



Laborers' COMBINED FUNDS OF WESTERN PENNSYLVANIA

*Serving the Laborers' District Council of Western Pennsylvania
Pension Fund, Welfare Fund and other affiliated Funds*



12 EIGHTH STREET • SUITE 500 • PITTSBURGH, PENNSYLVANIA 15222
PHONE: 412-263-0900 • WEBSITE: www.lcfowpa.com

CONTACT INFORMATION

A COMPLETE COPY OF GUARDIANSHIP OR POWER OF ATTORNEY DOCUMENTS REQUIRED WITH THIS FORM

SECTION 1: Pensioner Information

Please provide current contact information on the person you are the designated guardian or power of attorney for.

Retiree's / Surviving Spouse Full Name _____

Retiree's / Surviving Spouse Social Security Number _____

Relationship of Guardian or Power of Attorney to Pensioner: _____

Pensioner's Current Residence: _____

If the pensioner resides in a nursing home, personal care or rehab facility, please include name of the facility.

Phone #: _____

SECTION 2: Guardian or Power of Attorney Information

Guardian / Power of Attorney Name _____

Address _____

Phone # _____ Email _____

Signature of Guardian or Power of Attorney

Date

For Calls Made in Pennsylvania but Outside Metropolitan Pittsburgh, Use Toll Free Number: 1-800-242-2538

FAX NUMBERS: Benefits Dept. – 1-412-263-2813 • Reports Dept. – 1-412-263-2825 • Administrative Dept. – 1-412-263-2084

EMAIL: Welfare Dept - benefits@lcfowpa.com • Pension Dept - pension@lcfowpa.com • Reports Dept – reports@lcfowpa.com