

THE BAC RECIPROCAL AGREEMENT
EMPLOYEE RECIPROCAL AUTHORIZATION AND RELEASE

Please check all boxes that apply:

- T** The participating defined benefit pension fund [Named _____] receiving contributions
R for work performed in the jurisdiction of BAC Local Union _____ is located at:
A _____
V _____
E The participating defined contribution pension fund [Named _____] receiving
L contributions for work performed in the jurisdiction of BAC Local Union _____ is located at:
F _____
U _____
N The participating health and welfare/flexible benefit fund [Named _____] receiving
D contributions for work performed in the jurisdiction of BAC Local Union _____ is located at:
S _____
S _____

This authorization is voluntarily given by me and at my instance, and shall remain in full force and effect until I have not worked in the area covered by this pension and/or health and welfare fund(s) for a period of one year or until the last day of the month in which my written request to cancel this authorization is received by the administrator of this pension and/or health and welfare fund(s).

All of the following information must be completed.

SIGNATURE _____ DATE _____
(month/day/year)

NAME (PRINT) _____ HOME PHONE _____
(area code/number)

HOME ADDRESS _____
(street) (city) (state)/(province) (zip)/(postal)

SOCIAL SECURITY NUMBER _____ BIRTH DATE _____
(month/day/year)

SOCIAL INSURANCE NUMBER _____ MEMBER OF LOCAL UNION _____
(Canadian employees) (home local)

H HOME FUND (defined benefit) NAME _____
O
M HOME FUND
E (defined benefit) LOCATION _____ JURISDICTION _____
(city) (state)/(province)

HOME FUND
F (defined contribution) NAME _____

HOME FUND
U (defined contribution) LOCATION _____ JURISDICTION _____
N (city) (state)/(province)

HOME FUND
D (health and welfare) NAME _____
S

HOME FUND
 (health and welfare) LOCATION _____ JURISDICTION _____
(city) (state)/(province)

HOME FUND E-MAIL _____

RECEIVED BY _____ DATE _____
(month/day/year)

FORWARD FORM TO PROPER PLAN ADMINISTRATOR IMMEDIATELY AFTER SIGNING
 AND SEND A COPY TO THE RECIPROCAL CLEARINGHOUSE