

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
7/1/2025

PERIOD

SEND TO:

Firm Name

Address

Tel. # _____

City

State

Zip Code

TO BE COMPLETED BY EMPLOYER		
Stamp Denom.	Quantity	Amount
S- 40 Hour @ 1671.20		
S- 35 Hour @ 1462.30		
S- 8 Hour @ 334.24		
S- 7 Hour @ 292.46		
S- 1 Hour @ 41.78		
S- ½ Hour @ 20.89		
D- 5 Hour @ 386.30		
D- 1 Hour @ 77.26		
D- ½ Hour @ 38.63		
TOTALS		

Check association to which you belong:

☐ BCA ☐ CAGNY
☐ GCA ☐ CEMENT LEAGUE

*** FOR IMMEDIATE DISTRIBUTION EMAIL CIL FORMS AND WIRE/ACH FUNDS**

*** Orders received without Certified bank checks or Wire/ACH will be held 5 working days from deposit of check.**

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

MONIES TO BE ALLOCATED:

S-STAMP

\$16.50 per hour to Welfare Fund
\$6.30 per hour to Pension Fund

\$10.50 per hour to Annuity Fund
\$4.50 per hour to Annuity Voluntary*
\$0.25 per hour to LMCTF**

\$1.15 per hour to Training Fund
\$2.48 per hour to Union Assessment
\$.10 per hour to Defense Fund

D-STAMP

\$33.00 per hour to Welfare Fund
\$6.30 per hour to Pension Fund

\$21.00 per hour to Annuity Fund
\$9.00 per hour to Annuity Voluntary*
\$0.50 per hour to LMCTF**

\$2.30 per hour to Training Fund
\$4.96 per hour to Union Assessment
\$.20 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. @ \$2.06 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