



**LIQUOR BOARD EMPLOYEES DIVISION (LBED)
“EMERGENCY FUND” APPLICATION
PAGE TWO**

CONFIDENTIAL

NOTE: THE APPLICATION FORM MUST BE COMPLETED.
ANY INCOMPLETE APPLICATION WILL BE RETURNED TO YOU.

CHECKLIST BEFORE MAILING APPLICATION FORM:

- Please ensure the application form is signed.
- You have indicated your reason for applying.
- You have ensured all your contact information is correct.
- You have included all documents that support your application.
- Please mark your envelope private and confidential.

PLEASE MAIL THE COMPLETED FORM AND ALL SUPPORTING DOCUMENTS TO:

**LBED EMERGENCY FUND, ATTN: NEGOTIATOR FOR LBED
OPSEU 100 LESMILL ROAD
NORTH YORK, ON
M3B 3P8**

For Emergency Fund Committee use only

Committee’s Decision:

Signature

Date

Signature

Date

Signature

Date