## LiUNA Local 837

## **EMPLOYER CONTRIBUTIONS ICI**

Due by the 15th of the Following Month

ontributing Employer				Report for Month of:			
Authorized Signature:					Email:		
Please re	eport Employe	ee D	ETAILS or	n	reverse side (	of F	orm
WELFARE		x _		=		Α	
	Hours		Rate			В	
					Add 8% PST on <b>A</b>	_	
OCCUPATIONAL HEALTH & SAFETY		х _		=		С	
	Hours		Rate				
LEGAL FUND	Hours	х _	Rate	=		D	
COLLON A DOLLIN FLINID	nouis					_	
SCHOLARSHIP FUND	Hours	Х _	Rate	=		_ E	
INDUSTRY/EMPLOYER FUND		х		=		F	
·	Hours	_	Rate			_	<b>A</b>
					Add 13% HST on <b>F</b>	_ G	\$ A+B+C+D+E+F+G
ļ	Please make cheaue nava	hle to I	ABOURERS LOCAL	83		lacksor	St E, Hamilton, ON L8N 1L4
MONTHLY DUES WORKING DUES (Admin Fund)	Total Employees  Gross Earnings / Hours	x _	Amount	=		_ R _ S	
TRAINING FUND	5. 555 = 5	х		_		т	ė
TRAINING FOND	Hours	^ –	Rate	_		- '	ب R+S+T
	Plea	ise mak	e cheque payable i	to	LIUNA LOCAL 837, 170.	lackson	St E, Hamilton, ON L8N 1L4
VACATION PAY	Gross Earnings	x _	% VP Rate	=		$\Rightarrow$	\$
Please r	_	.ABOUI		4CA	ATION PAY TRUST, 170.	lacksor	St E, Hamilton, ON L8N 1L4
PENSION		х		=		w	
	Hours	_	Rate			_	
TRI-FUND		х _		=		Х	
	Hours		Rate			•	
O.P.D.C.		х _		=		Υ	
	Hours		Rate				
СВТИ		х _	φσ.σΞ	=		Z	\$
Diama man	Hours	2011Br	Rate	ND.	OF CENTRAL & FASTE	N CAR	W+X+Y+Z

Please make cheque payable to **LABOURERS PENSION FUND OF CENTRAL & EASTERN CANADA** and <u>MAIL directly</u> to PO Box 9002, Lakeshore West PO, Oakville, ON L6K 0G1

## LiUNA Local 837

Contributing Employer	Report for Month of:	

If no members of Local 837 were employed during the month, please write "Nil", and forward your report in the normal manner

Employee's Name	Employee's SIN	Total HOURS Worked	Gross Earnings	Monthly Dues	Working Dues	Vacation Pay
0						
1						
2						
3						
4						
5						
6						
7						
8						
9						
0						
				1		
	TOTALS					