

STAMP FUNDS — LOCAL 14-14B

International Union of Operating Engineers
 141-57 NORTHERN BLVD., FLUSHING, N.Y. 11354
 Telephone: (718) 939-0919 Ext. 114

Website: www.local14funds.org

EFFECTIVE

11/1/2014

PERIOD

SEND TO:

Firm Name _____

Address _____

Tel. # _____

City _____

State _____

Zip Code _____

Stamp Denom.	TO BE COMPLETED BY EMPLOYER		Check association to which you belong: <input type="checkbox"/> BCA <input type="checkbox"/> CAGNY <input type="checkbox"/> GCA <input type="checkbox"/> CEMENT LEAGUE
	Quantity	Amount	
S- 40 Hour @ 1262.00			
S- 35 Hour @ 1104.25			
S- 8 Hour @ 252.40			
S- 7 Hour @ 220.85			
S- 1 Hour @ 31.55			
S- ½ Hour @ 15.78			
D- 5 Hour @ 287.00			
D- 1 Hour @ 57.40			
D- ½ Hour @ 28.70			
TOTALS			

Make Remittances Payable to Operating Engineers Local 14-14B Stamp Fund

MONIES TO BE ALLOCATED:

S-STAMP

\$8.20 per hour to Welfare Fund
 \$5.70 per hour to Pension Fund

\$10.25 per hour to Annuity Fund
 \$4.50 per hour to Annuity Voluntary*

\$1.00 per hour to Training Fund
 \$1.85 per hour to Union Assessment
 \$.05 per hour to Defense Fund

D-STAMP

\$16.40 per hour to Welfare Fund
 \$5.70 per hour to Pension Fund

\$20.50 per hour to Annuity Fund
 \$ 9.00 per hour to Annuity Voluntary*

\$2.00 per hour to Training Fund
 \$3.70 per hour to Union Assessment
 \$.10 per hour to Defense Fund

*Includes 05¢ or such other amount which may be voluntarily allocated to the Local 14-14B Voluntary Political Action Committee (VPAC).

Contributions to the funds listed below to be made by separate check made payable to the respective Funds.

NOTICE: Indicate below where contributions should be allocated.

- Total Employer Contributions to the Industry Advancement Program of the Building Contractors Association.
 @ \$.50 per hour _____ \$ _____
- Total Employer Contributions to the Cement League Advancement Program @ \$.22 per hour.
 _____ \$ _____
- Total Employer Contributions to the Heavy Construction Industry Fund @ \$.35 per hour.
 _____ \$ _____
- Total Employer Contributions to the Contractors Association of Greater N.Y. @ \$1.60 per hour.
 _____ \$ _____

The Employer hereby agrees to be bound to all the terms and conditions of the Local 14-14B I.U.O.E. Fringe Benefit Trusts described herein and to make all Fringe Benefit Payments pursuant to the requirements of the applicable Local 14-14B Trust instruments and any amendments to said Trusts.

By: _____
 Purchaser's Signature

