IRON WORKERS’ LOCALS 15 & 424

PENSION - EXTENDED BENEFIT - APPRENTICE TRAINING - ANNUITY

321 Research Parkway - Suite 210

Meriden, CT 06450 Phone (203) 238-1204 or 1-800-982-3709 Fax (203) 639-0815

#  Benefit Contribution Report

|  |  |
| --- | --- |
| **Employer’s Name and Address** | Page: \_\_\_\_ of \_\_\_\_ |
| Send More Forms: \_\_\_\_ Yes \_\_\_ No |
| Job Complete: \_\_\_\_ Yes \_\_\_ No |

**Week Ending Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Journeyman Rate: $34.47**

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| SOCIAL SECURITY # | NAME | JOB LOCATION | HOURS WORKED |  HOURS PAID |
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| One check required for all Funds – Payment Due by 2nd Thursday after work week Total Hrs: |  |  |
| We warrant the above information to betrue and correct. This report constitutes a written agreement under the Taft Hartley Act.Signed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | FUND | HOURS | TYPE | RATE | AMOUNT |
| Pension Fund |  | Worked | $11.45 |  |
| Extended Benefit Fund |  | Worked |   $10.48 |  |
| Apprentice Training Fund |  | Worked | $1.05 |  |
| I.M.P.A.C.T. |  | Worked | $.26 |  |
| CIEA Industry Program |  | Worked | $.09 |  |
| Fund Office Use Only: | AGC/CCIA Bldg Promotion Program ( includes $.01 to CCLMC ) |  | Worked | $.05 |  |
| Posting Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Annuity Fund |  | Paid | $4.61 |  |
| Ck #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Pension Fund Supplemental Contribution |  |  Paid | $3.50 |  |
| Ck Amt:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Total Contribution (Rates Effective June 29, 2015) |  |