



CUPE ALBERTA DIVISION
EDMONTON, ALBERTA

APPLICATION FOR
SMALL LOCALS ASSISTANCE 2009

LOCAL NUMBER _____ TYPE OF LOCAL _____

MAILING ADDRESS _____

NUMBER OF MEMBERS _____

DATE _____

In accordance with the Alberta Division Constitution and if applicable:

This is to certify that Local No. _____ will be applying to the Alberta Division for reimbursement for one (1) Delegate to attend the _____ held at the _____, in _____ on _____ 2009.

SIGNED ON BEHALF OF THE LOCAL:

PRESIDENT

SECRETARY/TREASURER

ALL EXPENSES WILL BE PAID TO THE LOCAL

NAME OF DELEGATE: _____

WAGES LOST: _____ HOURS AT _____ X 75% \$ _____

REGISTRATION _____ X 75% \$ _____

ACCOMMODATION _____ X 75% \$ _____

TRAVEL _____ KMS @ .53 \$ _____ X 75% \$ _____

BUS \$: _____ AIRFARE:\$ _____ X 75% \$ _____

TOTAL REIMBURSEMENT: \$ _____

Cheque Number _____

Please return this form along with appropriate receipt(s) to the following:

Neil Ketter, CUPE Alberta Treasurer
10425 – Princess Elizabeth Avenue,
Edmonton, Alberta, T5G-0Y5