



## Iron Workers' Local No. 25 Vacation Pay Fund

P.O. Box 99219

Troy, MI 48099-9219

(248) 347-3100 or (800) 572-8553

E-FAX 248-721-9679

Email address: [remittance@iw25employerinfo.org](mailto:remittance@iw25employerinfo.org)

### Request for Additional Vacation Distribution

The Vacation Plan has two annual distributions, occurring in May and November. Participants may elect to receive a distribution of amounts allocated to his/her account once per month (excluding the semi-annual distributions in June and December and the distributions for May and November are available only if requested during the first week of those months). Please complete the *Request for Additional Vacation Distribution* and return to the Fund Office for processing.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Amount Payable = All cumulative vacation funds available will be paid out minus dues and target authorized deductions.

**Note:** Elective Vacation Distributions are subject to a **\$25.00 administrative fee**, which will be withheld from the amount payable.

*Elective vacation distributions are issued every Thursday of each week. Requests for additional distributions must be received no later than Wednesday, the day prior to the distribution. Elective vacation distributions will only be issued as outlined above during the scheduled semi-annual distribution months.*

\_\_\_\_\_  
Participant's Signature

\_\_\_\_\_  
Date

For Fund Use Only:

Date issued: \_\_\_\_\_ Check Number \_\_\_\_\_ By \_\_\_\_\_