

SHEET METAL WORKERS LOCAL 7, ZONE 2 PENSION PLAN

ALTERNATE PAYEE INFORMATION FORM

Please provide the information requested below and return this form with a copy of your birth certificate to:

Trustees of the Sheet Metal Workers Local 7, Zone 2 Pension Trust
c/o Troy Schnabel
Watkins Ross
200 Ottawa Ave., N.W., Suite 600
Grand Rapids, Michigan 49503

Name:	Social Security Number:
Address: Street _____	Telephone Number: ()
City _____	Date of Birth:
Zip Code _____	

Please inform the Trustees at the above address of any change in your address.