

Arizona Sheet Metal Pension Trust Fund
c/o Southwest Service Administrators Inc.
2400 West Dunlap Avenue, Suite 250
Phoenix, Arizona 85021-2811

www.southwestservicetpa.com

ARIZONA SHEET METAL PENSION TRUST FUND

January 2009

Dear Recipient,

The Board of Trustees has a fiduciary responsibility to confirm that each eligible pensioner or beneficiary is personally receiving their monthly benefit payment, either by check or direct deposit. The Trustees must also confirm employment status and disability status if a participant is receiving a disability pension. The enclosed affidavit, when completed and returned by each eligible member, will assist the Trustees in protecting your pension benefit.

Please return a completed affidavit form promptly to assure that your future pension payments are not interrupted. We have provided a return envelope for your convenience.

Thank you for your cooperation. If you have any questions or concerns, please telephone the Fund Office.

Sincerely,

Pension Department
Southwest Service Administrators, Inc.

Enclosure

**Go to www.southwestservicetpa.com to access plan regulations,
recent mailings, and various forms.**

**Also available online is the "Electronic Deposit Authorization Form" that may be
returned to implement the direct deposit of benefits to your bank account.**

Southwest Service Administrators, Inc.

Service Is Our Middle Name

602-249-3582 • Toll Free: 800-474-3485 • Fax: 602-249-3795 • www.southwestservicetpa.com

ARIZONA SHEET METAL PENSION TRUST FUND

Enero 2009

Estimado Participante,

La Junta de Fiduciarios tienen la responsabilidad fiduciaria de confirmar que cada pensionado o beneficiario esta recibiendo personalmente el pago mensual de beneficios, ya sea por cheque o depósito directo. Los Fiduciarios también deben de confirmar el estatus de empleo y de la discapacidad si un participante está recibiendo una pensión por discapacidad. La declaración adjunta, una vez que la complete y la regrese cada miembro, ayudará a los Fiduciarios en la protección de su pension.

Por favor, regrese el formulario completo a la brevedad posible para asegurar que sus futuros pagos de pension no sean interrumpidos. Hemos proporcionado un sobre de retorno para su conveniencia.

Gracias por su cooperación. Si usted tiene alguna pregunta o dudas, por favor comuníquese a esta oficina.

Atentamente,

Departamento de Pensiones
Southwest Service Administrators, Inc.

Apéndice

Visite el sitio web www.southwestservicetpa.com para acceder a los reglamentos del plan, envíos de correo recientes y diversas formas.

Tambien disponible en linea esta la forma "Electronic Deposit Authorization Form" (forma de autorizacion para deposito electronico), la cual puede llenar y regresar para implantar la modalidad de deposito directo de beneficios para su cuenta bancaria.

Southwest Service Administrators, Inc.

Service Is Our Middle Name

602-249-3582 • Toll Free: 800-474-3485 • Fax: 602-249-3795 • www.southwestservicetpa.com

ARIZONA SHEET METAL PENSION TRUST FUND

2009 ANNUAL AFFIDAVIT

CONFIRMATION OF PERSONAL CONTACT INFORMATION (PLEASE PRINT)

NAME _____ SOCIAL SECURITY NUMBER _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

TELEPHONE (_____) _____

FEDERAL INCOME TAX WITHHOLDING

- I DO NOT WISH TO CHANGE MY FEDERAL TAX WITHHOLDING AMOUNT.
 I DO WISH TO CHANGE MY FEDERAL TAX WITHHOLDING AMOUNT. PLEASE SEND ME A FEDERAL FORM W-4P

ARE YOU PRESENTLY EMPLOYED OR HAVE YOU BEEN EMPLOYED DURING THE PAST YEAR?

- No Yes

IF YOU ANSWERED YES, PLEASE COMPLETE THE FOLLOWING:

EMPLOYER _____ JOB TITLE _____

FULL TIME PART TIME DATES OF EMPLOYMENT; FROM _____ To _____

LOCAL UNION AFFILIATION: _____

A COPY OF YOUR MOST RECENT INCOME TAX RETURN MAY BE REQUESTED

CONFIRMATION OF DISABILITY STATUS

(THIS SECTION TO BE COMPLETED ONLY IF YOU ARE UNDER 62 AND RECEIVING A SOCIAL SECURITY DISABILITY PENSION.)

THE ADMINISTRATIVE PROCEDURES OF THE FUND REQUIRE YEARLY UPDATES FROM ALL PARTICIPANTS UNDER THE AGE OF 62 WHO HAVE RECEIVED A SOCIAL SECURITY DISABILITY PENSION

- YES, I AM CURRENTLY RECEIVING A DISABILITY PENSION
 NO, I AM NO LONGER RECEIVING A DISABILITY PENSION

SIGNATURE

DATE