



Reimbursement of Labour Council Affiliation Dues Form

Local #: _____ Period: _____

confirms that it is a member of District Labour Council: _____

It is understood that labour affiliation dues will be paid by the Local to the District Labour Council and 90% of the total amount will be reimbursed to the local by OPSEU Head Office.

Number of affiliated members: _____

Per member capita charge: _____

Amount paid by local: (Attach receipt or copy of the front and back of cashed cheque issued) _____

Total refund payable to OPSEU local: _____

President of local Signature of president Date: (mm/dd/yyyy) _____

Treasurer of local Signature of treasurer Date: (mm/dd/yyyy) _____

Note: Please complete form and attach a receipt or copy of the front and back of cashed cheque issued and send to Accounting Services Unit at:

100 Lesmill Road
Toronto, Ontario
M3B 3P8