

**ANNUITY FUND OF THE ELECTRICAL INDUSTRY OF LONG ISLAND**  
**372 VANDERBILT MOTOR PARKWAY**  
**HAUPPAUGE, NY 11788**  
**(631) 434-3344**

**TRUST APPLICATION FORM**

**PARTICIPANT'S NAME** \_\_\_\_\_ **SS#** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_  
\_\_\_\_\_

**TRUST NAME** \_\_\_\_\_ **EIN** \_\_\_\_\_

**ADDRESS** \_\_\_\_\_  
\_\_\_\_\_

I/we, \_\_\_\_\_ and \_\_\_\_\_, as Trustee(s) of the above-named Trust, hereby make application for payment of the amount to which the Trust is entitled under the terms of the Annuity Fund of the Electrical Industry of Long Island plan document.

Dated: \_\_\_\_\_ Signed: \_\_\_\_\_

Tel No.: \_\_\_\_\_

\_\_\_\_\_  
**Notary Public or Fund Representative**

Dated: \_\_\_\_\_ Signed: \_\_\_\_\_

Tel. No.: \_\_\_\_\_

\_\_\_\_\_  
**Notary Public or Fund Representative**

(For office use)

\_\_\_\_\_  
TRUSTEE

\_\_\_\_\_  
TRUSTEE

Balance in Account \$ \_\_\_\_\_

Tax Withheld \$ \_\_\_\_\_

Net Check Amount \$ \_\_\_\_\_

Check No. \_\_\_\_\_

Date \_\_\_\_\_