



CUPE

METROPOLITAN VANCOUVER DISTRICT COUNCIL

PER CAPITA TAX FORM

TO: The Treasurers of Affiliated Locals

FROM: Treasurer

CUPE Metro District District Council
218 - 800 McBride Blvd
New Westminster, BC V3L 2B8

This Per Capita Form to be submitted with payments

Local #: _____ **Local Name:** _____

Per Capita Tax Rate .007% per member per month, based on the monthly wage. Payable quarterly, and to include Rand Formula employees.

	PER CAPITA TAX FOR THE MONTH OF:	REG. MEMBERS	RAND FORMULA	TOTAL MEMBERS	TOTAL MONTHLY WAGE	PER CAPITA TAX RATE	AMOUNT SUBMITTED
1						0.007%	
2						0.007%	
3						0.007%	
	Arrears for what period _____					0.007%	
	TOTAL FOR QUARTER					\$	

Enclosed cheque is in the amount of \$ _____ . Date: _____

Please make the cheque payable to: CUPE METRO and mail to the above address.

Submitted by:		
	Treasurer's Name	Treasurer's Signature