

## Eastern Great Lakes District CUPE Council Per Capita Form 2026

Local Name:

Local #: \_\_\_\_\_ Date of Cheque: \_\_\_\_\_ Cheque #: \_\_\_\_\_

**Average monthly membership:** \_\_\_\_\_ members x \$0.25 x 12 months = \$ \_\_\_\_\_

Help us keep our records up to date by providing the following information:

\_\_\_\_\_  
Treasurer Name, Email Address

\_\_\_\_\_  
President Name, Email Address

As per Article 5.01 of our bylaws, each affiliate is entitled to four (4) voting delegates:

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_

Please make cheques payable to: **Eastern Great Lakes District CUPE Council** (EGLDCC) and mail to: Jillann Rothwell, 45 Michael Grass Cres, Kingston, ON K7M 2W2

Questions? Email Secretary-Treasurer Jillann Rothwell [jrothwell45@gmail.com](mailto:jrothwell45@gmail.com)