Pipe Fitters' Association
Local Union 597, U.A. 401(k) Plan
45 N. Ogden Avenue, Chicago, IL 60607
Phone: 312-633-0597 ♦ Fax: 312-829-9796 ♦ www.pf597.org

EMPLOYER REMITTANCE FORM

401(k) Report for the Work Period of: _____

Contractor Name _____

Address _____

Street City State Zip Code

DEFERRAL AMOUNTS ARE DUE IN THE LOCK BOX BY: _____ 15, _____

Employee Name	Social Security Number	Deferral Amount(s)	Status
Total			

Note: Be sure to add the name(s) and social security number(s) of all Pipe Fitters who submitted deferral amounts during this period. To remove a Pipe Fitter from your next report, place a "T" in the status column.

This report, with payment, must be received at the Lock Box not later than the 15th of the month following the month being reported. Failure to file this report on time will result in a late charge of 10% of the amount due and in addition, interest at 1% per month.

Please send remittance to:
Pipe Fitters Association Local 597, U.A. 401(k) Plan
P O Box 94415
Chicago, Illinois 60690

Prepared by	Date
Title	E-mail Address
Phone	Fax
Authorized Signature	