

OPERATING ENGINEERS PENSION TRUST (I.U.O.E. LOCAL 12)

PO Box 7063, Pasadena, CA 91109

(626)356-1000

**DECLARATION
OF**

(Name)

I, _____, declare and say:
(Name)

1. I am over 18 years of age and a resident of the County of _____,
State of _____. I have personal knowledge of the following facts:
2. I am a Retired Participant in the Operating Engineers Pension Trust ("Trust"), and I am currently receiving monthly pension payments from the Trust.
3. I was employed during the calendar year 20___. The attached pages, which are marked as Exhibits 1 – 12, contain true and accurate information about my employment during 20__.

I declare under penalty of perjury under the laws of the State of _____
and under the laws of the United States of America that all of the foregoing, and all that is
contained in the attached pages, is true and correct and that this declaration is signed on
_____, 20__, at _____, _____, _____.
(Month) (City) (County) (State)

Signature of Participant

Printed Name of Participant

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Exhibit 1

January 20__

1. Name of my employer: _____

2. The business or industry in which my employer's business is engaged:

3. The address and telephone number of my employer:
Street address: _____
City: _____
State: _____
Postal zip code: _____
Telephone number: _____ - _____ - _____

4. The name of my immediate supervisor at work: _____

5. The title of my job for this employer: _____

6. My specific job duties at work:

7. The total number of hours I worked during the month for this employer: _____

8. My hourly rate of pay _____, or my monthly salary for the month: _____

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Exhibit 2

February 20__

1. Name of my employer: _____

2. The business or industry in which my employer's business is engaged:

3. The address and telephone number of my employer:
Street address: _____
City: _____
State: _____
Postal zip code: _____
Telephone number: ____ - ____ - _____

4. The name of my immediate supervisor at work: _____

5. The title of my job for this employer: _____

6. My specific job duties at work:

7. The total number of hours I worked during the month for this employer: ____

8. My hourly rate of pay _____, or my monthly salary for the month: _____

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Exhibit 3

March 20__

1. Name of my employer: _____

2. The business or industry in which my employer's business is engaged:

3. The address and telephone number of my employer:
Street address: _____
City: _____
State: _____
Postal zip code: _____
Telephone number: _____ - _____ - _____

4. The name of my immediate supervisor at work: _____

5. The title of my job for this employer: _____

6. My specific job duties at work:

7. The total number of hours I worked during the month for this employer: _____

8. My hourly rate of pay _____, or my monthly salary for the month: _____

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Exhibit 4

April 20__

1. Name of my employer: _____

2. The business or industry in which my employer's business is engaged:

3. The address and telephone number of my employer:
Street address: _____
City: _____
State: _____
Postal zip code: _____
Telephone number: ____ - ____ - ____

4. The name of my immediate supervisor at work: _____

5. The title of my job for this employer: _____

6. My specific job duties at work:

7. The total number of hours I worked during the month for this employer: ____

8. My hourly rate of pay _____, or my monthly salary for the month: _____

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Exhibit 5

May 20__

1. Name of my employer: _____

2. The business or industry in which my employer's business is engaged:

3. The address and telephone number of my employer:
Street address: _____
City: _____
State: _____
Postal zip code: _____
Telephone number: ____-____-____

4. The name of my immediate supervisor at work: _____

5. The title of my job for this employer: _____

6. My specific job duties at work:

7. The total number of hours I worked during the month for this employer: ____

8. My hourly rate of pay _____, or my monthly salary for the month: _____

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Exhibit 6

June 20__

1. Name of my employer: _____

2. The business or industry in which my employer's business is engaged:

3. The address and telephone number of my employer:
Street address: _____
City: _____
State: _____
Postal zip code: _____
Telephone number: ____-____-____

4. The name of my immediate supervisor at work: _____

5. The title of my job for this employer: _____

6. My specific job duties at work:

7. The total number of hours I worked during the month for this employer: ____

8. My hourly rate of pay _____, or my monthly salary for the month: _____

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Exhibit 7

July 20__

1. Name of my employer: _____

2. The business or industry in which my employer's business is engaged:

3. The address and telephone number of my employer:
Street address: _____
City: _____
State: _____
Postal zip code: _____
Telephone number: ____ - ____ - ____

4. The name of my immediate supervisor at work: _____

5. The title of my job for this employer: _____

6. My specific job duties at work:

7. The total number of hours I worked during the month for this employer: ____

8. My hourly rate of pay _____, or my monthly salary for the month: _____

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Exhibit 8

August 20__

1. Name of my employer: _____

2. The business or industry in which my employer's business is engaged:

3. The address and telephone number of my employer:
Street address: _____
City: _____
State: _____
Postal zip code: _____
Telephone number: ____ - ____ - ____

4. The name of my immediate supervisor at work: _____

5. The title of my job for this employer: _____

6. My specific job duties at work:

7. The total number of hours I worked during the month for this employer: ____

8. My hourly rate of pay _____, or my monthly salary for the month: _____

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Exhibit 9

September 20__

1. Name of my employer: _____

2. The business or industry in which my employer's business is engaged:

3. The address and telephone number of my employer:
Street address: _____
City: _____
State: _____
Postal zip code: _____
Telephone number: ____-____-____

4. The name of my immediate supervisor at work: _____

5. The title of my job for this employer: _____

6. My specific job duties at work:

7. The total number of hours I worked during the month for this employer: ____

8. My hourly rate of pay _____, or my monthly salary for the month: _____

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Exhibit 10

October 20__

1. Name of my employer: _____

2. The business or industry in which my employer's business is engaged:

3. The address and telephone number of my employer:
Street address: _____
City: _____
State: _____
Postal zip code: _____
Telephone number: ____ - ____ - ____

4. The name of my immediate supervisor at work: _____

5. The title of my job for this employer: _____

6. My specific job duties at work:

7. The total number of hours I worked during the month for this employer: ____

8. My hourly rate of pay _____, or my monthly salary for the month: _____

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Exhibit 11

November 20__

1. Name of my employer: _____

2. The business or industry in which my employer's business is engaged:

3. The address and telephone number of my employer:
Street address: _____
City: _____
State: _____
Postal zip code: _____
Telephone number: ____-____-____

4. The name of my immediate supervisor at work: _____

5. The title of my job for this employer: _____

6. My specific job duties at work:

7. The total number of hours I worked during the month for this employer: ____

8. My hourly rate of pay _____, or my monthly salary for the month: _____

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Exhibit 12

December 20__

1. Name of my employer: _____

2. The business or industry in which my employer's business is engaged:

3. The address and telephone number of my employer:
Street address: _____
City: _____
State: _____
Postal zip code: _____
Telephone number: _____ - _____ - _____

4. The name of my immediate supervisor at work: _____

5. The title of my job for this employer: _____

6. My specific job duties at work:

7. The total number of hours I worked during the month for this employer: _____

8. My hourly rate of pay _____, or my monthly salary for the month: _____