MONTHLY REPORT OF PAYMENTS TO ACCOUNT NO. Fox Valley & Vicinity Construction Workers Fund 75 Remittance Drive Suite 3163 FOR OFFICIAL USE ONLY Chicago IL 60675-3163 888-770-9297 No work this month The undersigned employer, if not already a signator, hereby becomes a signatory party to FINAL report the currently applicable collective bargaining agreement with the District Council or Local Please of the Union covering the type and area of work of the listed employees and also to each check Send more forms agreement and Declaration of Trust, and here amendments, establishing the funds for which Change of address payment is made herewith. Change in name PLEASE USE SEPARATE FORMS FOR DIFFERENT RATES CODE WORK MONTH 297 CEMENT PLASTER & SHOP JOB LOCATION SSN Job Class **REG HOURS OT HOURS** DT HOURS Employee Name Local No. JRY JRY JRY **JRY** JRY **JRY JRY** PLEASE SUPPLY BUSINESS PHONE NO: **TOTALS JOURNEYMAN** NOTE: THE NAMES ON THIS REPORT WERE LISTED BY THE FUND OFFICE AS THEY APPEARED ON YOUR PENSION/FOX 02 \$ 2.50 x = \$ PREVIOUS MONTHLY REPORT. PLEASE 04 DUES \$ 1.86 x = \$ INDICATE ANY CORRECTIONS. BE SURE TO ADD THE NAME, CORRECT TRAINING 12 \$ 0.09 x = \$ SOCIAL SECURITY NUMBER, ADDRESS INT DUES 13 \$ 0.62 x = \$ AND BIRTHDATE OF ALL EMPLOYEES WHO WERE HIRED DURING THIS PERIOD. TOTAL AMOUNT DUE \$ REPORTS ARE DUE BY THE 15th OF EACH MONTH. LATE REPORTS ARE SUBJECT TO LIQUIDATED DAMAGES.

SIGNED

MAKE ONE CHECK PAYABLE TO: FOX VALLEY & VICINITY CONSTR. WORKERS BENEFIT FUNDS

Construction Industry Funds PO Box 71031 Chicago, IL 60694-1031 Phone (815) 399-0800 Fax (847) 519-1979

Please check all information below. If any changes please make corrections.

CIRPCT

		Please allo	received after the 25th are assessed by 5-7 business days for delivery of ars worked Payner Contract #	mail.
1) Report ALL HOURS worked each month per member and any fractions. (Do not round off hours to whole numbers). ALL HOURS reported are for hours worked from the 1st day of each month through the last day of each month. 2) Add ALL HOURS under column: "TOTAL HOURS". 3) Take "TOTAL HOURS" times each rate code and type in amount under column: "TOTAL DUE". 4) Then add all figures under this column "TOTAL \$ DUE" and record this amount in box "GRAND TOTAL".		5) If NO WORK performed for month: please check NO WORK BOX and return a copy to CONSTRUCTION INDUSTRY FUNDS. If no longer working in area, please check FINAL REPORT BOX. 6) Make check payable to: CONSTRUCTION INDUSTRY FUNDS, P.O. BOX 71031; Chicago, IL 60694-1031 Signature		
SSN	NAME		LOCAL#	TOTAL HOURS
SSN	NAME		LOCAL#	TOTAL HOURS
SSN	NAME		LOCAL#	TOTAL HOURS
SSN	NAME		LOCAL#	TOTAL HOURS
SSN	NAME		LOCAL#	TOTAL HOURS

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TOTALS		

 $\ensuremath{\mathsf{PLEASE}}$ LINE OUT any member no longer employed AND ADD any new members hired during this period.

REMITTANCE COPY (RETURN WITH CHECK)

RATE	CODE	HOURLY RATE	TOTAL HOURS REPORTED	TOTAL \$ DUE
CIAD	ADVANCEMENT	\$0.18 >	(=
CIAP	APPRENTICESHIP	\$0.50 >	(=
CILM	LABOR-MANAGEMENT	\$0.04 >	(=
CIPN	RETIREMENT	\$11.09 >	(=
CIWFR	CONST IND WELFARE FUND	\$9.90 >	(=

Grand Total