LABORERS' INTERNATIONAL UNION OF NORTH AMERICA
LOCAL UNION NO. 245

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OPERATING FUND REPORT

This report is due no later than the 10th calendar day after the end of the reported month.

Operating Fund Report for all weeks ending in calendar month of _____

Name of Employer _____

Employer Address _____ Phone _____

Local #	Employee Name	Social Security #	Regular Hours	Overtime Hours	Gross Pay	4% Gross Pay[1]	$ .10 per hour Maintenance[2]
				Totals			
					Check	**Total**	

Make checks payable to: Laborers' Local 245

Forward check and one copy of this form to:
Laborers' Local 245
P.O. Box 548
North Kingsville, OH 44068

Signature: _____

E-Mail _____ Date: _____

Copy this form for next month's report or form can be completed and printed from Local 245's web site:
www.local245laborers.com

[1] *Contribution Rate is 4% of gross pay.*
[2] *Building Maintenance is $ .10 per hour.*