

**PLASTERERS' LOCAL UNION 526 WAGE and BENEFIT SUMMARY  
MICA ZONE (1) AGREEMENT**

**GEOGRAPHIC JURISDICTION:**

ALLEGHENY, ARMSTRONG, BEAVER, BUTLER, CAMERON, CLARION, CLEARFIELD, CRAWFORD, ELK, FAYETTE, FOREST, GREENE, JEFFERSON, LAWRENCE, MCKEAN, MERCER, POTTER, VENANGO, WARREN, WASHINGTON AND WESTMORELAND.

**COMMERCIAL BUILDING RATE EFFECTIVE:**

**June 01, 2020**

**BASE WAGES:**

<u>JOURNEYMAN</u>	<u>\$29.78</u>
<u>FOREMAN</u>	<u>\$31.28(JOURNEYMAN+\$1.50 PER HOUR)</u>
<u>FOREMAN GUNNER</u>	<u>\$32.78(JOURNEYMAN+\$3.00 PER HOUR)</u>
<u>GUNNER</u>	<u>\$31.28(JOURNEYMAN+\$1.50 PER HOUR)</u>
<u>SWINGMAN</u>	<u>\$30.28(JOURNEYMAN+\$0.50 PER HOUR)</u>

**TOTAL PACKAGES:**

<u>JOURNEYMAN TOTAL PACKAGE:</u>	<u>\$48.38</u>
<u>FOREMAN TOTAL PACKAGE:</u>	<u>\$49.88</u>
<u>FOREMAN GUNNER TOTAL PACKAGE:</u>	<u>\$51.38</u>
<u>GUNNER TOTAL PACKAGE:</u>	<u>\$49.88</u>
<u>SWINGMAN TOTAL PACKAGE:</u>	<u>\$48.88</u>

**BENEFITS:**

<u>WELFARE</u>	<u>\$10.24</u>
<u>LOCAL 31 PENSION</u>	<u>\$4.26</u>
<u>BUILDING TRADES PENSION</u>	<u>\$3.50</u>
<u>APPRENTICE FUND</u>	<u>\$0.50(\$0.44 LUJATC/ \$0.06 ITF)</u>
<u>INDUSTRY FUND</u>	<u>\$0.10</u>

=====  
=====  
\$18.60

**ADDITIONAL DEDUCTIONS:**

<u>ADVANCEMENT FUND</u>	<u>\$0.33 (PER HOUR)</u>
<u>DUES DEDUCTION</u>	<u>4.25% (TOTAL PACKAGE (WAGES&amp;BENEFITS))</u>
<u>INTERNATIONAL DUES</u>	<u>1.00% (TOTAL PACKAGE (WAGES&amp;BENEFITS))</u>

**APPRENTICE BENEFITS:**

APPRENTICES SHALL RECEIVE BENEFITS BASED ON THE CLASSIFICATION PERCENTAGE, EXCEPT FOR HEALTH AND WELFARE WHICH SHALL EQUAL THE JOURNEYMAN'S CONTRIBUTION.

**REPORTING AND PAYMENT:**

ALL HOURS ARE REQUIRED TO BE REPORTED BY THE 30<sup>TH</sup> DAY OF THE MONTH FOLLOWING THE MONTH IN WHICH THE HOURS WERE WORKED. EXAMPLE-HOURS WORKED IN MARCH

(EXAMPLE: HOURS WORKED IN MARCH ARE REQUIRED TO BE REPORTED AND PAID BY APRIL 30)

REPORTS AND PAYMENT CAN BE COMPLETED AND MAILED TO THE ADDRESS LISTED BELOW OR ONLINE AT: [https://www.plasterers31.org/employer\\_calc.html](https://www.plasterers31.org/employer_calc.html) Operative

Plasterers' & Cement Masons' Local Union 526

1900 Andrew Street

Munhall, PA 15120

Phone: 412-464-2851, 412-761-6310

Facsimile: 412-461-9923

# CONSOLIDATED PAYMENT EMPLOYEE DETAIL

**Local Union No. 526 Benefit Funds Administrator**  
**c/o O.P. & C.M.I.A. Combined Funds**  
**of Western PA, Inc.**  
**1900 Andrew Street, Munhall, PA 15120**  
**Phone: 412-464-2851 ext. 3 Fax: 412-461-9923**  
[www.plasterers31.org](http://www.plasterers31.org)

Employer Name		Report Month & Year	
Soc. Sec. No.	Last Name, First Name	Hours Worked	Gross Wages
<b>Totals:</b>			

**Transfer Totals to Page 2 of Transmittal Form**

RATES EFFECTIVE  
JUNE 1, 2020 TO  
MAY 31, 2021

PITTSBURGH AGREEMENT CONSOLIDATED PAYMENT TRANSMITTAL FORM

JOURNEYMAN RATE

MAIL TO:  
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\_\_\_\_\_  
EMPLOYER NAME

\_\_\_\_\_  
EMPLOYER ADDRESS

\_\_\_\_\_  
CITY STATE ZIP

\_\_\_\_\_  
TELEPHONE # FAX #

HOURS FOR THE MONTH OF \_\_\_\_\_

Employer Contributions

Fund	Factor	Journeyman	Enter Total Hours	Amount Due
Welfare	Per Hour Worked	\$10.24	X	=
Local 31 Pension	Per Hour Worked	\$4.26	X	=
Bldg Trades Pension	Per Hour Worked	\$3.50	X	=
Apprentice	Per Hour Worked	\$0.50	X	=
CAP Fund	Per Hour Worked	\$0.10	X	=

**Total Benefit Contributions Due**

Payroll Deductions

Fund	Factor	Amount	Enter Total Hours	Amount Due
Advancement	Per Hour Worked	\$0.33	X	=
Local 31 Dues	4.25% Total Package (Wages & Benefits)	4.25%	X	=
International Dues	1% Total Package (Wages & Benefits)	1.00%	X	=

**Total Payroll Deductions Due**

**Total Employer Contributions Due**

**Total Payroll Deductions Due**

**Total Payment Due**

I certify this report to be a true and correct representation of hours worked by employees working under the Collective Bargaining Agreement with Plasterers' Local Union No. 526 and agree to abide by the terms and provisions of the Collective Bargaining Agreement with Plasterers' Local Union No. 526 and the Declarations of Trust affiliated with the Benefits outlined on this Transmittal Form.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
DATE

MAKE ALL CHECKS PAYABLE TO THE OPCMIA COMBINED FUNDS OF WESTERN PA, INC.

Journeyman  
PAGE 2

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Employer Name Report Month & Year

Soc. Sec. No.	Last Name, First Name	Hours Worked	Gross Wages
<b>Totals:</b>			

**Transfer Totals to Page 2 of Transmittal Form**

Rates Effective  
June 1, 2020 to  
May 31, 2021

Pittsburgh Agreement Consolidated Payment Transmittal Form

Apprentice Rate

MAIL TO:  
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EMPLOYER NAME		
EMPLOYER ADDRESS		
CITY	STATE	ZIP
TELEPHONE #	FAX #	

HOURS FOR THE MONTH OF \_\_\_\_\_

Employer Contributions			APPRENTICE %	
Fund	Factor	Amount	Enter Total Hours	Amount Due
Welfare	Per Hour Worked	\$10.24	X	=
Local 31 Pension	Per Hour Worked		X	=
Bldg Trades Pension	Per Hour Worked		X	=
Apprentice	Per Hour Worked		X	=
CAP Fund	Per Hour Worked		X	=

**Total Benefit Contributions Due**

Payroll Deductions				
Fund	Factor	Amount	Enter Total Hours	Amount Due
Advancement	Per Hour Worked		X	=
Local 31 Dues	4.25% Total Package		X	=
International Dues	1% Gross Wages		X	=

**Total Payroll Deductions Due**

**Total Employer Contributions Due**

**Total Payroll Deductions Due**

**Total Payment Due**

<b>FOR OFFICE USE:</b>
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TOTAL # OF REPORTS
CHECK #
CHECK AMOUNT
DATE RECEIVED
DATE POSTMARKED

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\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
DATE

Make All Checks Payable To The OPCMIA Combined Funds of Western PA, Inc.