

# EMPLOYER REPORT OF CONTRIBUTIONS

If any pre-printed information is incorrect, please update accordingly.



CONTRACT INFORMATION							
Job Location (Account Name):			Employer Account #:		Report Start Date:		
					Report End Date:		
Local Union:	Fringe Type:	Job Class:	RATE BASIS				
			\$ per Unit	% Gross	% Hourly	Flat Dollar	OT 1
							OT 2
CONTRIBUTION DETAILS							
EMPLOYEE NAME	CPF ID <i>If reporting a NEW employee, include full SSN</i>	TOTAL HOURS <i>* Provide if greater than contributory hours</i>	GROSS WAGES OR HOURLY RATE <i>** Only required if Rate Basis is % Gross or % Hourly</i>	BREAKDOWN OF CONTRIBUTORY HOURS			TOTAL CONTRIBUTIONS
				CONTRIBUTORY HOURS	OVERTIME HOURS		
					OT1	OT2	
TOTALS:							