

**UNITED ASSOCIATION NATIONAL PENSION FUND  
EMPLOYMENT HISTORY INSTRUCTION SHEET (OPTIONAL)**

Participant's Name: \_\_\_\_\_

Last 4 digits of Social Security Number: \_\_\_\_\_

This form is OPTIONAL for you to provide employment information for which we do not have any records. We suggest you start by reviewing your Annual Statement from the National Pension Fund. You may obtain your last Annual Statement from or Contribution History Report on our website [www.uanpf.org](http://www.uanpf.org). Otherwise, you may call the Fund Office for a Contribution History Report.

**If you agree with the employment information we have in our records, you do not need to complete this form. If something is missing or there is something you are not sure about, please let us know about it by completing this form.**

Sometimes, we do not have a record of a period of future service credit, which consists of hours for which employer contributions were due, because your hours were not reported to us. We need to know about that kind of situation.

We also need to know about your employment in the plumbing and pipefitting industry for periods before your employers became contributing employers to the National Pension Fund. Such employment might count as Past Service Credit if the Plan's rules are met. It is very important that we learn about your past employment in the industry before the National Plan was in place.

Follow the instructions below and complete the form if you worked out of a local for which we do not have records, (for example, your work history prior to your local joining the National Pension Fund, or if you traveled to a non-participating local which started participating at a later date).

**Also complete the form if any of your work was in self-employment.**

**INSTRUCTIONS:** In the space on the back of this form, indicate your employment or self-employment in the plumbing and pipefitting industry **for which we do not have any records** as described above for each Calendar Year from the first Calendar Year in which you worked at the trade even if that work was prior to your initiation date. Provide the requested information on a separate line for each of the following:

- work performed in each Calendar Year for each employer within each local union jurisdiction,
- work performed within two or more local jurisdictions (a separate line for each) during the same Calendar Year,
- work performed in more than one Calendar Year (a separate line for each) for a single employer, and
- work performed in self-employment in the plumbing and pipefitting industry in each calendar year.

For Example:

| Calendar Year Worked | Local Jurisdiction or Location | Employer Name               | Number of Months Worked for Employer within Calendar Year |
|----------------------|--------------------------------|-----------------------------|---|
| 1970                 | 116                            | Joe's Mechanical Contractor | 12  |
| 1971                 | 116                            | Joe's Mechanical Contractor | 4   |
| 1971                 | Boise, ID                      | Samson's Piping             | 3   |
| 1972                 | 139                            | Samson's Piping             | 4   |

To assist you in completing this form, you may need to refer to your yearly W-2 statements or your Local Health and Welfare, Pension or other fringe benefit fund records to identify the employers for whom you worked. If you need further information regarding the names of your employers and the time periods you were employed, you may contact your local Social Security Administration Office to obtain Form SSA-7050-F3 to request your employment information. Any cost incurred for obtaining this information from the Social Security Administration will be your responsibility. You should first confirm the information the Fund has on file, as you do not need to provide that same information. You do need to identify any work in self-employment.

|  |
|--|
| <b>United Association National Pension Fund Mailing Address:</b>                             |
| <b>United Association National Pension Fund<br/>103 Oronoco St.<br/>Alexandria, VA 22314</b> |
| <b>Questions 1-800-638-7442</b>  |



