

# 2020 ANNUAL MEMBERSHIP RENEWAL FORM

(Membership period January 1, 2020 to December 31, 2020)

**The 2020 Membership Fee will remain at \$30.**

Please be reminded that due to the very nature of the Plan of Compromise, with Stelco now relieved of Pension and OPEB liabilities (with the exception of the relatively small guaranteed annual payments over a finite period), it is now extremely important for SSPO to maintain AND strengthen what is now considered a relatively healthy contingency fund. *The Board fully appreciates that a \$30 membership fee may pose a hardship for some of our elderly members. If that should prove to be the case, you may elect to submit a lesser amount, and indicate that you are a hardship case.*

**PLEASE NOTE: MEMBERSHIP FEES CAN BE PAID ON-LINE USING PAYPAL.** Pay directly from your linked bank account, with Visa Debit, OR Pay with a credit card. You do not need to have a PayPal account to use this service, but if you prefer, you may use an existing PayPal account or create a new one. There will be a small service fee of approximately \$1.20 per transaction for using this service. To make a payment using PayPal, visit the SSPO Website Home Page ([www.sspo.ca](http://www.sspo.ca)) for complete instructions and access to this Service. We encourage our members to use this electronic payment service.

Please submit your 2020 Membership Fee without delay, either through PayPal or complete the 2020 Membership Renewal Form (below) and, submit it with you \$30 cheque.

**A fully completed form makes it much easier for us to process and track your payment within our accounting system**

**The deadline is December 31, 2019. PLEASE DO IT NOW!**

**YOUR CANCELLED CHEQUE WILL BE YOUR RECEIPT**

**NOTE:** The SSPO only shares important information with those members in "good standing".

**We appreciate your continuing support.**

SSPO Board of Directors

Denis Boiteau, Gary Dallin, George Hanson, Brian Lisson, Wayne Hill, Pat Mousseau, Ken Tyler, John Whittaker

.....*Cut along dotted line, complete form, and mail with your \$30 fee*.....

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(Please print clearly)

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Country: \_\_\_\_\_

E-mail Address: \_\_\_\_\_ Phone: \_\_\_\_\_

**Status:** Pensioner  Surviving Spouse  Active Employee  Works: \_\_\_\_\_

*Optional:* Year of Birth \_\_\_\_\_ Amount Contributed: \_\_\_\_\_

**Mail to: Stel Salaried Pensioners Organization  
Hamilton, Ontario  
2-558 Upper Gage Ave., Suite 146  
L8V 4J6**