

Notification of Strike Commencement

This form must be sent immediately after strike action commences.

To: – National Secretary-Treasurer

Copies to: – National President
– General and Regional Vice-President(s)
– Director and Assistant Directors of Organizing and Regional Services Department
– Regional Director and Assistant Regional Director(s)
– Director of Communications Branch

Local Union No.:

Town/City:

Province:

Began their strike on: (day, date, time)

If rotating strike provide details of planned work stoppage:

Strike headquarters location:

Street:

City:

Province:

Postal Code:

Phone:

Fax:

Correspondence to the local union should be addressed to:

Name:

Position:

Street:

City:

Province:

Postal Code:

CUPE Representative:

Date: _____ (print)

_____ (signature)