MONTHLY PAYROLL REPORT FOR ELECTRICAL CONTRACTORS
NATIONAL ELECTRICAL BENEFIT FUND

EMPLOYER NAME _____ LOCAL UNION NO. WHERE WORK IS PERFORMED _____

EMPLOYER ADDRESS _____ TAXPAYER IDENTIFICATION NUMBER (TIN) _____

CITY, STATE, ZIP _____ TOTAL NUMBER EMPLOYED THIS PERIOD _____

This Transmittal Covers the Payroll Period(s) Shown Below

This report and payment shall be mailed to reach the office of the appropriate Local Collection Agent no later than fifteen (15) calendar days following the end of each calendar month.

CLASSIFICATIONS TO BE USED IN COLUMN NO. 3

1. Building Construction	5. Maintenance	11. Outside Lineman	17. Maintenance (other than electrical contractors)	24. Material Handlers/Helpers
2. Motor Repair	6. Inside Apprentice	12. Outside Apprentice	18. Utility	26. Other (including non-bargaining admin)
3. Sign	7. Outside Const. (through Inside Board)	13. Others - Outside	19. Communications (other than electrical contractors)	27. Alumni
4. Communication	8. Outside Apprentice (through Inside Board)	15. Const. Electrician	22. Residential Wireman	28. Working Owner
	10. Const. Wireman/Intermediate Journeyman	16. Manufacturing	23. Residential Apprentice	

COLUMN 1	COLUMN 2	COLUMN 3	COLUMN 4	COLUMN 5
SOCIAL SECURITY NUMBER	NAME OF EMPLOYEE LAST NAME, FIRST NAME, MIDDLE INITIAL	CLASS	TOTAL CLOCK HOURS	GROSS EARNINGS
	TOTAL THIS PAGE		0.00	$ 0.00

MAKE CHECK PAYABLE TO NATIONAL ELECTRICAL BENEFIT FUND FOR 3% OF THE GROSS EARNINGS (COL. 5). $ 0.00

MAIL CHECK TO:

NATIONAL ELECTRICAL BENEFIT FUND
2400 RESEARCH BOULEVARD, SUITE 500
ROCKVILLE, MD 20850

By completing this form and/or making the required contributions, the employer herein agrees and recognizes that it is bound by the Restated Employees Benefit Agreement and Trust for the National Electrical Benefit Fund and agrees to make the required contributions to the Fund as provided for therein. The employer acknowledges having received a copy of the above agreement. The employer certifies that the information contained in this report is a full and accurate statement of hours worked and wages earned of all employees subject to employer contributions (subject to Article 6 of the Agreement). The employer further certifies that if contributions are made on behalf of non-bargaining unit employees, it is making such contributions in accordance with Article 6 of the Agreement and it is either covering all such non-bargaining unit employees or alumni employees only, except for those who may be excluded pursuant to Section 6.3 of the Agreement. The employer further certifies that if it is reporting on behalf of a related organization as defined by Article 6 of the Agreement, either all employees of the organization or alumni employees only are covered, except those who may be excluded pursuant to Section 6.3 of the NEBF Agreement.

CHECK HERE

First report in this Local Union Area ☐

Final report in this Local Union Area ☐

SOLE PROPRIETORSHIP ☐

CORPORATION ☐

PARTNERSHIP ☐

EMPLOYER NAME _____

SIGNATURE AND TITLE _____

DATE _____