

# HAMILTON AND DISTRICT CUPE COUNCIL

## Quarterly Affiliation Form

To be mailed with cheque to the HDCC Treasurer:

HAMILTON & DISTRICT CUPE COUNCIL/HDCC  
ATTN: TARYN GOUDIE  
SUITE 1- 795 KING STREET EAST  
HAMILTON, ONTARIO L8M 1A8

The following must be completed by the local treasurer:

Affiliated Local: \_\_\_\_\_

Remitting Payment for:

- ☐ Quarter 1 (January to March)
- ☐ Quarter 2 (April to June)
- ☐ Quarter 3 (July to September)
- ☐ Quarter 4 (October to December)

DESCRIPTION	NUMBER OF MEMBERS	MONTHLY PER CAPITA RATE*	NUMBER OF MONTHS	TOTAL
FULL TIME		\$0.15	3	
PART TIME		\$0.075	3	
TOTAL				

\*As per HDCC Bylaw Article XII

CERTIFIED CORRECT: \_\_\_\_\_  
(Signature of Local Treasurer)

Treasurer Contact: Name: \_\_\_\_\_

Email: \_\_\_\_\_

Local Mailing Address: \_\_\_\_\_

\_\_\_\_\_