



## Chicago Regional Council of Carpenters Supplemental Retirement Fund

### Instructions for Completing an Appeal Form

**Complete the Appeal Form in its entirety.** Print clearly in blue or black ink and answer all questions. If the form is not legible, if a question is left unanswered or if the form is not signed, it will be returned to you for completion. An Appeal Form must be signed and dated to be valid.

**Attach additional information or evidence to the Appeal Form.** You may attach any additional relevant information to support your appeal.

**Submit the completed Appeal Form and any additional information to substantiate your appeal to:**

Scan & Email: pension@crccbenefts.org  
Fax: Chicago Regional Council of Carpenters Supplemental Retirement Fund  
Attn: Appeals Committee  
Fax Number: 312-951-3986  
(Note: Write the Participant's name & SSN or UID number on each page)  
Mail: Chicago Regional Council of Carpenters Supplemental Retirement Fund  
Attn: Appeals Committee  
12 East Erie Street 8<sup>th</sup> floor  
Chicago, IL 60611

**What's happens next?** Within five (5) business days of the Plan's receipt of your request for an appeal the Plan will mail a letter to you acknowledging receipt of your appeal and informing you of the date of the next appeals meeting. Properly filed appeals are reviewed at the next regularly scheduled Appeals Meeting. The Appeals Committee meets at least quarterly. You will be notified of the Trustees' decision via first class mail, five (5) business days after making their determination.

**Note:**

- ✓ The appeal must be submitted in writing by the participant.
- ✓ Copies of evidence supporting the appeal can be included.

