IRON WORKERS LOCAL NO.12 FRINGE BENEFIT FUNDS

Telephone # (855)-210-1649

PO Box 5817 Wallingford, CT 06492

Fax# (203)-284-8656

Wallingford, CT 06492 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 Workers and Employers Cooperative Trust]

Covering the period of	Job Location_		
1st Year Apprentice	Social Security #	Hours Worked	

TOTAL HOURS REPORTED			
WELFARE [\$6.75]			
TRAINING & EDUC. [\$0.40]	hours @ \$7.75 per hour = \$_	Check Total	
I.W.E.C.T. [\$0.60]		.	
Please make check payable to: Mail form and check for above amount to:	Iron Workers Local No. 12 Fringe Benefit Fund PO Box 5817, Wallingford, CT 06492	QS .	
Mail form and check for above amount to:	PO Box 3817, Wallington, C1 00+32		
ANNUITY [\$3.50]			
Upstate Employers [\$0.07]	hours @ \$3.57 per hour = \$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, N	1 14023-2930	
2nd Year Apprentice	Social Security #	Hours Worked	
TOTAL HOURS REPORTED			
WELFARE [\$6.75]		o di di maal	
TRAINING & EDUC. [\$0.40]	hours @ \$18.08 per hour = \$	SCheck Total	
I.W.E.C.T. [\$0.60] SUPP. PENSION [\$9.40]			
WORK ASSESSMENT (EMPLOYEE DEDUC	CTION)[\$0.93]		
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 [\$1.74]			
ANNUITY [\$3.50]		Maril Maril	
Upstate Employers [\$0.07]	hours @ \$5.31 per hour = \$	Check Total	
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		
Mail form and check for the above amount to:	3443 Willion Flatt, Sic. 236, Rochester, 14	1 14023-2730	
By executing and submitting this remittance repor	t and/or contributions/deductions to the Fund and I	Union identified on this report, the Employer agree	
that if is bound by the terms and conditions of a Co	liective Bargaining Agreement with Iron Workers	Local Union No. 12 ("Union") and the Agreement	
and Declarations of Trust of the Funds identifie	d on this report, together with any restatements	or amendments thereto and any policies adopted	
thereunder. Further, the Employer authorizes, re	itities and accepts the appointment of the Employ i listed on this report is a sole proprietor, partner o	er Trustees and their successors as if made by the reelf-employed individual.	
-			
Company Name		Company Officer	
Address	Telephone#	FAX #	
Submitted By	Title	Date	
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[Doc 07/01/19-06/30/2020]

PO Box 5817 Wallingford, CT 06492

Fax# (203)-284-8656

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]

Job Location

Covering the period of	Job Location		
3rd Year Apprentice	Social Security #	Hours Worked	
TOTAL HOURS REPORTED			
	•		
WELFARE [\$6.75]		Objects March	
TRAINING & EDUC. [\$0.40]	hours @ \$19.52 per hour = \$	Check Total	
I.W.E.C.T. [\$0.60]			
SUPP. PENSION [\$10.74] WORK ASSESSMENT (EMPLOYEE DEDUC	TIONN(\$1 02)		
Please make check payable to:	Iron Workers Local No. 12 Fringe Benefit Fund	ds	
Mail form and check for above amount to:	PO Box 5817, Wallingford, CT 06492		
	•		
P. P			
PENSION [\$1.98] ANNUITY [\$3.50]			
Upstate Employers [\$0.07]	hours @ \$5.55 per hour = \$	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 14623-2950		
4th Year Apprentice	Social Security #	Hours Worked	
Tur I can Appronue	Social Section II		
TOTAL HOURS REPORTED	<u> </u>		
TOTAL HOURS REPORTED		· · · · · · · · · · · · · · · · · · ·	
WELFARE [\$6.75]			
TRAINING & EDUC. [\$0.40]	hours @ \$20.97 per hour = \$	Check Total	
I.W.E.C.T. [\$0.60]			
SUPP. PENSION [\$12.09]			
WORK ASSESSMENT (EMPLOYEE DEDUC	CTION)[\$1.13]	_	
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 [\$2.23]	•		
ANNUITY [\$3.50]			
Upstate Employers [\$0.07]	hours @ \$5.80 per hour = \$	Check Total	
Please make check payable to:	e 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, N	Y 14023-2930	
	e and long and thusbary deductions to the Rund and I	Union identified on this report, the Employer agree	
By executing and submitting this remittance report	T analog Comployions/academis to die Fulla and Collective Recognizing Agreement with Iron Workers	Local Union No. 12 ("Union") and the Agreement	
end Declarations of Trust of the Funds identific	ed on this report, together with any restatements	or amendments thereto and any policies adopte	
thereunder. Further the Employer authorizes, p	itifies and accepts the appointment of the Employ	er Trustees and their successors as if made by the	
undersigned and certifies that none of the person	s listed on this report is a sole proprietor, partner o	r self-employed individual.	
_			
		Company Officer	
Address	Telephone#	FAX#	
Submitted By	Title	Date	
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