

CALIFORNIA FIELD IRONWORKERS TRUST FUNDS

131 N. El Molino Avenue, Suite 330
Pasadena, CA 91101

Hours reported for you for the period covered by your quarterly statement are listed in detail. If you can prove that you worked different hours than are listed on your quarterly statement, please list below the employers who have not reported your hours correctly. **ATTACH A COPY OF YOUR CHECK STUBS** and return this form to the above address. No adjustment can be made without proper written documentation.

Investigation will be made of your claim as soon as possible after receipt of the form and the Trust Office will then contact you.

<u>Name & Address Of Employer</u>	<u>Work Month</u>	<u>Hours Worked</u>	<u>Job Location</u>
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_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Listed below are various ways which my Employer could have listed my name or Social Security Number on their reporting forms:

_____	_____
_____	_____
_____	_____

Name _____ Social Security No. _____

Address _____ City and State _____

Union Local _____ Member's
Phone No. _____ Zip Code _____

Signed _____ Date _____

REMINDER: IF YOU HAVE A CHANGE OF ADDRESS – YOU MUST SUBMIT
CHANGE ON VACATION APPLICATION/ADDRESS CHANGE FORM ONLY.