

# UNITED FOOD AND COMMERCIAL WORKERS UNION LOCAL 152 RETAIL MEAT PENSION FUND

*Brian String, Chairman*

*Daniel Dosenbach, Secretary*

27 Roland Avenue, Suite 100, Mount Laurel, NJ 08054

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## **Participant Information Update Form**

Please Print or Type

Pension Fund

( ) Retail Meat

( ) Independent Packing

### **Participant's Information:**

Name: \_\_\_\_\_ Social Security No: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Telephone No: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Employer: \_\_\_\_\_ Date of Hire: \_\_\_\_\_

Marital status:  
( ) Single ( ) Married ( ) Widow ( ) Divorced

### **Spouse Information (if applicable):**

Name: \_\_\_\_\_ Soc Sec No: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

### **Authorization:**

By signing below, I hereby authorize and grant permission to the Pension Department to obtain necessary information from the Health & Welfare Department if necessary.

Participant Signature: \_\_\_\_\_ Date: \_\_\_\_\_