## **Dues Deduction Authorization Form**

Carpenters Pension Trust Fund of St. Louis 1419 Hampton Avenue, St. Louis, MO 63139

**Printed Name of Participant or Beneficiary** 



**Best Daytime Phone** 

Phone: (314) 644-4802 | Toll-Free: (877) 232-3863 | Fax: (314) 644-0200 | Email: pension@laborfunds.org

Outside Plan Shops Appendix				
Participant Name (Last, First, Middle Initial)		Social Security Number		
Address	City		State	Zip Code
I,, do hereby deductions and payments from my pensio change this election at any time by complete.  Union Dues Election  Please withhold union dues from	n benefit as desig eting a new <i>Dues I</i>	nated below Deduction Au	for dues. I u	nderstand that I may
Local Monthly Dues Amount				
Participant or Beneficiary Signature			 D	Pate

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