



FORM B: Originally Qualifying Information of Union

The Labour Relations Act

Union name:

Address (Street, City, Postal Code):

International

National

Provincial

Local

Local Union (if Applicable):

Date of issue of Local Union's Charter:

Local address:

President

Name:

Address (Street, City, Postal Code):

Email:

Term of Office:

Vice - President

Name:

Address (Street, City, Postal Code):

Email:

Term of Office:

Secretary

Name:

Address (Street, City, Postal Code):

Email:

Term of Office:

Treasurer

Name:

Address (Street, City, Postal Code):

Email:

Term of Office:

Business Agent

Name:

Address (Street, City, Postal Code):

Email:

Term of Office:

ATTACH: (.pdf electronic format preferred)

Constitution

General By-Laws

Local Union's Charter

Local Union's General By-Laws

I, _____ Secretary of the above-named Local Union hereby certify the correctness of the documents and of the information now filed.

Date: