IRON WORKERS LOCAL NO.12 FRINGE BENEFIT FUNDS

Telephone # (855)-210-1649

[Doc 07/01/22-06/30/2023]

PO Box 5817 Wallingford, CT 06492 Fax# (203)-284-8656

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APPRENTICE REMITTANCE REPORT

[For - Iron Workers Local 12 Pension Fund, Iron Workers Local 12 Health Fund, Iron Workers Local 12 Joint Training & Education Fund, Iron Workers Local 12 Union and Employers Cooperative Trust, Iron Workers District Council of Western NY Pension Fund, Iron Workers District Council of Western NY Annuity Fund and Upstate New York District Council of Iron Workers and Employers Cooperative Trust]

Covering the period of	Job Location	
1 st Year Apprentice	Social Security #	Hours Worked
TOTAL HOURS REPORTED		
WELFARE [\$6.75]	hours @ \$9.02 mor hour — \$	Charle Total
TRAINING & EDUC. [\$0.40] I.W.E.C.T. [\$0.88]	hours @ \$8.03 per hour = \$ Check Total	
Please make check payable to:	Iron Workers Local No. 12 Fringe Benefit Funds	
Mail form and check for above amount to:	PO Box 5817, Wallingford, CT 06492	
ANNUITY [\$3.75]		
Upstate Employers [\$0.04]	hours @ \$3.79 per hour = \$	
Please make check payable to: Mail form and check for the above amount to:	Iron Workers District Council of Western NY 3445 Winton Place, Ste. 238, Rochester, NY 14623-2950	
iviali form and check for the above amount to.	3443 Willion Flace, Ste. 236, Rochester, N	1 14025-2750
2nd Year Apprentice	Social Security #	Hours Worked
zna Teal Applenaec		
TOTAL HOURS REPORTED		
WELFARE [\$6.75]		
TRAINING & EDUC. [\$0.40]	hours @ \$19.32 per hour = \$	\$Check Total
I.W.E.C.T. [\$0.88] SUPP. PENSION [\$10.00]		
WORK ASSESSMENT (EMPLOYEE DEDUC		
Please make check payable to:	Iron Workers Local No. 12 Fringe Benefit Fun	ds
Mail form and check for above amount to:	PO Box 5817, Wallingford, CT 06492	
PENSION [\$1.95]ANNUITY [\$3.75]	0.0574	
Upstate Employers [\$0.04]	hours @ \$5.74 per hour = \$	Check Total
Please make check payable to:	Iron Workers District Council of Western I	
Mail form and check for the above amount to:	3445 Winton Place, Ste. 238, Rochester, N	Y 14623-2950
		Union identified on this report, the Employer agrees Local Union No. 12 ("Union") and the Agreements
and Declarations of Trust of the Funds identified	d on this report, together with any restatements	or amendments thereto and any policies adopted
thereunder. Further, the Employer authorizes, ratundersigned and certifies that none of the persons		ver Trustees and their successors as if made by the or self-employed individual.
Company Name	Federal ID#	Company Officer
Address	Telephone#	FAX #
Submitted By	Title	Date

Telephone # (855)-210-1649

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APPRENTICE REMITTANCE REPORT

[For - Iron Workers Local 12 Pension Fund, Iron Workers Local 12 Health Fund, Iron Workers Local 12 Joint Training & Education Fund, Iron Workers Local 12 Union and Employers Cooperative Trust, Iron Workers District Council of Western NY Pension Fund, Iron Workers District Council of Western NY Annuity Fund and Upstate New York District Council of Iron Workers and Employers Cooperative Trust]

Covering the period of	Job Location	
3rd Year Apprentice	Social Security #	Hours Worked
TOTAL HOURS REPORTED		
WELFARE [\$6.75] TRAINING & EDUC. [\$0.40]	hours @ \$20.86 per hour = \$	Check Total
I.W.E.C.T. [\$0.88]	nours @ \$20.00 pcr nour = \$	Check Total
SUPP. PENSION [\$11.42]	TT(0) () (41)	
WORK ASSESSMENT (EMPLOYEE DEDUC Please make check payable to:	IION)[\$1.41] Iron Workers Local No. 12 Fringe Benefit Fund	ls.
Mail form and check for above amount to:	PO Box 5817, Wallingford, CT 06492	
PENSION [2.22]		
ANNUITY [\$3.75] Upstate Employers [\$0.04]	hours @ \$6.01 per hour = \$	Check Total
	nours @ wo.or per nour = w	Check Total
Please make check payable to:	Iron Workers District Council of Western NY	
Mail form and check for the above amount to:	3445 Winton Place, Ste. 238, Rochester, NY 1	4623-2950
Ath Voor Appropries	Cocial Cocymity: #	Hours Worked
4th Year Apprentice	Social Security #	Hours worked
TOTAL HOURS REPORTED		
WELFARE [\$6.75]		
TRAINING & EDUC. [\$0.40]	hours @ \$22.41 per hour = \$	Check Total
I.W.E.C.T. [\$0.88]		
SUPP. PENSION [\$12.85] WORK ASSESSMENT (EMPLOYEE DEDUC	TION\(\$1.53)	
Please make check payable to:	Iron Workers Local No. 12 Fringe Benefit Fund	ls
Mail form and check for above amount to:	PO Box 5817, Wallingford, CT 06492	
PENSION [\$2.50]		
ANNUITY [\$3.75] Upstate Employers [\$0.04]	hours @ \$6.29 per hour = \$	Check Total
Please make check payable to:	Iron Workers District Council of Western N	IY
Mail form and check for the above amount to:	3445 Winton Place, Ste. 238, Rochester, NY	Y 14623-2950
By executing and submitting this remittance report	and/or contributions/deductions to the Fund and U	Union identified on this report, the Employer agree
that if is bound by the terms and conditions of a Co	llective Bargaining Agreement with Iron Workers l	Local Union No. 12 ("Union") and the Agreement
	d on this report, together with any restatements tifies and accepts the appointment of the Employe	
	listed on this report is a sole proprietor, partner or	
	Federal ID#	
	Telephone #	
	Title	
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