

ELECTRICAL INSURANCE TRUSTEES

APPLICATION FOR ASB CONSTRUCTION PLAN DISTRIBUTION

Name: _____

SSN: _____

Address: _____

Home Phone: () _____

City/State: _____

Zip Code: _____

TYPE OF BENEFIT WITHDRAWAL (Please check one)

| | | |
|-------------------|--------------------------|---|
| 1. Retiree | <input type="checkbox"/> | Retirement Date _____ Last Contractor _____ Last Day Worked _____ |
|-------------------|--------------------------|---|

| | | |
|---------------------|--------------------------|-------------------------------------|
| 2. Traveler | <input type="checkbox"/> | Last day worked in Local 134: _____ |
| 3. Severance | <input type="checkbox"/> | Contractor: _____ |

| | | |
|-------------------------|--------------------------|----------------------|
| 4. Death Benefit | <input type="checkbox"/> | Date of Death: _____ |
| Member's Name: _____ | | SSN: _____ |

| | | |
|------------------------------|--------------------------|--|
| 5. Disability Benefit | <input type="checkbox"/> | Date of last application to SSA: _____ |
|------------------------------|--------------------------|--|

Signature: _____
 (Applicant's signature)

Date: _____

This is a fully taxable benefit. You will receive a W-2 Wage and Tax Statement in January of the year after you receive the distribution.

If you are a resident of Wisconsin, Michigan, Iowa or Kentucky you must complete a non-resident IL-W-5-Form. All others must complete an IL-W-4 Form regardless of your State of residence

Marital Status:

| | |
|--------|------------|
| Status | M= Married |
| | S = Single |

*******This section for use by the EIT Only*******

| Federal and State Withholding Information: | | | |
|--|-------|----------------------|--------------------|
| Exemptions | | | |
| Federal | State | Federal Lump Sum W/H | State Lump Sum W/H |
| | | | |

Gross Distribution Amount:

Total amount (before taxes):

| Check # | Date |
|---------|------|
| | |
| | |

Application to be returned to:

221 North LaSalle Street #200

Chicago, Illinois 60601-1214

Application may be faxed to (312) 782-7240 - to confirm receipt of fax call (312) 782-5442