Monthly report of payments to

Southwestern Illinois Laborers' District Council
Laborers-Employers Cooperation and Education Trust

3 Meadow Heights Professional Park · Collinsville, Illinois 62234 · Phone: (618) 345-3518 · FAX: (618) 345-3631

CHECK IF NO LABORERS WORKING THIS MONTH ☐

CHECK IF FINAL REPORT ☐

Employer No.	Business Phone No.	Local Union No.	For Month/Year Of

	Social Security No.	Name of Employee	Hours Worked In Period	LPL (amount withheld)	District Council Check-Off (amount withheld)
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
		TOTALS			

FUND	RATE	HOURS	AMOUNT
LECET	.42		
SICAP	.10		
LPL (total withheld)	.05		
DISTRICT COUNCIL CHECK-OFF (total withheld)	.50		
TOTALS			

DO NOT USE THIS SPACE – FOR SWILDC LECET OFFICE USE ONLY

Received	Check No.	Amount
		$

- **Submit a separate report for each local union**
- **Please complete form in entirety**
- **Make check payable to: Southwestern Illinois Laborers District Council LECET**
- **Forms available on our website: swildc.com**

*Contributions are to be received at the fund office on or before the 15th day of each month for hour hours worked during the previous month. Contributions received after date due may be assessed at the rate of 1½% compounded Monthly (18% annum).

We hereby certify that this report includes all hours worked by laborers in our employment for the month shown above and further, that the Employer whose name and entity is set forth below, subscribes to and agrees to be bound by and confirms and adopts all of the provisions and terms of the Contracts, Agreement and Declarations of Trust establishing the Southwestern Illinois Laborers' District Council LECET Fund dated August 20, 1993, and all amendments, revisions, additions and deletions thereto as to Trust Agreement, and accepts all of them as fully as though the same were herein contained and further agrees to accept as a personal obligation for himself and on behalf of his firm to oversee the payment of the established rates of contributions to the aforesaid Fund.

Signature Title Date