

STAMP FUNDS – LOCAL 14-14B

International Union of Operating Engineers
 159-18 NORTHERN BLVD., FLUSHING, N.Y. 11358
 Telephone: (718) 939-1489 Ext. 114

Website: www.local14funds.org

EFFECTIVE
 11/1/2020

PERIOD

SEND TO:

Firm Name _____

Address _____

Tel. # _____

City _____

State _____

Zip Code _____

TO BE COMPLETED BY EMPLOYER		
Stamp Denom.	Quantity	Amount
S- 40 Hour @ 1459.60		
S- 35 Hour @ 1277.15		
S- 8 Hour @ 291.92		
S- 7 Hour @ 255.43		
S- 1 Hour @ 36.49		
S- ½ Hour @ 18.25		
D- 5 Hour @ 335.15		
D- 1 Hour @ 67.03		
D- ½ Hour @ 33.52		
TOTALS		

Check association to which you belong :

BCA CAGNY

GCA CEMENT LEAGUE

*** FOR IMMEDIATE DISTRIBUTION SEND CERTIFIED CHECK OR WIRE FUNDS.**

* Orders received without Certified bank checks or Wire/ACH will be held 10 working days from deposit of check.

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

MONIES TO BE ALLOCATED:

S-STAMP	\$10.50 per hour to Annuity Fund	\$1.00 per hour to Training Fund
\$12.05 per hour to Welfare Fund	\$4.50 per hour to Annuity Voluntary*	\$2.19 per hour to Union Assessment
\$5.95 per hour to Pension Fund	\$0.25 per hour to LMCTF**	\$.05 per hour to Defense Fund
D-STAMP	\$21.00 per hour to Annuity Fund	\$2.00 per hour to Training Fund
\$24.10 per hour to Welfare Fund	\$9.00 per hour to Annuity Voluntary*	\$4.38 per hour to Union Assessment
\$5.95 per hour to Pension Fund	\$0.50 per hour to LMCTF**	\$.10 per hour to Defense Fund

**Labor Management Cooperation Trust 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 @ \$.30 per hour. _____ \$ _____
- Total Employer Contributions to the Contractors Association of Greater N.Y. @ \$1.83 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

