

# Cement Masons and Plasterers Trust Funds

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Administered by  
Welfare & Pension Administration Service, Inc.

## APPLICATION FOR INDIVIDUAL ACCOUNT DEATH BENEFITS

Please print or type the following:

1. Name of Deceased Member \_\_\_\_\_
2. Soc. Sec. # \_\_\_\_\_
3. Home Address \_\_\_\_\_ City, State \_\_\_\_\_ Zip Code \_\_\_\_\_
4. Date of Death \_\_\_\_\_
5. Date of Birth \_\_\_\_\_
6. Union Local No. \_\_\_\_\_
7. Marital Status of Deceased Member:  Never Married  Married  Widowed  Separated  Divorced\*  
\*If the member's marriage was dissolved after December 31, 1984, it is required that you attach a copy of the Dissolution Decree and property settlement agreement and/or Qualified Domestic Relations Order (QDRO).
8. Name of Deceased Member's Last Employer \_\_\_\_\_
9. Deceased Member's Last Date of Employment \_\_\_\_\_

Enclosed herewith is a copy of the Death Certificate, a copy of the Member's Birth Certificate, a copy of my Birth Certificate, and copies of any and all of my Marriage Certificates (Marriage Certificates only necessary if Beneficiary's name has changed).

To be completed by Beneficiary:

Name of Beneficiary \_\_\_\_\_ Relationship \_\_\_\_\_  
Address of Beneficiary \_\_\_\_\_ City, State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Soc. Sec. # \_\_\_\_\_ Birth Date \_\_\_\_\_ Phone Number \_\_\_\_\_

### NOTARIZATION

Subscribed and sworn to before me  
this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

Notary Public in and for the State of \_\_\_\_\_  
Residing at \_\_\_\_\_

I hereby certify that I am the lawful beneficiary of the deceased.

Signature \_\_\_\_\_

Date \_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE**

Total Benefit = \_\_\_\_\_.

Computed By: \_\_\_\_\_ Date: \_\_\_\_\_  
Checked By: \_\_\_\_\_ Date: \_\_\_\_\_  
Administrator: \_\_\_\_\_ Date: \_\_\_\_\_ 20\_\_\_\_\_

If the value of your distribution is \$5,000 or more, the Trust is required by the Plan Document to offer you a lifetime benefit in lieu of a lump sum payment, in which case additional forms will be sent to you upon receipt of your application.