



Ohio Carpenters' Fringe Benefit Funds

Health Fund: P.O. Box 1257, Troy, MI 48099

Pension and Annuity Funds: P.O. Box 31580, Independence, OH 44131

Phone: (248) 641-4967 Toll Free: (855) 837-3528

Website: www.ocbenefits.org

NOTICE OF NONDISCRIMINATION IN HEALTH PROGRAMS AND ACTIVITIES

October, 2016

This Notice is to inform you that the Ohio Carpenters' Health Fund ("Fund") complies with all applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. The Fund does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex.

The Fund:

- Provides free aids and services to people with disabilities to communicate effectively with us, such as:
 - Qualified sign language interpreters
 - Written information in other formats (large print, audio, accessible electronic formats, other formats)
- Provides free language services to people whose primary language is not English, such as:
 - Qualified interpreters
 - Information written in other languages

If you need these services, contact the Fund Office at BeneSys, Inc., 700 Tower Dr. Ste. 300, Troy, MI 48098, (248) 813-9800.

If you believe that the Fund has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance with: the Compliance Coordinator, Mary Weir, 700 Tower Drive Suite 300, Troy, MI 48098, Phone: (248) 813-9800, Fax: (248) 721-9696, Email: mary.weir@benesys.com. You can file a grievance in person at the Fund office or by mail, fax, or email. If you need help filing a grievance the Compliance Coordinator is available to help you. To obtain a copy of the Fund's grievance procedures, please contact the Compliance Coordinator.

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights electronically through the Office for Civil Rights Complaint Portal, available at <https://ocrportal.hhs.gov/ocr/portal/lobby.jsf>, or by mail or phone at: U.S. Department of Health and Human Services, 200 Independence Avenue SW., Room 509F, HHH Building, Washington, DC, 20201, (800) 868-1019, (800) 537-7697 (TDD).

Complaint forms are available at <http://www.hhs.gov/ocr/office/file/index.html>.



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ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al (248) 813-9800.

注意: 如果您使用繁體中文, 您可以免費獲得語言援助服務。請致電(248) 813-9800。

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufnummer: (248) 813-9800.

ملحوظة: إذا كنت تتحدث اذكر اللغة، فإن خدمات المساعدة اللغوية تتوافر لك بالمجان. اتصل برقم (248) 813-9800 (رقم هاتف الصم والبكم):

Wann du [Deutsch (Pennsylvania German / Dutch)] schwetzscht, kannscht du mitaus Koschte ebber gricke, ass dihr helft mit die englisch Schpooch. Ruf selli Nummer uff: Call (248) 813-9800.

ВНИМАНИЕ: Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Звоните (248) 813-9800.

ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le (248) 813-9800.

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi số (248) 813-9800.

Cushite:

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. (248) 813-9800 번으로 전화해 주십시오.

ATTENZIONE: In caso la lingua parlata sia l'italiano, sono disponibili servizi di assistenza linguistica gratuiti. Chiamare il numero (248) 813-9800.

注意事項: 日本語を話される場合、無料の言語支援をご利用いただけます。(248) 813-9800 まで、お電話にてご連絡ください。

AANDACHT: Als u nederlands spreekt, kunt u gratis gebruikmaken van de taalkundige diensten. Bel (248) 813-9800.



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УВАГА! Якщо ви розмовляєте українською мовою, ви можете звернутися до безкоштовної служби мовної підтримки. Телефонуйте за номером (248) 813-9800.

ATENȚIE: Dacă vorbiți limba română, vă stau la dispoziție servicii de asistență lingvistică, gratuit. Sunați la (248) 813-9800.

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