

LU#677 Syracuse GW/Fabricator/Shop Contribution Remittance Report
585 Aero Drive, Cheektowaga, NY 14225 * Phone (716) 565-0303 * Fax (716) 565-0306
This Form is Effective on wages paid January 1, 2026 through April 30, 2026

Employer

Period Beginning

Address

Period Ending

Phone#

Prepared By _____

Email: _____

Total Payment

Check #

1

Please check if you have no hours to report

NOTES:

| Rate | | Hours/Wages | Total Due |
|-------------------|----------------|-------------|-----------|
| \$ 7.43 | H&W | | |
| \$ 0.10 | DC4 FTI | | |
| \$ 0.10 | IUPAT FTI | | |
| \$ 0.10 | IUPAT LMCI | | |
| \$ 0.15 | STAR | | |
| \$ 6.11 | IUPAT Annuity | | |
| \$ 4.35 | IUPAT Pension | | |
| \$ 0.05 | NAGMA | | |
| \$ 0.10 | DC#4 Org. Fund | | |
| \$ 0.35 | Admin Dues | | |
| \$9.00/wk. | LU#677 dues | | |
| \$ 0.46 | Dues check off | | |
| 2.5% gross wages | Dues check off | | |
| Total Payment Due | | | |

Please make ONE check payable to

P.D.C. #4 Trust Funds and mail to

585 Aero Drive, Cheektowaga, NY 14225

FOR OFFICE USE ONLY

Employee Deductions

| | |
|----------------------------|--------------|
| Fringe Benefits | |
| Employee Deductions | |
| | Total |