

**Memorandum of Understanding
By and Between**

(Union)

and

(Employer)

The parties to this agreement have agreed to adopt the Western Metal Industry Pension Fund Rehabilitation Plan – Preferred Schedule.

In accordance with the Preferred Schedule, effective with _____ (insert both month and year) hours worked, the Employer agrees to pay an additional supplemental contribution in an amount equal to 16% of the previously established contribution rate, with the understanding that the supplemental contributions will not result in any pension credit for the covered employees.

The effective date for payments made in accordance with Western Metal Industry Pension Fund Rehabilitation Plan – Preferred Schedule cannot be later than the first day of the month following 180 days from the end date of the prior contract.

The supplemental rate increases from 16% in the first year to 32% in the second year, to 48% in the third year, etc. under the Rehabilitation Plan, a copy of which has previously been provided to the Employer and to the Union. Each rate under the Western Metal Industry Pension Fund Rehabilitation Plan – Preferred Schedule will be paid for a period of 12 months. Both the Union and the Employer understand that the contribution increases required under the Rehabilitation Plan may change in subsequent collective bargaining agreements.

Signed this ____ day of _____, 20_____.

(Employer)

(Union)

By: _____

By: _____

Title: _____

Title: _____

Please return a copy of this Memorandum of Understanding to the Trust Office as soon as possible after it has been adopted.

Western Metal Industry Pension Fund

PO Box 34203, Seattle, WA 98124

Phone (206) 664-7300 or (800) 426-7132 • Fax (206) 695-0984 • Website: www.wmipension.org