

**ELECTRICAL WORKERS LOCAL NO. 292
401(K) DEDUCTION FORM**

Date: _____

Name: _____

Social Security Number: _____

- No 401 (K) pre-tax deduction
- \$__._ per hour pre-tax deduction
****Fill in increments of .50¢****

You may change your deduction monthly, or anytime you go to work for a new employer. If you want to change your beneficiary designation, please notify the Trust Fund Office.

Member's Signature

White - Local 292 Trust Office Copy
Yellow - Member's Copy

Pink - Contractor's Copy
Gold - Union Copy



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