

# DETROIT CEMENT MASONS' FRINGE BENEFIT FUNDS

## Instruction for Completing Contribution Reporting Form

The Trustees of the Detroit Cement Masons' Fringe Benefit Funds are pleased to provide you with these new Employer Contribution Reporting Forms. These forms can be used to replace the forms that you previously used when remitting contributions.

The forms are provided in Microsoft Excel and Adobe Acrobat formats. The Excel format can be used to enter all employer information and the appropriate calculations will be made automatically. The file has 30 (thirty) different "tabs". Please make sure you are opening and using the correct form for the type of work being performed. If you remit contributions for more than type of work, you will need to prepare separate forms for each jurisdiction.

You can then print the form and mail it to the Funds with your payment. The forms list the current correct rates for the applicable types of work in effect at the time the forms were created. If you use these forms in Excel, it is your responsibility to verify the proper rates and make changes when appropriate.

If you are using the Adobe Acrobat format you will need to print the form and fill it out manually.

### EMPLOYER INFORMATION

Enter the employer name, address, work month and all other information listed at the top of the form.

### EMPLOYEE DETAIL

Fill out each column completely. If your payroll system is capable of generating a printout which shows **all** of the required information, it is not necessary for you to complete the Employee Section. Fill in all of the other information and then attach your printout showing the employee detail.

If you did not have any work, mark the box labeled "Inactive this month."

### FRINGE BENEFIT CALCULATIONS

If you are using the Adobe format, transfer the total hours worked, hours paid and, where applicable, the base pay into the appropriate boxes under the column heading multiplier. Using the appropriate rates for each Fund, multiply by the number of hours reported and the base pay by the rates to determine the amount of your required fringe benefit contributions.

All employers must sign the form and print the title of the person who prepared the report.

### PAYMENT

Add all amounts shown and issue a check payable to the Detroit Cement Masons' Fringe Benefit Funds. Mail the original along with your check for payment of the full amount due to:

Chase Bank  
Attn: Cement Masons' Fringe Benefit Funds  
Dept. 78015, P.O. Box 78000  
Detroit, MI 48278-0015

Retain a copy for your records.

The report and payment must be mailed to reach the Funds no later than fifteen (15) calendar days following the end of each month. Late Payments may be subject to penalties or late payment assessments in accordance with the policies established by the various Boards of Trustees for each Fund.

### QUESTIONS

If you have any questions, you may contact your Local Union or the following:

Detroit Cement Masons' Fringe Benefit Funds  
TIC International Corp.  
6525 Centurion Drive  
Lansing, MI 48917

Phone (517) 321-7502 Fax (517) 321-7508