

# Supplies and materials order form 2023



## How to order for your local

Supplies and materials listed in this form are supplied to locals at no cost.

Forms must be signed by your local Secretary-Treasurer and your Chair or Site Rep.

Items will be sent to the shipping address on your order form.

You can send this form one of two ways:

- Fill out this PDF, save, and email it
- Print the PDF, fill out by hand and fax

Email: [mailroom@heu.org](mailto:mailroom@heu.org)

Fax to 604-739-1519

If you have any questions, please contact the Mailroom at the Provincial Office at [mailroom@heu.org](mailto:mailroom@heu.org) or call 1-800-663-5813 (toll-free).

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QTY	ITEM (note: no charge for these items)
	Accounting Ledger
	Attendance book
	Ballots – 50/pad
	Change in Membership Data Forms
	Constitution & Bylaws – Booklets, Bound & Stapled (3.5" x 5.5")
	Contracts – <input type="checkbox"/> Facility <input type="checkbox"/> Community Subsector <input type="checkbox"/> Community Social Services (booklets, bound/stapled (3.5" x 5.5"))
	Contracts – <i>For "Independent" and "Other" please contact your Regional Union Representative</i>
	Death Benefit Fund Card
	Grievance Pads – 10/pad (Grievance Log included)
	Independent Professional Responsibility Form
	Job Review Booklets – Facilities (includes Classification Review Form)
	Local Activities Report Form
	Local Executive Form (Political Action Comm., Labour Council Delegate, OH&S Stewards Comm., Griev/Shop Steward Comm.)
	Local Letterhead
	Local Officers Guide to Resolving Conflict and Code of Ethics
	Local Supply Order Form
	'Look who's dropping in' Form
	LPN Professional Responsibility Form
	Membership Meeting Notices – Regular Meeting
	Membership Meeting Notices – Special Meeting
	Minute Record Form
	New Member Kit
	Placards - Blank – 14" x 22"
	Placards – 'HEU Supports' – 14" x 22"
	Quarterly Report Booklets - 12/pad
	Retirement Form
	Retirement Pins – Name of Member:
	Supervisor's Handbook
	Union Fact Sheet: <input type="checkbox"/> Facility <input type="checkbox"/> Community Subsector <input type="checkbox"/> Community Social Services
	Union Meeting Fluorescent Stickers – 24/sheet
	Union Membership Pins
	Workload Journal
	Workload Incident Report Form

CONTACT INFORMATION: please print CLEARLY.

FACILITY NAME \_\_\_\_\_ DATE \_\_\_\_\_

ADDRESS \_\_\_\_\_

SIGNATURE OF SECRETARY-TREASURER \_\_\_\_\_

SIGNATURE OF SITE REPRESENTATIVE \_\_\_\_\_