## **VOLUNTARY ANNUITY CONTRIBUTION**

TRUSTEES LOCAL 14-14B ANNUITY FUND

## **EMPLOYEE VERIFICATION STATEMENT**

(To be completed if you *only* receive cash-in-lieu statements)

Name		_
Address		_
		-
Phone #		-
Birthday		-
Email		-
S.S. #		_
Local #	(if you are a member of another location on permit, please specify)	al, or are
Please invest (You MUST check one)		
100%- No c	check	
	A partial check will be sent to you afte	r redemption
0%- I would like to receive my full check after redemption		
	nuity Voluntary Contribution herein presente by Annuity Account, according to the above e	
Signa	ature D	ate