

Message from the Board of Trustees

CORONAVIRUS (COVID 19) PANDEMIC ADVISORY

ADDITIONAL EXTENSION OF THE WELFARE RELIEF GRANT

In a previous newsletter we advised that the government had introduced the Canada Emergency Response Benefit (CERB) on March 15, 2020. Members are still prevented from claiming the Supplementary Unemployment Benefit (SUB). Our SUB plan is registered with Employment and Social Development Canada (ESDC) under the Employment Insurance Act and is only permitted as a top-up payment to employees who are receiving unemployment benefits under the EI Act.

During the Global Pandemic of COVID-19 the government made the decision to extend the CERB benefit for an additional 8 week period and now once again, the Federal government has further extended the benefit until October 3rd, 2020. Keeping in line with the Federal government and to continue to assist our Members, the Board of Trustees along with their Legal Counsel has approved the Welfare Relief Grant for an additional two (2) months for members who meet the criteria. In total, the Welfare Relief Grant was approved for five (5) months.

To apply for the Welfare Relief Grant please complete the attached application, sign the declaration and return to Reliable Administration Inc. should you wish to claim the Relief Grant.

May you and your families remain healthy & safe.

Sincerely,

Your Board of Trustees

Steve Foffano (Chair)
Ross French (Secretary)
Nathan Bergstrand
Leslie Ellerker

Victor Langdon
Ken Luxon
Dave Marcus
Bill Stanger

May 2020

CERB Declaration for Applying for the Welfare Relief Grant

Dear Trustees:

I hereby declare that I am currently in receipt of the Canadian Emergency Response Benefit (CERB) of \$2,000 per 4-week period. As these funds are automatically deposited to my account, I am unable to provide supporting documentation.

Pay Period for which I have received CERB Benefit _____

(initial) I understand and acknowledge that if the Canada Revenue Agency or any other government agency determines at a later date that I did not meet the eligibility requirements for CERB and requires that I repay those benefits, I will also be required to repay any related Welfare Relief Grant benefits paid to me by the Plumbing and Pipefitting Workers Welfare Fund, Local 67 (the "Welfare Fund").

(initial) I hereby declare and commit to immediately repay the Welfare Fund any amounts that may be owing if it is determined that I was ineligible to receive CERB benefits.

(initial) I understand that if I have worked during the pay period stated above, this disqualifies me from receiving the Welfare Relief Grant.

I further declare that the information provided in this letter is true.

Signed _____ Date _____

Name _____
(please print)

SIN _____