MONTHLY PAYROLL REPORT FOR ELECTRICAL CONTRACTORS VARIOUS ELECTRICAL INDUSTRY FUNDS AND NATIONAL ELECTRICAL BENEFIT FUND

INSIDE

LOCAL UNION NO. WHERE WORK IS PERFOMED -

150

NAIVIL							LOOKE OIL			130	
D.B. A.							FUND	OFFICE EMPLOYE	R NUMBER		
ADDRESS											
CITY, STATE, ZIP							NUMBER	Bldg Constr. Journeyman's Wag	Residential e Wage Rate Per	Communication Wage Rate Per	
PHONE						EMPLO	YED THIS PER	Rate Per Hour \$	Hour \$	Hour \$	
EMPLOYER'S FED ID#											
										-	
This Transmittal Covers A								each the office of the			
MONTH OF:					Agent not later	than fifteen (1	15) calendar day	s following the end o	of each calendar m	onth.	
					TO BE USED I						
1. BUILDING CONST	RUCTION 2. MO	TOR REPAIR 16. MANI		3. SIGN		NICATIONS INTENANCE	5. MAINTI	ENANCE 6. II TILITY	NSIDE APPRENTI	CE	
22. RESIDENTIAL	23. RESI	3. RESIDENTIAL TRAINEE			26. OTHER (including non-bargaining admin) 27. ALUMNI						
COLUMN 1	COLUMN		COL. 3		COL. 5	COL. 6	COL. 7	COL. 8	COL. 9	COL. 10	
SOCIAL SECURITY NUMBER	NAME OF EMP (ALPHABETIC LAST NAME, FIRST I	CALLY)	CLS	CLOCK	GROSS EARNINGS	H & W	VAC	LOCAL PEN	LOCAL ANN	WRKG ASSMT	
	LAST NAME, FIRST	NAME INITIAL									
			-								
TOTAL NO. PAGES TH	IIS	TOTAL THIS									
REPORT	_	TOTAL ALL	PAGES								
*MAKE CHECK PAYAB	BLE TO NATIONAL ELE	CTRIC BENEF	IT FUND	FOR 3% C	OF THE GROSS	EARNINGS ((COL 5)		\$	_	
*MAKE CHECK PAYAB *MAIL CHECK WITH 2	BLE TO NORTHEASTER COPIES TO:	RN NECA (If A	pplicable)	ADD TOTALS	<u>.</u>			\$	_	
*NORTHEASTERN IL	LINOIS EBB #141				MAKE ONE C	HECK AND N	MAIL WITH COF	PY TO:			
2100 Manchester Rd., Bldg A Wheaton, IL 60187 (630) 876-5363					TOTAL H & W CONTRIBUTION TOTAL VACATION CONTRIBUTION						
ADDRESSES TO USE BY MAIL TYPE					TOTAL ANNUITY TOTAL PENSION CONTRIBUTION						
Option 1 - Regular or Certified					TOTAL WORKING ASSESSMENT						
IBEW LOCAL 150 PO BOX 7126 CAROL STREAM IL 60197-7126					TOTAL APPRENTICESHIP CONTRIBUTION						
					TOTAL LMCC TOTAL ADMINISTRATIVE MAINTENANCE						
Option 2 - Fed Ex/U	IPS /			-	-		and the second second	D		_	
IBEW LOCAL 150 C/O WINTRUST LO	CKBOX 7126 /			Agreem	ent and Trust for the	National Electric	cal Benefit Fund and	Restated Employees Be d agrees to make the red	quired		
5450 N CUMBERLAND AVENUE				copy of	contributions to the Fund as provided for therein. The employer acknowledges having received a copy of the above Agreement. The employer certifies that the information contained in this report is a full and accurate statement of hours worked and wages earned of all employees subject to						
CHICAGO IL 60656				employe	er contributions (pur	suant to Article 6	of the Agreement).	The employer further ce	ertifies that		
Check Here:				contribu	itions in accordance	with Article 6 of	the Agreement ar	oyees, it is making such not it is either covering a pt those who may be ex-	all such		
First Report in this Local Union area					non-bargaining unit employees or alumni employees only, except those who may be excluded pursuant to Section 6.3 of the Agreement. The employer further certifies that if it is reporting on behalf of a related organization as defined in Article 6 of the Agreement, either all employees of the						
	is Local Union area			organiza		oyees only are co		eement, either all employ e who may be excluded			
	FINES ASSESSED	FOR LATE PE	PORT	1		FIRM NAME					
	Fines will be assesse	d if reports		1		SIGNATURE	& TITLE			-	
	(includes "No Hours" in our Office by the 1		ived			DATE				_	
				-							