of cabinetry, wood doors and jambs, trim, moldings, wall panels, desks, ...etc.

Check here if there is no woodwork on this job: \_\_\_\_\_

This form must be completed in full and returned to your local union immediately.

Signed: \_\_\_\_\_  
Shop Steward

## What to Look For On The Label

