

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

INSIDE

NAME  
D.B. A.  
ADDRESS  
CITY, STATE, ZIP  
PHONE  
EMPLOYER'S FED ID #

LOCAL UNION NO. WHERE WORK IS PERFORMED -  
FUND OFFICE EMPLOYER NUMBER

150

TOTAL NUMBER  
EMPLOYED THIS PERIOD

Bldg Constr.  
Journeyman's Wage  
Rate Per Hour \$

Residential  
Wage Rate Per  
Hour \$

Communication  
Wage Rate Per  
Hour \$

This Transmittal Covers ALL Payroll Weeks Ending in Calendar  
MONTH OF: \_\_\_\_\_

**This report and payment shall be mailed to reach the office of the appropriate Local Collection  
Agent not later than fifteen (15) calendar days following the end of each calendar month.**

CLASSIFICATIONS TO BE USED IN COLUMN NO. 3

1. BUILDING CONSTRUCTION 2. MOTOR REPAIR 3. SIGN 4. COMMUNICATIONS 5. MAINTENANCE 6. INSIDE APPRENTICE  
16. MANUFACTURING 17. MAINTENANCE 18. UTILITY  
22. RESIDENTIAL 23. RESIDENTIAL TRAINEE 26. OTHER (including non-bargaining admin) 27. ALUMNI

COLUMN 1	COLUMN 2	COL. 3	COL. 4	COL. 5	COL. 6	COL. 7	COL. 8	COL. 9	COL. 10
SOCIAL SECURITY NUMBER	NAME OF EMPLOYEE (ALPHABETICALLY) LAST NAME, FIRST NAME INITIAL	CLS	CLOCK HOURS	GROSS EARNINGS	H & W	VAC	LOCAL PEN	LOCAL ANN	WRKG ASSMT

TOTAL NO. PAGES THIS  
REPORT \_\_\_\_\_

TOTAL THIS PAGE  
TOTAL ALL PAGES

\*MAKE CHECK PAYABLE TO NATIONAL ELECTRIC BENEFIT FUND FOR 3% OF THE GROSS EARNINGS (COL 5)

\$ \_\_\_\_\_

\*MAKE CHECK PAYABLE TO NORTHEASTERN NECA (If Applicable)

\$ \_\_\_\_\_

\*MAIL CHECK WITH 2 COPIES TO:

\*NORTHEASTERN ILLINOIS EBB #141  
2100 Manchester Rd., Bldg A  
Wheaton, IL 60187  
(630) 876-5363

ADD TOTALS:

MAKE ONE CHECK AND MAIL WITH COPY TO:

TOTAL H & W CONTRIBUTION  
TOTAL VACATION CONTRIBUTION  
TOTAL ANNUITY  
TOTAL PENSION CONTRIBUTION  
TOTAL WORKING ASSESSMENT  
TOTAL APPRENTICESHIP CONTRIBUTION  
TOTAL LMCC  
TOTAL ADMINISTRATIVE MAINTENANCE

ADDRESSES TO USE BY MAIL TYPE

Option 1 - Regular or Certified

IBEW LOCAL 150  
PO BOX 7126  
CAROL STREAM IL 60197-7126

Option 2 - Fed Ex/UPS

IBEW LOCAL 150  
C/O WINTRUST LOCKBOX 7126  
5450 N CUMBERLAND AVENUE  
CHICAGO IL 60656

The employer reporting herein recognizes that it is bound by the Restated Employees Benefit Agreement and Trust for the National Electrical Benefit Fund and agrees to make the required 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 employer contributions (pursuant to Article 6 of the Agreement). The employer further certifies that if contributions are made on behalf of non-bargaining unit employees, it is making such contributions in accordance with Article 6 of the Agreement and it is either covering all such 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 organization or alumni employees only are covered, except those who may be excluded pursuant to Section 6.3 of the NEBF Agreement.

Check Here:

First Report in this Local Union area \_\_\_\_\_  
Final Report in this Local Union area \_\_\_\_\_  
When more forms are needed \_\_\_\_\_

FINES ASSESSED FOR LATE REPORT

Fines will be assessed if reports  
(includes "No Hours") are not received  
in our Office by the 15th

FIRM NAME \_\_\_\_\_  
SIGNATURE & TITLE \_\_\_\_\_  
DATE \_\_\_\_\_