

**RECIPROCIY REQUEST FORM
CONSTRUCTION INDUSTRY FUNDS OF ROCKFORD**

1322 E State St, Suite 300, Rockford, IL 61104 Phone: (800) 249-7947

Fund you want hours transferred TO:

Home Fund Name: Construction Industry Retirement Fund of Rockford
Home Fund Address: 6525 Centurion Drive
Home Fund City, State, Zip: Lansing, MI 48917-9275
Home Fund Phone with area code: PH. (866) 266-9866

I, the undersigned, am a member of Local Union # 4 of the United Brotherhood of Carpenters & Joiners of America, in the state of _____.

I hereby request all contributions paid to your Fund(s) on my behalf for all hours worked, to be transferred to my Home Fund.

This authorization shall apply to:

Retirement Savings/Annuity Contributions Effective Date: ____/____/____

MEMBER INFORMATION

Social Security # - -

Birthdate ____/____/____ Request Date ____/____/____

Print Name:
Address:
City, State, Zip:
Phone with area code: ()
Signature:

TRANSFERRING FUND (where the hours were worked)

SEND COMPLETED FORM TO TRANSFERRING FUND

To the extent that any employer contributions are transferred and remitted to my HOME FUND in accordance with the above, I hereby release the respective contributing employers and the Trustees of the TRANSFERRING FUND of and from any further responsibility and liability with regard to payment of contributions so transferred and remitted, and with regard to providing coverage for benefits, including legal fees and costs, on behalf of myself, my dependents, and/or my survivors.