



10th Special Retiree Work Rule Form

I _____, have or will be returning to work in accordance with the
First and last name (Please Print)
rules of the 10th Special Retiree Work Rule .

Date you returned or intend to return to covered work: _____

- I am currently receiving an Early Retirement or Age Pension from the Boilermaker-Blacksmith National Pension Trust, and have received my pension benefits for at least three months.
- I understand the 10th Special Retiree Work Rule covers a distinct time period in which I may return to covered work and still receive pension benefits. I understand I may work 999.5 hours during the period of October 1, 2012 through September 30, 2013.
- I understand I may work under this Rule only in Locals where there has been declared a Bona Fide Labor Shortage as determined under criteria established by the Trustees
- I understand I must provide this form, **as soon as possible** but at least WITHIN 45 days of my return to covered employment, to the Boilermaker-Blacksmith National Pension Trust.
- I understand if I fail to meet all of the required provisions under the 10th Special Retiree Work Rule my pension will be suspended as outlined in Section 8.09 of the 12th Restatement of the Pension Plan Document.

Signature

Date

Social Security Number

Fax this form to 913 - 281- 5514 or mail it to:

Boilermaker-Blacksmith National Pension Trust
Attention: Special Retiree Work Rule
754 Minnesota Avenue
Kansas City, KS 66101-2766