

NORTHWEST ROOFERS & EMPLOYERS  
 HEALTH & SECURITY TRUST FUND  
 % WELFARE & PENSION ADMINISTRATION SERVICE, INC  
 P O BOX 34203 - SEATTLE WA 98124-1203  
 (206) 441-7574, EXTENSION 3304

CHECK HERE IF NO COVERED  
 EMPLOYEES THIS MONTH.

**EMPLOYER REMITTANCE REPORT**

26 089 001  
 0054

WORK PERIOD		
DEC MONTH	2020 YEAR	01451

IF THIS REPORT COVERS OTHER THAN  
 PRINTED PERIOD, PLEASE INDICATE.

ADMINISTRATION OFFICE

ORG ASMT VACATION (\$AMT)      TUITION (\$AMT)

EMPLOYEE NAME	SOCIAL SECURITY NO	COMPENSABLE HOURS				
*** SEATTLE AREA ***		BENEFIT FUND CONTRIBUTIONS ONLY TO PO BOX 550, SEATTLE, WA 98111-0550				
TOTALS -->						

**THIS REPORT DUE NOT LATER THAN:**

JAN 10, 2021

The undersigned Employer agrees to be bound by the Trust Agreements creating and controlling the Fringe Benefits listed and make contributions to said Trust Funds as required by the current Labor Agreements providing for said Trusts and further the enclosed contributions are to be credited to the accounts of the above listed employees for the indicated Trusts' purposes.

I CERTIFY THIS INFORMATION IN THIS REPORT IS TRUE AND CORRECT

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
TITLE

TELEPHONE No.      DATE  
 BEN FUND LOWER RATE  
 FOR APPRENTICE AT  
 80% OR LOWER

	HOURS OR NO. EMPLOYEES	RATE	AMOUNT DUE	ADJUSTMENTS MUST BE EXPLAINED	TOTAL AMOUNT DUE
A. HEALTH		9.40			
B.					
C.					
D. SEA APR		.70			
E. BEN FUND		1.95			
F. BEN FUND		1.70			
G. BECK FEE		47.00			
H. ORGANIZE		.86			
I.	TOTAL AMOUNT OF REMITTANCE SUM OF A THROUGH H			\$	

MAIL REPORT AND REMITTANCE TO AND MAKE CHECK PAYABLE TO

HEALTH, APR, ORGANIZE & VACATION:  
 NW ROOFERS HEALTH & SECURITY  
 PO BOX 34085  
 SEATTLE WA 98124-1085

BENEFIT FUND CONTRIBUTIONS:  
 ROOFERS 54 SUPPLEMENTAL BENEFIT PLAN  
 PO BOX 550  
 SEATTLE WA 98111-0550