

**LU660 GW/Fab/Shop/Residential Contribution Remittance Report**  
**585 Aero Drive, Cheektowaga, NY 14225 \* Phone (716) 565-0303 \* Fax (716) 565-0306**  
**This Form is Effective on wages paid May 1, 2025 through December 31, 2025**

**Employer** \_\_\_\_\_ **Period Beginning** \_\_\_\_\_

**Address** \_\_\_\_\_ **Period Ending** \_\_\_\_\_

**Prepared By** \_\_\_\_\_ **Phone #** \_\_\_\_\_ **Email** \_\_\_\_\_

**Total Payment** \_\_\_\_\_ **Check #** \_\_\_\_\_ ☐ Please check if you have no hours to report

Members Name	IUPAT Member ID	Hours Worked	Wages

**FOR OFFICE USE ONLY**

Please make one check payable to  
P.D.C. #4 Trust Funds & Mail to  
585 Aero Drive, Cheektowaga, NY 14225

**NOTES:**

Employee  
Deductions

	Rate	Hours/Wages	Total Due
<b>H&amp;W</b>	<b>\$ 8.25</b>		
660 Annuity	\$ 4.15		
IUPAT Pension	\$ 5.46		
<b>DC4 FTI</b>	<b>\$ 0.40</b>		
<b>IUPAT FTI</b>	<b>\$ 0.10</b>		
<b>IUPAT LMCI</b>	<b>\$ 0.10</b>		
<b>STAR</b>	<b>\$ 0.15</b>		
<b>NAGMA</b>	<b>\$ 0.05</b>		
IUPAT Admin dues	\$ 0.25		
DC4 Org. Fund	\$ 0.10		
Dues Check off	3% gross wages		
	<b>Total Payment Due</b>		