

# Strike Pay Application Tally Sheet

*In accordance with Article 4.1, each member applying for strike pay must sign Form E.  
Print as many copies of this blank form as needed.*

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I, the undersigned, hereby make application for strike pay:

Print full name	Signature

Information above is accurate and verified, signed this \_\_\_\_\_ of \_\_\_\_\_, 20\_\_\_\_\_

Chairperson, strike benefits committee: \_\_\_\_\_  
(print and signature)

CUPE National Representative: \_\_\_\_\_  
(print and signature)