BOILERMAKERS LOCAL 667 SAVINGS FUND

P.O. BOX 1682, PARKERSBURG, WV 26102
(304) 485-1421 FAX (304) 485-1487

WORK PERFORMED IN THE JURISDICTION OF Lodge No.

EMPLOYER'S NAME _____

ADDRESS (Office) _____

Report for the Month of _____ 20_____ Phone No. _____

JOB LOCATION _____ Payroll Period Ending _____ 20_____

FOR VACATION TRUST CONTRIBUTIONS, TOTAL VACATION CONTRIBUTIONS IN MONTH ($) **MUST BE COMPLETED.**

SOCIAL SECURITY NO. (MUST BE PROVIDED)	EMPLOYEE'S NAME LAST	FIRST NAME	Straight Time Hours In Month	Time & One Half Hours In Month	Double Time Hours In Month	Total Vacation Contributions In Month ($)
In the event NO workers subject to contributions were employed, YOU MUST SEND in the monthly report with the notation **"No Workers Employed."**		TOTAL HOURS				TOTAL $

EMPLOYER:
1. MAKE CHECKS PAYABLE AS FOLLOWS: UNION TRADES FCU/FBO 667 BOILERMAKERS SAVINGS FUND
2. MAIL CHECK WITH WHITE COPY TO: UNION TRADES FCU, P.O. BOX 1682, PARKERSBURG, WV 26102
3. RETAIN CANARY COPY FOR YOUR FILES. **IF SENDING COMPUTER PRINTOUT, SEND 1 COPY OF REPORT.**
4. ADDITIONAL FORMS MAY BE OBTAINED FROM THE ADMINISTRATIVE OFFICE: UNION TRADES FCU, P.O. BOX 1682, PARKERSBURG, WV 26102. PHONE: 304-485-1421 EXT 306, FAX: 304-485-1487.
5. IT IS UNDERSTOOD THAT BY MAKING THE ABOVE CONTRIBUTIONS THE EMPLOYER BECOMES GOVERNED BY THE TRUST AGREEMENTS GOVERNING SAID TRUSTS AND ALL AMENDMENTS, RULES AND REGULATIONS ADOPTED THEREUNDER.

_____
AUTHORIZED SIGNATURE OF EMPLOYER