

Your bargaining priorities

Please complete this form and return by mail or fax (**905.850.0839**) to the union office, as soon as possible. Completed forms can also be given to your staff representative.

Monetary Items: such as hours of work, overtime, night premiums, vacation with pay, statutory holidays and bereavement leave.

I suggest the following: _____

Non Monetary Items: such as grievance procedures, seniority rights, union security,

I suggest the following: _____

Group Insurance Benefits and Pensions:

I suggest the following: _____

Wages: A percentage increase? _____ or an hourly increase? _____/increase per hour
Part-time employees _____

Term of Agreement: How long would you like to see for the term of agreement: _____

Other Comments: _____

Tell us about yourself

Please complete the following:

Name (optional): _____

Work Location: _____

Job Classification: _____

Hourly Wage/Rate: _____

Would you like to be placed on our email list to receive updated information about your local?

Yes _____ No _____ If yes, email address: _____

Other Comments: _____



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