

WORKING TOGETHER FOR SASKATCHEWAN

1011 Devonshire Drive North, Regina, SK S4X 2X4 (p) 522.8571 1.800.667.5221 (f) 775.5775 (e) Itd@sgeu.org

Gov of Sask Members: Please send the form directly to SGEU LTD Office.

We will get the employer data on your behalf.

www.sgeu.org

@sgeu.sk

O @sgeu

### @sgeunion

## Saskatchewan Government and General Employees' Union

# LONG TERM DISABILITY

### Rebate of LTD Dues

Member Information:

Name:	
Address:	
	PR: Postal Code:
E-Mail Address:	
Date of Birth:(DD/MMM/YY)	Retirement Date: (DD/MMM/YY)
*Member Signature:  * Signature & Date are REQUIRED fiel	*Date:
l authorize my employer to provide s refund. Effective July 1, 2019; all pa	salary and sick leave information to SGEU for this ayments from SGEU will be made electronically to your mation on page 2 of this form to receive your rebate.
	information to SGEU LTD Office at L Devonshire Dr N Regina SK S4X 2X4
Employer Name:	
Human Resources/Payroll Area to com	nplete following information:
What was the original date of hir	re?
In what pay period were LTD o	dues last deducted?
If the LTD Dues stopped prior to	retirement date, please give reason:
On the date of the LAST LTD of	dues deduction:
What was the number of Sick Le	eave Hours remaining:?
How much was the Gross Hour	ly Pay: \$
Contact Name:	Telephone:

SGEU Office Use Only:

UW #: MIN:

Rcvd:

Form must be received by SGEU within one (1) year of retirement date

Page 1 of 2

#### SGEU Direct Deposit Information (Electronic Funds Transfer)

Effective July 1, 2019; all refund and rebate payments from SGEU will be made electronically to your bank account.

A non-negotiable copy of your pay advice will be delivered on or shortly after the day the funds have been deposited into your account.

The date and signature on the front of this rebate form is my authorization for SGEU to deposit my payment directly into my account.

You MUST attach either a void cheque OR a 'Direct Deposit Form' from your financial institution OR have your local branch complete the box below in order to allow SGEU to issue payment.

VERIFICATION BY BRANCH:	
Name of Financial Institution:	
Institution Number (3 digits):	
Branch or Transit Routing Number (5 digits):	
Account Number:	
Signature of Branch Officer:	
OR: Branch Stamp:	

Questions can be forwarded to LTD@sgeu.org