

MARKET RECOVERY HOTEL RATE

OHIO CONFERENCE OF PLASTERERS AND CEMENT MASONS COMBINED FUNDS INC. LOCAL 886 MONTHLY EMPLOYER'S CONTRIBUTION REPORT

1. COMPANY _____

 COMPANY PHONE NO. _____

PREPARE A SEPARATE REPORT FOR BUILDING AND FOR HEAVY/HIGHWAY.
 INDICATE IF HEAVY & HIGHWAY CONTRIBUTIONS
 OR BUILDING CONSTRUCTION CONTRIBUTIONS

2. SIGNATURE _____
In consideration of the benefits to be derived from the above contributions the undersigned Employer agrees to be bound by, and accept the terms and conditions of, any Trust Agreements and/or Plan Documents (for fringe benefit funds) pertaining to the contributions herein made, as if made by the undersigned pursuant to a collective bargaining agreement between the employer and the Operative Plasterers and Cement Masons Local 886. The respective Trust Agreements and Plan Document(s) are hereby incorporated by reference as if fully rewritten herein.

3. PAY PERIOD STARTING _____ AND ENDING _____ (one month only)
 UNION NUMBER **886** CRAFT _____
 CONTRACT TOLEDO LIMA

7. EMPLOYEE NAMES (LAST NAME FIRST) TYPE OR PRINT LEGIBLY.	SOCIAL SECURITY NUMBER	8. HOURS REPORTED			9. DUES (Check Off)	10. VACATION OR SAVINGS	11. GROSS WAGES
		8a. RT	8b. O/T	8c. D/T			
						N/A	
						N/A	
						N/A	
						N/A	
						N/A	
						N/A	
						N/A	
						N/A	
						N/A	
						N/A	
						N/A	
						N/A	
						N/A	
						N/A	
						N/A	

CHECK HERE FOR MORE FORMS

\$		12. TOTALS THIS PAGE		13. TOTALS ALL PAGES		16. TOTAL HOURS WORKED
\$						

This is page _____ of _____ pages.

14. TOTAL HOURS THIS PAGE _____

15. TOTAL HOURS ALL PAGES _____

COMPUTATION: 349

17. HOURS PAID X \$	= \$
HOURS WORKED X \$	= \$
DUES (FROM LINE 13, COLUMN 9)		
VACATIONS/SAVINGS (FROM LINE 13, COLUMN 10)		 N/A
18. TOTAL FRINGES, THIS REPORT ..			\$

BUILDING:	FUND CODE	AMOUNT	HEAVY & HIGHWAY FRINGES	FUND CODE	AMOUNT
HEALTH & WELFARE	WEL		HEALTH & WELFARE	WEL	
PENSION	PEN	N/A	PENSION	HHP	
ANNUITY	ANN	N/A	ANNUITY	ANN	
VACATION OR SAVINGS	VAC	N/A	UNION DUES	DUE	
UNION DUES	DUE		INDUSTRY	IND	
CONSTR. ADMINISTRATION	CAF		CONTRACTOR DUES	OCA	
APPRENTICESHIP	A&A		APPRENTICESHIP	OCF	
TOLEDO BLDG. FUND	TBF		ADMINISTRATION FEE	ADM	
TRADES COUNCIL/ACTION FUND	TCF				
LABOR MGMT.	LMC				
			20 TOTAL AMOUNT DUE		\$
			21 10% LATE REPORTING ASSESSMENT		\$
			22 TOTAL PAYMENT DUE		\$