

INDIANA LABORERS DEFINED CONTRIBUTION  
TRUST FUND  
PO BOX 1587  
TERRE HAUTE, IN 47808  
(812) 238-2551 or toll free (800) 962-3158

**STATEMENT OF INDIVIDUAL ACCOUNT**

Member ID:	[REDACTED]
Statement Date:	26 Oct 2017

*Please retain for future reference*

This statement is based on hours reported for plan year beginning May and ending April.

DATE	EMPLOYER	WORK PERIOD	HOURS	RATE	DOLLARS
06/15/2016	[REDACTED]	201605	199.50	0.2500	49.88
07/19/2016	[REDACTED]	201606	8.00	0.2500	2.00
07/19/2016	[REDACTED]	201606	195.00	0.2500	48.75
08/16/2016	[REDACTED]	201607	17.50	0.2500	4.38
08/16/2016	[REDACTED]	201607	214.50	0.2500	53.63
09/12/2016	[REDACTED]	201608	214.50	0.2500	53.63
10/11/2016	[REDACTED]	201609	198.50	0.2500	49.63
11/15/2016	[REDACTED]	201610	34.50	0.2500	8.63
11/15/2016	[REDACTED]	201610	71.00	0.2500	17.75
11/15/2016	[REDACTED]	201610	8.00	0.2500	2.00
11/15/2016	[REDACTED]	201610	142.00	0.2500	35.50
12/19/2016	[REDACTED]	201611	30.50	0.2500	7.63
12/19/2016	[REDACTED]	201611	149.50	0.2500	37.38
01/17/2017	[REDACTED]	201612	73.00	0.2500	18.25
05/16/2017	[REDACTED]	201704	77.00	0.2500	19.25
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			1633.00		408.29

Opening Balance:	538.86	Expense:	0.00
Contributions:	408.29	Interest:	13.62
Deductions:		Account Balance at End of Year:	960.77