



OREGON-WASHINGTON CARPENTERS-EMPLOYERS TRUST FUNDS

FUND MANAGER – ASSOCIATED ADMINISTRATORS, INC.

2929 N.W. 31ST AVENUE, PORTLAND, OR 97210

PHONE (503) 222-9603 TOLL FREE 1-800-888-0346

VACATION-SAVINGS DISTRIBUTION ELECTION FORM

The Board of Trustees is conducting the annual open enrollment. The open enrollment allows you to change your current distribution method of the Vacation-Savings contributions made by your employer. **If you elect to continue with your current distribution method no action is required.**

If you wish to change your distribution method, review the following information describing the choices offered, make your selection and return this form to the Fund Manager within **30** days. Your current distribution method is indicated by the "Current Election Code" appearing in the informational portion of your vacation check stub. You should see either "QUARTERLY", "SEMI-ANNUAL" or "ANNUAL". Those distributions are described below:

Check here for	<input type="checkbox"/>	quarterly distribution
This will include:		
Hours worked during: (if received timely)		Distribution Date
September, October, November		April 1-15
December, January, February		July 1-15
March, April, May		October 1-15
June, July, August		December 1-15

Check here for	<input type="checkbox"/>	semi-annual distribution
This will include:		
Hours worked during: (if received timely)		Distribution Date
September, October, November		July 1-15
December, January, February		December 1-15
March, April, May		
June, July, August		

Check here for	<input type="checkbox"/>	annual distribution
This will include:		
Hours worked during: (if received timely)		Distribution Date
September, October, November		December 1-15
December, January, February		
March, April, May		
June, July, August		

If you wish to have your distributions sent directly to the IBEW credit union, please check this box and list your credit union account number _____.

If you do not have an account established with the above referenced credit union and desire to establish an account, please contact the I.B.E.W. and United Workers Credit Union at (503) 253-8193.

Please print or type information:

Name _____ SSN _____

Address _____

City _____ State _____ Zip _____

Telephone number _____