

**Construction Electrician/Construction Wireman  
California Bay Area Region - Fringe Benefit Transmittal  
IBEW LOCAL 302**

Employers  
Federal ID# \_\_\_\_\_

This Transmittal Covers All Payroll  
Weeks Ending in Calendar Month of: \_\_\_\_\_ of 2014.

**Employers**  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
Telephone No. \_\_\_\_\_

Social Security No.	Name of Employee	Hours	Gross	Health \$4.62	Appr \$0.85	NLMCC \$0.01	NEBF 3%	NECA 1%	Dues 3.00%
xxx-xx-xxxx	Joe Doe	120.00	\$1,500.00	\$554.40	\$102.00	\$1.20	\$45.00	\$15.00	\$45.00
				\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
				\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
				\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>TOTALS</b>		<b>120.00</b>	<b>1500.00</b>	<b>554.40</b>	<b>102.00</b>	<b>1.20</b>	<b>45.00</b>	<b>15.00</b>	<b>45.00</b>

**TOTAL AMOUNT DUE:      \$762.60**

The employer reporting herein recognizes that it is bound by the Restated Employees Benefit Agreement and Trust for the National Electrical Benefit Fund and agrees to make the required contributions to the Fund as provided for therein. The employer acknowledges having received a copy of the above Agreement. The employer certifies that the information contained in this report is a full and accurate statement of hours worked and wages earned of all employees subject to employer contributions (pursuant to Article 6 of the Agreement). The employer further certifies that if contributions are made on behalf of non-bargaining unit employees, it is making such contributions in accordance with Article 6 of the Agreement and it is either covering all such non-bargaining unit employees or alumni employees only, except those who may be excluded pursuant to Section 6.3 of the Agreement. The employer further certifies that if it is reporting on behalf of a related organization as defined in Article 6 of the Agreement, either all employees of the organization or alumni employees only are covered, except those who may be excluded pursuant to Section 6.3 of the NEBF Agreement.

\_\_\_\_\_  
Firm Name

\_\_\_\_\_  
Signature

**Please make checks payable to:    ELECTRICAL INDUSTRY ACCOUNTS L302**

This report and payment may be subject to interest and liquidated damages if not postmarked by the fifteenth(15) day of the month following the month when the work was performed.

**Mail by the 15th of the Month to:**

Electrical Industry Accounts L302  
1024 Court Street  
Martinez, CA 94553