



SOUTHWEST CARPENTERS VACATION TRUST
533 S FREMONT AVE
LOS ANGELES, CA 90071-1706

SCHEDULED JULY 1ST EARLY WITHDRAWALS

PARTICIPANT INFORMATION

Full Name

SSN or UBC#

I understand that I am requesting an Early Withdrawal of my VSLPTO account balance based on contributions made on my behalf by my employer according to the rules of the VSLPTO Plan for the period containing the work months of September of the previous year through February of the current year. Based on this request, I will receive an Early Withdrawal on or about July 1st of each year, provided that I have contributions available for the period of distribution.

I understand Early Withdrawals are only paid by electronic deposit and that to be eligible for an Early Withdrawal, I must authorize an electronic distribution to my bank account and provide sufficient banking information, which will be verified. My future VSLPTO distributions, will be sent to the account I have indicated until I revoke this request in writing, provide new banking information, or until an electronic distribution is rejected by my banking institution.

By providing my banking information I agree that I will reimburse and indemnify the Southwest Carpenters Vacation Trust, if I am not the person entitled to benefits, and that I am responsible for the accuracy of the banking information I provide. I hereby authorize the Southwest Carpenters Vacation Trust to make credit or debit entries as adjustments for any error made to my bank account. The Southwest Carpenters Vacation Trust is not responsible for lost or stolen funds once deposited to the bank account information I have provided.

PLEASE NOTE: This form will be effective for the next July 1st following the submission of this form on or before June 1st.

Click SUBMIT Below to Sign