EMPLOYEE MONTHLY REPORT FORM BRICKLAYERS LOCAL 25 REMITTANCES

Effective May 1, 2013

Employed during the month of_

EMPLOYEES NAME	SOCIAL INSURANCE NUMBER	TOTAL HOURS EARNED	CHECK OFF \$1.00 PER HOUR	TRAINING AND BUILDING FUND \$1.00 PER HOUR	HEALTH & WELFARE \$2.57 + 0.21 RST \$2.78 PER HOUR	
	<u>.</u>					
		2				
			ļ			
	TOTALS			SALASSE SALASS		
ı	TOTAL	JNION				
EMPLOYERS NAME:		Cheques for Local Union are to be mailed to: BRICKLAYERS UNION LOCAL 25				

EMPLOYERS NAME:	
EMPLOYERS ADDRESS:	
We require a supply of report forms	

275 Grenville Avenue Thunder Bay ON P7A 2A6

Cheques for Health & Welfare are to be mailed to: **LOCAL 25 EMPLOYEE BENEFIT TRUST** c/o David S. Kubinec CPA, CA, CBV, CFP (Administrator) **BDO Canada LLP** 1095 Barton Street **Thunder Bay ON P7B 5N3**