

MONTHLY REPORT OF AFFILIATION FEES

Name of Union: _____ **Local:** _____

Please mark clearly the number of members and month(s) of remittance:

Month	# of Members	@ .32	Remittance

Annual payment option:

# of Members	X12 months	@ .32	Remittance

Please make cheques payable to:

**Saskatoon and District Labour Council
325 Fairmont Drive
Saskatoon, SK; S7M 5G7**

Union President: _____

Financial Secretary/Treasurer: _____

Address: _____

Email: _____

Phone: _____