

**ELECTRICAL WORKERS LOCAL NO. 292
401(k) & ROTH 401(k) DEDUCTION FORM**

You may change your deduction monthly, or anytime you go to work for a new employer. If you want to change your beneficiary designation, please notify the Trust Fund Office.

Contractor Copy: your contractor MUST receive their portion of this form for them to allocate the requested amount of funds into your 401k.

Local 292 Trust Office Copy: please return the Trust Office Copy portion of this form to the office:
6900 Wedgwood Road N #425, Maple Grove, MN 55311
hcforms@ibew292benefits.org or fax: 763-416-6196

Member Copy: is for your records.



**ELECTRICAL WORKERS LOCAL NO. 292
401(k) & ROTH 401(k) DEDUCTION FORM**

Date: _____

Name: _____

Social Security Number: _____

- No 401(k) pre-tax deduction
- \$____ per hour pre-tax deduction
- No ROTH 401(k) deduction
- \$____ ROTH 401(k) Contributions
Fill in increments of .50\$

Member's Signature
~ Local 292 Trust Office Copy ~



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Fill in increments of .50\$

~ Member's Copy ~



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Fill in increments of .50\$

Member's Signature
~ Contractor's Copy ~

