THE CENTER FOR MILITARY RECRUITMENT, ASSESSMENT AND VETERANS EMPLOYMENT HELMETS TO HARDHATS[®] PROGRAM

CONTRIBUTION FORM



For all Contractors and Subcontractors Participating under the

National Construction Agreement

CONTRACTOR INFORMATION

Date:	Person Completing	_ Person Completing This Form:(Name, Title)	
	(Phone)	(E-Mail)	
Contractor's Name:			
		(Name)	
General: or	Sub: If Sub, who	is General	
PROJECT INFORM	ATION		
Project Name:		Agreement #:	
City, State:			

CONTRIBUTION INFORMATION

The hours provided below are for the month/year of _____, ___

CRAFT:	HOURS WORKED:	CRAFT:	HOURS WORKED
Asbestos Workers		Laborers	
Boilermakers		Millwrights	
Bricklayers		Operating Engineers	
Carpenters		Painters	
Cement Masons		United Association	
Electricians		Roofers	
Elevator Constructors		Sheet Metal Workers	
Glaziers		Teamsters	
Iron Workers		Other	

NOTE:

· The contribution rate for all contractors is \$.01/hr worked.

MAKE CHECK PAYABLE TO:

The Center for Military Recruitment, Assessment and Veterans Employment Labor Management Cooperation Committee Trust (CMRAVE) EIN: 43-1972568

DISTRIBUTION:

Mail one (1) copy of this form along with a check for your contribution to: Center for Military Recruitment, Assessment and Veterans Employment Helmets to Hardhats Program c/o North America's Building Trades Unions 815 16th Street, NW, Suite 600 Washington, DC 20006-4104

Total Hours =_____x \$.01/ hr =_____

Total contribution enclosed