



# IRON WORKERS'

## Tri-State Welfare Fund

18861 90<sup>th</sup> Ave, Suite A  
Mokena, Illinois 60448  
Toll-Free 866-463-9418  
Fax 630-967-3080  
[www.tristatewelfarefund.com](http://www.tristatewelfarefund.com)  
tristate@abpa-tpa.com

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## RELEASE OF CLAIMS INFORMATION

In order to see your family's claims information on the Iron Workers' Tri-State Welfare Fund's web site, you must return this form to the Fund Office. Your family's information on the web site will be password protected. Please complete the form, have all your family members who are at least 18 years old sign this waiver, and return this form to:

Iron Workers' Tri-State Welfare Fund  
c/o: Zenith American Solutions  
18861 90<sup>th</sup> Ave, Suite A  
Mokena, Illinois 60448

### Member Information

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Name	Social Security Number
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### Member Attestation

I attest that the individuals listed on the next page are **all** of the individuals in my family who are covered under the Plan and age 18 or over.

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Name	Signature	Date
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