

Dear Employer:

The Wisconsin Laborers' Benefit Funds would like to make sure all Employer contact information is up to date. Please complete the information below and return via:

Email: wleligibility@benesys.com

Fax: 608-846-3192

Mail: Wisconsin Laborers' Benefit Fund
4366 Liuna Way
Deforest, WI 53532

Employer EIN: _____ Company Phone Number: _____

Company Address: _____
Please Print

Employer Main Contact: _____
Please Print

Main Contact Phone Number: _____

Main Contact Email: _____

Please list owner(s) of the company:

Please Print 100% owner? Yes Percentage if known: _____

Please Print Percentage if known: _____

Please Print Percentage if known: _____

Does Owner(s) participate in the Health Fund? Yes No

Please Check All Agreements You Report Under: (refer to map for area if needed)

62 Building Local 140 Local 268 Local 330
 Local 464

Apprentices in the locals above? Yes No

66 County Sewer Area 3 Area 4 Area 5

Apprentices in the locals above? Yes No

Cable Wage Rates Local 113 Balance of State

Distribution Zone 1 Zone 2 Zone 3 Zone 4

Heavy Highway Area 1 Area 2 Area 3
 Area 4 Area 5 Other Area

Apprentices in the locals above? Yes No

113 Kenosha/Racine Building

Apprentices in the locals above? Yes No

113 Milwaukee Building

Apprentices in the locals above? Yes No

Landscape Area 1 Area II Area III

Pipeline

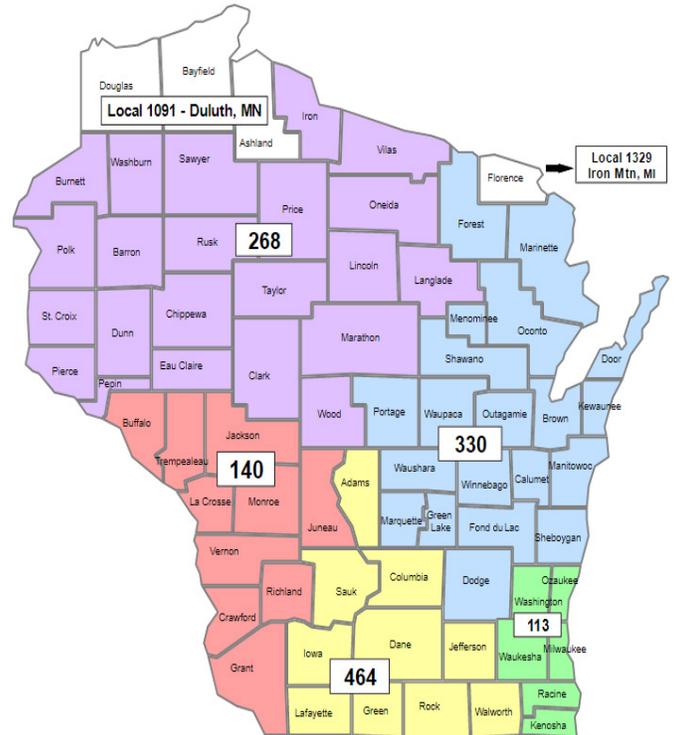
WUCA Sewer, Tunnel, & Water

Apprentices in the locals above? Yes No

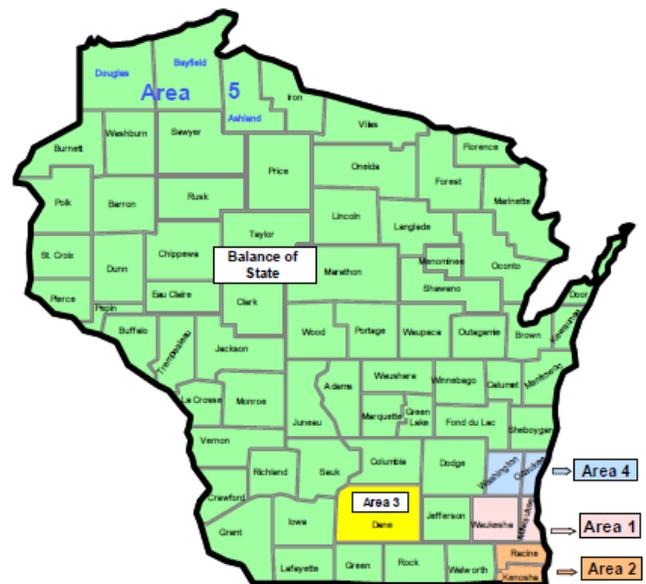
Asbestos Milwaukee Kenosha/Racine Balance of State

Cement Masons

Local Union Map



WISCONSIN LABORERS' HEAVY/HIGHWAY AREAS



**If You Have Questions About What Agreements You Are Signed Under,
 Please Contact the Local or District Council for Assistance
 Visit: www.liunawisconsin.org For Contact Information**