



## LOCAL 054 HONORARIUM FORM

For the Term of 20\_\_\_\_ thru 20\_\_\_\_\_

Local 054 pays Honorariums to Council Reps & Chapter Executives Board which is prorated based on attendance at Local Council and Chapter meetings and verified by signed attendance sheets.

**To receive your Honorarium you must complete this form.**

### PLEASE PRINT

Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: AB

Postal Code: \_\_\_\_\_

Chapter: \_\_\_\_\_ \_\_\_Chair \_\_\_Vice Chair \_\_\_Treasurer \_\_\_Secretary  
\_\_\_Secretary/Treasurer

- Yes I accept the Honorarium(No Honorariums will be paid without SSN.
- My SIN # \_\_\_\_\_
- No I do not accept the Honorarium

Signature \_\_\_\_\_

Date: \_\_\_\_\_