



National Electrical 401(k) Plan Participant Information Sheet

NAME

ADDRESS

PHONE NUMBER

E-MAIL ADDRESS

D.O.B.

SSN #

LOCAL UNION

CURRENT EMPLOYER

PAYROLL FREQUENCY

CONTRIBUTION (%)

MARITAL STATUS

Married

Single

DATE OF HIRE

Signature

Date

IMPORTANT: Please remit a copy of this form to both your current employer and the IBEW Investment Dept (fax, mail, or email). Proceed to the plan website (www.nefp.org) to complete the enrollment process and select your investment options. If you need assistance or have questions with the enrollment process, please contact our office.

IBEW Investment Department

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