Hollow Metal Pension Fund Participant and Spouse Rejection Form

(To be completed only if you do not wish to leave your spouse a Lifetime Pension after your death.)

l,	, Social Security #, do not wish to receive my pension
	form of a Participant and Spouse Pension. I understand that rejecting this form of pension means no will be paid to my spouse by the Pension Plan after my death. (Check only one of the following):
	I hereby swear that I was never married.
	I hereby swear that I am not legally married at this time. (Enclose copy of spouse's death certificate or original certified copies of your divorce decree and all other documentation relevant to your divorce such as, but not limited to, your settlement agreement). *Additional proof is needed if you check this line.*
	I hereby swear that I am legally married, however I do not qualify for spousal benefits under the rule of the plan.
	I hereby swear that the person co-signing this document below is my current and legal spouse.
	(Date) (Signature)
State of)
County of) SS:)
	SPOUSE'S STATEMENT
not be paid a spouse's death	, swear that I am the legal spouse of the employee described above. I to my spouse's rejection of the 50% Joint Survivor Spouse Pension. I understand that as a result, I will lifetime pension from the Pension Plan after my spouse's death; instead I will receive nothing after my in. I further recognize that because of this rejection the pension paid to my spouse while he or she is living man it would be if he had the 50% survivor protection.
(Date)	(Spouse's Signature)
0	(Spouse's Social Security #)
)) SS:
County of) 55.
On thec me to be the pe he executed the	day of 20before me came known to erson described in and who executed the foregoing statement and (s) he duly acknowledged to me that (s) e same.
	Notary Public