INDIANA LABORERS PENSION FUND

P.O. BOX 1587 • TERRE HAUTE, INDIANA 47808-1587

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INDIANA LABORERS PENSION FUND

WAIVER OF 30 DAY NOTICE PERIOD

Federal law requires the Board of Trustees to provide you with a "written explanation" of the effect of payment of your pension in the form of a Joint and Survivor benefit or other optional pension forms. This written explanation must be provided to you no earlier than 180 days before and no later than 30 days before your payments begin. Upon making your benefit election (with your spouse's consent if necessary), you may begin receiving payments before the end of the 30-day waiting period if you and your spouse waive the waiting period. However, by law, benefit payments still cannot begin until the eighth day after you and your spouse receive the written explanation of benefits. If you do not timely receive the written explanation, a retroactive annuity starting date is allowed under the Plan.

We, the undersigned, hereby irrevocably waive our rights to the 30-day advance notice and acknowledge that we have received a written explanation from the Board of Trustees describing the effect of payment in the Joint and Survivor or other optional pension forms.

Participant's Printed Name		Spouse's Printed Name	
Participant's Signature		Spouse's Signature	
Participant Social Security Number		Spouse's Social Security Number	
Date		Date	
State of			
County of			
On the	day of		
(Participant na		nt name) and(Spouse na	ıme) to
	known to me to be the perso owledged to me that they exe	ns described in and who executed the foregoing statemen cuted the same.	t and
Notary Public		Signature of Designated Plan Representation	ive
My Commission Expires		(Seal)	





Mark S. Andrews

Chairman