

Carpenters Southwest Administrative Corporation

533 South Fremont Avenue • Los Angeles, California 90071-1706 • Tel: 213-386-8590 • Toll Free: 800-293-1370 www.carpenterssw.org

April 2017

SUBJECT:

SOUTHWEST CARPENTERS VACATION TRUST

July 2017 Vacation Request Form

Dear Participant:

The Board of Trustees authorized the use of electronic deposit for payment of your Vacation benefit directly to your bank account. Direct deposit of your Vacation benefit will ensure that it is received safely and timely.

If you would like your Vacation benefit electronically deposited into your checking or savings account, please provide one of the following to the Administrative Office:

- A voided check, or
- A direct deposit authorization form from your financial institution.

Your name, routing number and account number must be preprinted on the documentation you provide from your financial institution.

If your last Vacation payout was direct deposited and your banking information has not changed, you do not need to submit banking information again.

Please return your Request for Vacation Benefits Form and supporting bank documents as explained above to the Administrative Office in the enclosed return envelope no later than May 31, 2017. Your Vacation benefit will be electronically deposited into your account for each Vacation period thereafter, unless you change your election by notifying the Administrative Office in writing.

<u>PLEASE NOTE</u>: YOU MUST COMPLETE AND RETURN THE "REQUEST FOR VACATION BENEFITS FORM" EACH VACATION DISTRIBUTION PERIOD, WHETHER OR NOT YOU CHOOSE TO HAVE DIRECT DEPOSIT OR A PHYSICAL CHECK.

The July 2017 Vacation Request forms are also available on our website and at your local union. If you previously completed a form for the July 2017 Vacation payout do not complete another form as this may delay payment processing.

Please provide the address where you would like all Trust correspondence to be mailed. Your Vacation benefit cannot be sent to a different address than what is used for your health and pension benefits.

Sincerely,

Vacation Department

Enclosure



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REQUEST FOR VACATION BENEFITS - JULY 2017

IMPORTANT: YOU MUST COMPLETE, SIGN AND RETURN THE REQUEST FOR VACATION BENEFITS FORM FOR EACH VACATION DISTRIBUTION PERIOD, WHETHER OR NOT YOU CHOOSE TO HAVE DIRECT DEPOSIT OR A PHYSICAL CHECK.

PARTICIPANT INFORMATION IMPORTANT: PRINT CLEARLY IN INK												
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PARTICIPANT NUMBER O SOCIAL SECURITY NUMBI												
PARTICIPANT DATE OF BIRTH	×	LOCAL UNION NO.										
PARTICIPANT PHONE NU	MBER ()											
PARTICIPANT NAME	FIRST	MIDDLE INITIAL				LAST						
MAILING ADDRESS	IIIOI	MIDDE MITME				12101						
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CITY	STATE			9 DI	GIT ZI	P COD	DE RE	QUES	TED			
address. I agree that Southwest Carpente Vacation Trust to ma	t if I am not the persoers Vacation Trust. Th	lirect deposit voucher a on entitled to the benefit ne undersigned hereby a d if necessary, to make ated.	ts I will authori:	reimb zes th	ourse e Sou	and thw	ind est	lemn Carp	ify t	he rs	ve	
PARTICIPANT'S SIGNATURE			DATE									