### **LEADERSHIP STIPEND**



# Elected Statewide CFT Leadership Stipend Request and Certification

As per Resolution 2 from the 2011 CFT Convention, CFT will compensate persons serving in CFT positions elected statewide who are not receiving release time, load reduction, or a reasonable stipend for CFT work from their local. Completion of this form is required for payment.

#### **Guidelines and Directions**

- 1) Only one stipend will be issued per person for any given period.
- 2) The CFT leadership stipend is \$500 per period.
- 3) Both sections of this form must be completed for payment consideration. Section I is for payment and tax reporting by the recipient. Section II is for verification by another local leader for eligibility.
- 4) If you received any form of compensation from the local for CFT work, you are required to disclose it. A "reasonable stipend" paid by the local is any amount equal to or greater than the CFT leadership stipend. CFT will make whole and pay the difference between the CFT leadership stipend and the local's stipend.
- 5) Stipends will be issued for the periods of Spring and Fall. Spring is the period of January 1–June 30 and Fall is the period of July 1–December 31. Fall Stipends will be paid by March 15 and Spring Stipends will be paid by September 15.
- 6) Stipends will only be issued to those who are eligible and who serve 50% or greater for the stipend period, i.e. at least 90 days or 3 months of the period.

#### **SECTION I: Instructions**

- 7) Complete Section I including the CFT statewide title and the start date and end date of the position served. (Example: If elected at the 2013 Convention, the start date would be April 1, 2013 and end date would be June 30, 2013 for Spring 2013 period. The same person would record July 1, 2013 as start date and December 31, 2013 for Fall 2013 period).
- 8) This form must be filed with CFT for each period a stipend is requested and must be received **no later than 30 days** after completion of the period.
- 9) You are responsible for reporting the taxable portion of this payment to the IRS.

#### **SECTION II. Instructions**

10) One of your local union leaders must complete Section II Verification. A local leader is the president, treasurer, or senior vice president who is not the recipient of the stipend.

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SECTION I: Elected Statewide CFT L	eadership Position Certi	ilcation
"l,	, (Name of stipe	nd recipient) certify that during the period of
	(Start date) to	(End date),
I served in the elected statewide position	of	(Title of position)
and during the same period of time indica	ated above I did not receive	release time, load reduction, or a reasonable
stipend from the local for CFT work. To th	e best of my knowledge all	information is correct and I am entitled to
the full or partial CFT stipend."		
Statewide Officer Name		
Address		
City and Zip		
Social Security Number		
Signature		
Date		
SECTION II: Verification by Local		
		, (Name of local leader) certify that during
		(Name of stipend recipient)
did not receive release time or load reduc		
		(Dollar amount of local stipend)
from the local for CFT work."		
Local Name and Number		
Return request to: CFT Secretary Treas	•	
FOR OFFICE USE: Date received	Date approved	Date check mailed

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