

Declaration of Hours Worked and Wages Earned

Sheet Metal Workers' Local Union No. _____

PLEASE PRINT

Name: _____ Last four of SS# or SM1 id _____

Address: _____ Home/Cell Phone # _____

Employer: _____

Date From: _____ Through: _____

Pay Period	# Of Hours Worked	Hourly Rate	General Contractor's Address/City/State	Name of Job	Job's Address (If available)

I have read the foregoing statement, known the contents thereof, and declare under penalty of perjury that the foregoing is true and correct, and that all hours declared herein are for Sheet Metal Work.

I hereby appoint my Sheet Metal Workers' Local and/or the Sheet Metal Workers Health and Pension Plans of Southern California, Arizona & Nevada and/or their counsel as my agent to file and/or record any and all mechanic's liens and stop notices, and to take all measures necessary to foreclose and enforce such liens or stop notices, as are necessary to collect all sums due me and/or to any Trust Funds on my behalf in connection with the aforementioned work.

EXECUTED this _____ day of _____, 20____, at _____ County of _____, State of _____.

Declarant (Signature)