

**WESTERN PENNSYLVANIA TEAMSTERS AND EMPLOYERS
PENSION FUND**

SUSPENSION APPLICATION

Exhibit 15.2

Collective Bargaining Agreements and Participation Agreements

Reel's
E MAIL
12-5-17

8/1/2017 - 7/31/2020

AGREEMENT

By and between

OMNI WILLIAM PENN HOTEL

And

**TEAMSTERS AUTOMOTIVE CHAUFFEURS, PARTS,
GARAGE, OFFICE CLERICAL, AIRLINE, HEALTH
CARE, PETROLEUM INDUSTRY, PRODUCE, BAKERY
AND INDUSTRIAL WORKERS WITHIN WESTERN
PENNSYLVANIA AND JOINT COUNCIL #40. LOCAL
UNION 926.**

start of the benefit month to the Employer, or have a signed Agreement with the Employer or a payment schedule.

15.3 If the Employer fails to enroll any employee covered by this Agreement who is eligible for coverage and as a result an employee or employees are not covered by the Health Program, the Employer shall be individually liable for all benefits that would be due and owing under this Agreement to such employee or employees.

15.4 A. The Employer will provide Health Care coverage equal to the level of benefits and Network provided by the current Teamster "Matrix", dental & eye Plans. Each employer will provide a short term disability (STD) payment of three hundred (\$300.00/wk.) dollars for twenty six (26) weeks and twenty-five thousand (\$25,000.00) dollars life insurance.

B. It is understood and agreed that the Employer may change insurance carriers on a yearly basis provided the provisions of paragraph "A" above have been met. Any change in carrier shall not result in a loss of benefits or the imposition of any pre existing condition restriction.

C. Employees, who can show proof of coverage elsewhere, may "opt out" of the health care required by this Agreement and receive a payment of two hundred fifty (\$250.00) dollars per month. Health care shall be defined as the "Matrix" or equivalent, eye and dental coverage's. The Employer shall continue to provide STD and Life Insurance for an employee who "opts out."

D. An employee electing a "opt out" may not re enter the plan unless there has been a life altering event or at the yearly renewal period.

ARTICLE XVI PENSION

16.1 The Employer agrees to participate in a program to provide a pension for each employee covered by this Agreement who has twelve (12) months or more seniority with the Employer.

16.2 The Employer shall contribute to the Western Pennsylvania Teamsters and Employers Pension Fund the following sum per week for employees who begin participating in the Fund on or after November 1, 2004.

Effective:

8-1-2017 \$105.65 per week

8-1-2018 \$111.99 per week

8-1-2019 \$118.71 per week

6% Increase each year of the agreement as per the 2010 Rehabilitation Plan Selection.

16.3 The Western Pennsylvania Teamsters and Employers Pension Fund shall be the only pension fund that will be acceptable as fulfillment of the Employer's obligation under this Agreement.

16.4 By execution of this Agreement, the Employer further agrees to enter into any appropriate trust agreements with the Western Pennsylvania Teamsters and Employers Pension Fund as may be necessary for the administration of the Fund, and to designate the Employer Trustees under such agreement, hereby waiving all notice thereof and ratifying all actions already taken or to be taken by such Trustees within the scope of their authority.

16.5 If an employee, for whom a pension payment is required, is absent because of illness or off-the-job injury and notifies the Employer of such absence, the Employer shall continue to make the required contributions for a period of four (4) weeks. If an employee is injured on the job, the Employer shall continue to pay the required contributions until such employee returns to work. However, such contributions shall not be paid for a period of more than six (6) months. If an employee is granted a leave of absence, the Employer shall collect from said employee prior to the leave of absence being effective, sufficient monies to pay the required contributions into the pension plan during the period of absence.

16.6 Contributions to the pension fund must be made for each week for each employee even though such employee may not work a full week.

ARTICLE XVII BEREAVEMENT PAY

17.1 In the event of a death in an employee's immediate family, namely, spouse, child, step children, parent, step parents, brother, sister, mother-in-law, or father-in-law, an employee shall be paid in full for time lost not to exceed four (4) days. One day, the day of the funeral, shall be allowed for grandparents and grandchildren.

ARTICLE XVIII JURY DUTY PAY

18.1 When an employee is required to perform Jury Duty, the Employer shall reimburse the employee for the difference between his regular wages and the amount received for such Jury Duty, not to exceed two (2) weeks in any contract year.

7/03/2018
EMPR0030

W. PA TEAMSTERS AND EMPLOYERS PENSION FUND
EMPLOYER MASTER FILE - INQUIRY

F1 = COMMENTS
ENT.= CONTINUE

2292
926
OMNI WILLIAM PENN HOTEL
GREG SHEPLEY
ACCOUNTS PAYABLE
530 WILLIAM PENN PLACE

PITTSBURGH PA 15219 0
412 553 5120

VOLUNTARY: 00 00 0000
FEDERAL: A
STATUS: P
PREFERRED

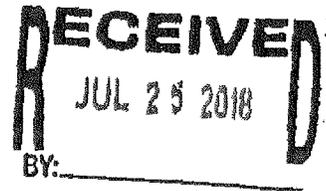
0.00
0.00
5 1 2018
5
ENTRY DATE 11 1 2004
EXPIRATION 0 0 0
Y
Y

No SELECTION

0.00 0.00
0.00 0.00

R
N

8	1	2016	7 31 2017	W	99.6700	99.6700
8	1	2017	7 31 2018	W	105.6500	105.6500
8	1	2018	7 31 2019	W	111.9900	111.9900
8	1	2019	7 31 2020	W	118.7100	118.7100



8/1/2017 - 7/31/2020

AGREEMENT

By and between

ODC PARKING, INC

AND

**TEAMSTERS AUTOMOTIVE CHAUFFEURS,PARTS,
GARAGE, OFFICE CLERICAL, AIRLINE, HEALTH
CARE,PETROLEUM INDUSTRY,PRODUCE,BAKERY
AND INDUSTRIAL WORKERS WITHIN WESTERN
PENNSYLVANIA AND JOINT COUNCIL #40 LOCAL
UNION 926, AFFILIATED WITH THE
INTERNATIONAL BROTHERHOOD OF TEAMSTERS**

D) An employee electing to "opt out" may not re-enter the plan until the next annual renewal period, or unless there has been a life-altering event. In the event an employee has a life-altering event and enters the plan during the plan year, he or she must notify the Employer immediately, and any retroactive application of coverage, and any premiums to be paid by the Employer to the Fund will be limited to two (2) months or less. The employee will re-pay the Employer for any contributions applicable to retroactive coverage, as well as for any opt out payments made. The recovery of such retroactive payments will be spread over eight (8) weekly pays. If an employee notifies the Employer of a life-altering event, on a form prepared by the Employer and returned to the Garage Manager, and the Employer fails to make the appropriate contribution to the Health & Welfare Fund, then the Employer will be required to re-pay all retroactive payments as defined by the Fund.

**ARTICLE XVI
PENSION**

16.1 The Employer agrees to participate in a program to provide a pension for each full time employee covered by this Agreement who has six (6) months or more seniority with the Employer.

16.2 To fulfill this obligation, the Employer shall contribute to the Western Pennsylvania Teamsters and Employer Pension Fund the following sum per week for each such employee participating in the Fund prior to August 1, 1993:

Effective August 1, 2017	\$ 120.00 per wk
Effective August 1, 2018	\$ 127.20 per wk
Effective August 1, 2019	\$ 134.83 per wk

The Employer shall contribute to the Western Pennsylvania Teamsters and Employers Pension Fund the following sum per week for employees who begin participating in the Fund on or after August 1, 1993:

Effective August 1, 2017	\$105.64 per wk
Effective August 1, 2018	\$111.98 per wk
Effective August 1, 2019	\$118.70 per wk

16.3 The Western Pennsylvania Teamsters and Employers Pension Fund shall be the only pension fund that will be acceptable as fulfillment of the Employer's obligation under this Agreement.

16.4 By execution of this Agreement, the Employer further agrees to enter into any appropriate trust agreements with the Western Pennsylvania Teamsters and Employers Pension Fund as may be necessary for the administration of the Fund, and to designate the Employer Trustees under such agreement, hereby waiving all notice thereof and ratifying all actions already taken or to be taken by such Trustees within the scope of their authority.

16.5 If an employee, for whom a pension payment is required, is absent because of illness or off-the-job injury and notifies the Employer of such absence, the Employer shall continue to make the required contributions for a period of four (4) weeks. If an employee is injured on the job, the Employer shall continue to pay the required contributions until such employee returns to work. However, such contributions shall not be paid for a period of more than six (6) months. If an employee is granted a leave of absence, the Employer shall collect from said employee prior to the leave of absence being effective, sufficient monies to pay the required contributions into the pension plan during the period of absence.

16.6 Contributions to the pension fund must be made for each week for each employee even though such employee may not work a full week.

ARTICLE XVII BEREAVEMENT PAY

17.1 In the event of a death in an employee's immediate family, namely, spouse, child, step children, parent, step parents, brother, sister, mother-in-law, or father-in-law or Grandchildren, an employee shall be paid in full for time lost not to exceed four (4) days. In the event of the death of an employee's Grandparent, the employee will be granted two (2) days off with pay to attend the funeral. If an employee needs additional time off, without pay, (up to two (2) additional days, and provided the additional time is requested during the two (2) day bereavement period), he or she will be granted the additional time without discipline.

17.2 In the event of a death of a part time employee's immediate family, namely spouse, child, step-children, parent, step-parent, brother, sister, mother-in-law, father-in-law, or grandchildren, a part time employee shall be paid in full for scheduled time lost, not to exceed two (2) days. In the event of the death of a part time employee's grandparent, the part time employee will be granted one (1) day off with pay to attend the funeral, if scheduled. If a part time employee needs additional time off without pay, (up to one (1) additional day and provided the additional time is requested during the one (1) day bereavement period), he or she will be granted the additional time without discipline.

ARTICLE XVIII JURY DUTY PAY

18.1 Serving on jury when called is a civic duty and is fully recognized and supported by the employer. It is the employee's responsibility to provide the Employer with a copy of a formal notice regarding jury duty as soon as it is received. Supervisors are responsible to make arrangements for coverage during this time.

While serving, full time employees are paid the difference between their normal wages (excluding overtime) and that which is paid by the court system, up to a limit of eight (8) hours per day and forty (40) hours per week, provided the employee brings a receipt of juror's wages to Director of compensation, benefits & HR.

WESTERN PENNSYLVANIA TEAMSTERS AND EMPLOYERS PENSION FUND

49 AUTO WAY • PITTSBURGH, PA 15206-3663
 (412) 362-4200 • TOLL FREE (800) 362-4201 • FAX (412) 362-3133
 EMAIL: contactus@wpapensionfund.com • WEBSITE: <http://www.wpapensionfund.com>

Received

AUG 12 2011

Western PA Teamsters
& Employers Pension Fund

2010 REHABILITATION PLAN SELECTION FORM

By execution of this form, the undersigned contributing employer and employee bargaining representative (the "Bargaining Parties"), acknowledge their understanding and agree that the annual rate increases owed to the Western Pennsylvania Teamsters and Employers Pension Fund ("Pension Fund") on behalf of employees covered under one or more collective bargaining agreements or participation agreements determine the benefit structure for benefits as described in the Pension Fund's 2010 Rehabilitation Plan.

The Bargaining Parties acknowledge that a copy of the 2010 Rehabilitation Plan has been provided and that they are aware that it sets forth two alternative schedules of contribution and benefit structures, one of which must be selected by the Bargaining Parties when collective bargaining agreements and participation agreements come up for renewal. It also provides for benefit structures which apply in the interim period prior to renewal.

The Bargaining Parties acknowledge their understanding that the "**Preferred Schedule**" will be deemed to apply to pending agreements which already have a six (6%) percent annual contribution increase in place by the end of 2011. For existing agreements which do not provide for a six (6%) percent contribution increase beginning in 2011, if checked below, the Bargaining Parties hereby agree that the contribution obligation stated in the applicable collective bargaining agreement is amended, effective on the anniversary date of that agreement, by such amount as is necessary to comply with the annual six (6%) percent requirement set forth in the 2010 Rehabilitation Plan. *(Note that if compliance with the Rehabilitation Plan is delayed past 2011, greater contribution increases will be required for selection of the Preferred Schedule in 2012 (8%), 2013 (10%) or 2014 (12%).)*

If checked below, the Bargaining Parties can select the "**Default Schedule**"; however, if selected in 2011, annual contribution increases of eight (8%) are required. Greater increases apply if the Default Schedule is first selected or imposed in 2012 (11%), 2013 (14%) or 2014 (17%).

The Bargaining Parties may choose to retain an existing contribution structure which does not provide for annual six (6%) percent contribution increases for the remaining term of a pending collective bargaining agreement which does not expire in 2011. However, by indicating "**No Change**" on this form, the Bargaining Parties acknowledge their understanding that the 2010 Rehabilitation Plan provides that for service earned after February 1, 2011, Unit Multipliers will be reduced by 50% until the pending collective bargaining agreement is renewed and one of the applicable schedules is selected or imposed.

Verification of Contribution and Benefit Structures			
COMPANY NAME:	Oxford Parking, Inc.		
LOCAL UNION:	926		
Fund Account Number(s)		PREFERRED SCHEDULE	DEFAULT SCHEDULE
2255, 2297		<input checked="" type="checkbox"/>	<input type="checkbox"/>
		NO CHANGE	<input type="checkbox"/>

Dated: July 27

By:

By:

Employee Representative

7/25/2018		W. PA TEAMSTERS AND EMPLOYERS PENSION FUND		F1 = COMMENTS	
EMPR0030		EMPLOYER MASTER FILE - INQUIRY		ENT.= CONTINUE	
2255				00	00 0000
926	2160			A	
OXFORD PARKING, INC.				P	PREFERRED
DAWN					
C/L OXFORD DEVELOPMENT					
5TH AVE PLACE GARAGE					0.00
301 GRANT ST., 4TH FLOOR					0.00
PITTSBURGH PA 15219		0		6	1 2018
412 395 3495					1
				4	1 2004
				0	0 0
				Y	
	0.00	0.00			
	0.00	0.00			
					R
					N
8	1 2016	7 31 2017	W	113.2100	113.2100
8	1 2017	7 31 2018	W	120.0000	120.0000
8	1 2018	7 31 2019	W	127.2000	127.2000
8	1 2019	7 31 2020	W	134.8300	134.8300



7/25/2018		W. PA TEAMSTERS AND EMPLOYERS PENSION FUND		F1 = COMMENTS	
EMPR0030		EMPLOYER MASTER FILE - INQUIRY		ENT. = CONTINUE	
2297				00 00 0000	
926	2255				
OXFORD PARKING, INC.				A	
DAWN				P	PREFERRED
C/O OXFORD DEVELOPMENT					
5TH AVE PL GRG, NEW HIRE					0.00
301 GRANT ST., 4TH FLOOR					0.00
PITTSBURGH PA 15219		0		6 1 2018	
412 395 3495				4	
				8 1 2005	
				0 0 0	
				Y	
				N	R
		0.00	0.00		N
		0.00	0.00		
DATE	DATE	WAGE RATE	WAGE RATE	WAGE RATE	WAGE RATE
8 1 2016	7 31 2017	W	99.6600	99.6600	
8 1 2017	7 31 2018	W	105.6400	105.6400	
8 1 2018	7 31 2019	W	111.9800	111.9800	
8 1 2019	7 31 2020	W	118.7000	118.7000	

COLLECTIVE BARGAINING AGREEMENT

BETWEEN

**PAPER PRODUCTS COMPANY, INC.
(WAREHOUSE AND DRIVERS)**

AND

**GENERAL TEAMSTERS, CHAUFFEURS AND HELPERS
LOCAL UNION 249, INTERNATIONAL BROTHERHOOD
OF TEAMSTERS, CHAUFFEURS, WAREHOUSEMEN AND
HELPERS OF AMERICA**

OCTOBER 1, 2014

SEPTEMBER 30, 2017

SCHEDULE B PENSION

Drivers & Warehousemen hired as regular full-time employees before October 1, 1994:

<u>10/01/2014-15</u>	<u>10/01/2015-16</u>	<u>10/01/2016-17</u>
\$261.61	\$277.31	\$293.95

Drivers & Warehousemen hired as regular full-time employees after October 1, 1994 and before October 1, 2002:

<u>10/01/2014-15</u>	<u>10/01/2015-16</u>	<u>10/01/2016-17</u>
\$152.01	\$161.13	\$170.80

Drivers & Warehousemen hired as regular full-time employees after October 1, 2002:

First Year of Credited Service	\$22.47 per week
Second Year of Credited Service	\$44.94 per week
Third Year of Credited Service	Post 1994 contribution rate

The Union reserves the option to, effective October 1, 2011, allocate any portion of the wage rate increase scheduled for that date to instead increase the amount to be contributed for pension. The allocation shall be on a dollar-for-dollar basis and may vary between the pension contribution groups identified above based upon date of hire. If the Union exercises this option, it must provide written notice to the Employer specifying the amounts at least sixty (60) days prior to the October 1 effective date.

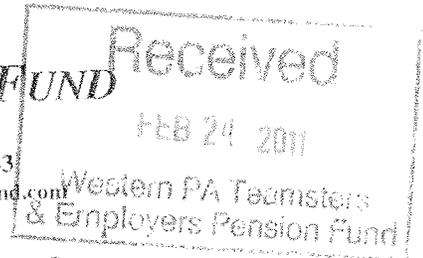
In the event of an IRC § 432 surcharge or any type of additional funding requirement of the Fund, such as an increase in contributions required by a funding improvement plan or rehabilitation plan under IRC § 432, the Company will deduct the full amount of these additional required contributions and charges from wages.

HEALTH AND WELFARE

The Employer shall participate in and contribute for each regular employee to the Western Pennsylvania Teamsters and Motor Carriers Welfare Fund Plan 9A the amount per month agreed by the signed Agreement with the Health and Welfare Fund. The contribution may be increased effective April 1, 2015 and April 1, 2016 to the amount then necessary to maintain the current level of benefits under Plan 9A.

WESTERN PENNSYLVANIA TEAMSTERS AND EMPLOYERS PENSION FUND

49 AUTO WAY • PITTSBURGH, PA 15206-3663
 (412) 362-4200 • TOLL FREE (800) 362-4201 • FAX (412) 362-3133
 EMAIL: contactus@wpapensionfund.com • WEBSITE: http://www.wpapensionfund.com



2010 REHABILITATION PLAN SELECTION FORM

By execution of this form, the undersigned contributing employer and employee bargaining representative (the "Bargaining Parties"), acknowledge their understanding and agree that the annual rate increases owed to the Western Pennsylvania Teamsters and Employers Pension Fund ("Pension Fund") on behalf of employees covered under one or more collective bargaining agreements or participation agreements determine the benefit structure for benefits as described in the Pension Fund's 2010 Rehabilitation Plan.

The Bargaining Parties acknowledge that a copy of the 2010 Rehabilitation Plan has been provided and that they are aware that it sets forth two alternative schedules of contribution and benefit structures, one of which must be selected by the Bargaining Parties when collective bargaining agreements and participation agreements come up for renewal. It also provides for benefit structures which apply in the interim period prior to renewal.

The Bargaining Parties acknowledge their understanding that the "Preferred Schedule" will be deemed to apply to pending agreements which already have a six (6%) percent annual contribution increase in place by the end of 2011. For existing agreements which do not provide for a six (6%) percent contribution increase beginning in 2011, if checked below, the Bargaining Parties hereby agree that the contribution obligation stated in the applicable collective bargaining agreement is amended, effective on the anniversary date of that agreement, by such amount as is necessary to comply with the annual six (6%) percent requirement set forth in the 2010 Rehabilitation Plan. *(Note that if compliance with the Rehabilitation Plan is delayed past 2011, greater contribution increases will be required for selection of the Preferred Schedule in 2012 (8%), 2013 (10%) or 2014 (12%).)*

If checked below, the Bargaining Parties can select the "Default Schedule"; however, if selected in 2011, annual contribution increases of eight (8%) are required. Greater increases apply if the Default Schedule is first selected or imposed in 2012 (11%), 2013 (14%) or 2014 (17%).

The Bargaining Parties may choose to retain an existing contribution structure which does not provide for annual six (6%) percent contribution increases for the remaining term of a pending collective bargaining agreement which does not expire in 2011. However, by indicating "No Change" on this form, the Bargaining Parties acknowledge their understanding that the 2010 Rehabilitation Plan provides that for service earned after February 1, 2011, Unit Multipliers will be reduced by 50% until the pending collective bargaining agreement is renewed and one of the applicable schedules is selected or imposed.

Verification of Contribution and Benefit Structures			
COMPANY NAME:	Paper Products		
LOCAL UNION:	249		
Fund Account Number(s)		PREFERRED SCHEDULE	DEFAULT SCHEDULE
1518, 2062, 2240, 2259		<input checked="" type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	NO CHANGE
		<input type="checkbox"/>	<input type="checkbox"/>

Dated: 1-24-2011 By: [REDACTED] Employer By: _____ Employee Representative

7/03/2018
EMPR0030

W. PA TEAMSTERS AND EMPLOYERS PENSION FUND
EMPLOYER MASTER FILE - INQUIRY

F1 = COMMENTS
ENT.= CONTINUE

1518
249 1518
PAPER PRODUCTS CO
FRAN X232 ALESIA X222
760 COMMONWEALTH DR
WARRENDALE PA 15086 0
724 741 9700
0.00 0.00
0.00 0.00

00 00 0000
A
P PREFERRED
0.00
0.00
5 1 2018
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1 19 1973
0 0 0
Y
N
N N

DATE	TYPE	EMP. DATE	TYP	L/R RATE	EMP RATE
10 1 2016		9 30 2017	W	293.9500	293.9500
10 1 2017		9 30 2018	W	311.5900	311.5900
10 1 2018		9 30 2019	W	330.2700	330.2700
10 1 2019		9 30 2020	W	350.0800	350.0800

7/03/2018
EMPR0030

W. PA TEAMSTERS AND EMPLOYERS PENSION FUND
EMPLOYER MASTER FILE - INQUIRY

F1 = COMMENTS
ENT. = CONTINUE

2062
 249 GROUP 1518
 PAPER PRODUCTS CO NEW HIRES
 FRAN X232
 760 COMMONWEALTH DR
 WARRENDALE PA 15086 0
 724 741 9700

00:00:0000
 FEDERAL T.D.
 STATE CODES: A
 AGRMNT. CODE P PREFERRED
 0.00
 0.00
 5 1 2018
 12
 10 1 1994
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 Y
 N

0.00 0.00
 0.00 0.00

DATE	PERIOD	EXP. DATE	TYP	R/S RATE	W/P RATE
10	1 2016	9 30 2017	W	170.8000	170.8000
10	1 2017	9 30 2018	W	181.0500	181.0500
10	1 2018	9 30 2019	W	191.9000	191.9000
10	1 2019	9 30 2020	W	203.4100	203.4100

7/03/2018
EMPR0030

W. PA TEAMSTERS AND EMPLOYERS PENSION FUND
EMPLOYER MASTER FILE - INQUIRY

F1 = COMMENTS
ENT. = CONTINUE

2240
249 1518
PAPER PRODUCTS
FRAN X232
NEW HIRES AFTER 10/1/2002
760 COMMONWEALTH DR
WARRENDALE PA 15086 0
724 741 9700

VOLUNTARY DATE 00 00 0000
FEDERAL YEAR
STATUS CODE A
ACRUAL CODE P PREFERRED
0.00
0.00
5 1 2018
2
10 1 2002
0 0 0
Y
N

0.00 0.00
0.00 0.00

DATE	TIME	DATE	DAY	LR RATE	SR RATE
10 1 2016		9 30 2017	W	30.0700	30.0700
10 1 2017		9 30 2018	W	31.8700	31.8700
10 1 2018		9 30 2019	W	33.7800	33.7800
10 1 2019		9 30 2020	W	35.8100	35.8100

2259
 249 1518
 PAPER PRODUCTS
 FRAN X222
 NEW HIRE, 2ND YEAR
 760 COMMONWEALTH DR
 WARRENDALE PA 15086 0
 724 741 9700

00 00 0000
 A
 P PREFERRED
 0.00
 0.00
 5 2 2018
 1
 10 1 2002
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 Y
 0.00 0.00
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 N

DATE	TYPE	AMOUNT	DATE	TYPE	AMOUNT	DATE	TYPE	AMOUNT
10 1 2016			9 30 2017	W	60.1400			60.1400
10 1 2017			9 30 2018	W	63.7500			63.7500
10 1 2018			9 30 2019	W	67.5800			67.5800
10 1 2019			9 30 2020	W	71.6300			71.6300

SEPTEMBER 1, 2017- AUGUST 31, 2021

AGREEMENT

by and between

**PARKWAY GARAGE, INC.
PITTSBURGH OPERATION**

and

**AUTOMOTIVE CHAUFFEURS, PARTS,
GARAGE, OFFICE CLERICAL, AIRLINE, HEALTH
CARE, PETROLEUM INDUSTRY, PRODUCE, BAKERY
AND INDUSTRIAL WORKERS WITHIN WESTERN
PENNSYLVANIA AND JOINT COUNCIL #40.**

**LOCAL UNION NO. 926, AFFILIATED WITH
INTERNATIONAL BROTHERHOOD OF TEAMSTERS.**

15.11 Part time employees will not be included on the Health and Welfare coverage, as far as permissible by law.

ARTICLE XVI

16.1 (a) The Employer agree to participate in a program to provide a pension for each full time employee covered by this agreement who has six (6) months or more seniority.

(b) To fulfill this obligation, the Employer shall contribute to the Western Pennsylvania Teamsters and Employers Pension Fund as per the 2010 Rehabilitation Plan the following sum each year of the agreement (the employer agrees to pay all moneys owed to become complaint with 2010 Rehabilitation plan as received from Fund office and the following amount moving forward.)

Effective	<u>9/1/2017</u>	<u>9/1/2018</u>	<u>9/1/2019</u>	<u>9/1/2020</u>
	\$ 72.18 perwk	\$76.51 perwk	\$81.10 per wk	\$85.96 per wk

(c) The Western Pennsylvania Teamsters and Employers Pension Fund shall be the only pension fund that will be acceptable as fulfillment of the Employer's obligation under this agreement.

16.2 By execution of this Agreement, the Employer further agrees to enter into any appropriate trust agreements with the Western Pennsylvania Teamsters and Employers Pension Fund as may be necessary for the administration of the Fund, and to designate the Employer Trustees under such agreement, waiving all notice thereof and ratifying all actions already taken or to be taken by such trustees within the scope of their authority.

16.3 If an employee, for whom a pension payment is required, is absent because of illness or off-the-job injury and notifies the Employer of such absence, the Employer shall continue to make the required contributions for a period of four (4) weeks. If an employee is injured on the job, the Employer shall continue to pay the required contributions until such employee returns to work. If an employee is granted a leave of absence, the Employer shall collect from said employee prior to the leave "of absence being effective, sufficient monies to pay the required contributions into the pension plan during the period of absence.

16.4 Contributions to the pension fund must be made for each week for each employee even though such employee may not work a full week.

16.5 Part time employees will not be included on the pension coverage as far as permissible by law.

ARTICLE XVII

7/03/2018
EMPR0030

W. PA TEAMSTERS AND EMPLOYERS PENSION FUND
EMPLOYER MASTER FILE - INQUIRY

F1 = COMMENTS
ENT. = CONTINUE

2212
926
PARKWAY GARAGE
SHARON BRASCHE EXT 4098
150 NORTH BROAD STREET

PHILADELPHIA PA 19102 0
215 569 8400

00 00 0000
A
P PREFERRED
0.00
0.00
5 1 2018
2
4 1 2002
0 0 0
Y
Y N

0.00 0.00
0.00 0.00

YR	MO	DATE	W	AMOUNT	BALANCE	
9	1	2016	8 31 2017	W	68.0900	68.0900
9	1	2017	8 31 2018	W	72.1800	72.1800
9	1	2018	8 31 2019	W	76.5100	76.5100
9	1	2019	8 31 2020	W	81.1000	81.1000

No
SELECTION

COLLECTIVE BARGAINING AGREEMENT

BETWEEN

PAUL LUMBER AND SUPPLY COMPANY

AND

TEAMSTERS LOCAL UNION NO. 249
affiliated with
INTERNATIONAL BROTHERHOOD OF TEAMSTERS

MAY 1, 2017

APRIL 30, 2022

required by any such legislation.

(c-1) The Employer shall contribute to the Western Pennsylvania Teamsters and Employers Pension Fund, effective May 1, 2012 the amount of \$128.77 per week, for each regular employee covered by this Agreement who has been on the payroll sixty (60) days or more. This amount shall increase to the amounts shown below on the dates shown below:

05/01/2017	=	6%	=	\$ 182.65 per week
05/01/2018	=	6%	=	\$ 193.61 per week
05/01/2019	=	6%	=	\$ 205.23 per week
05/01/2020	=	6%	=	\$ 217.55 per week
05/01/2021	=	6%	=	\$ 230.60 per week

(c-2) Employer Delinquent Contributions: If an Employer shall fail to pay its contribution to the Funds referred to in Article III (c-1), when they shall become due and payable, it shall be considered delinquent and in breach of this Agreement and shall pay, an additional amount to cover reasonable added bookkeeping costs and other incidental expenses, plus interest on the amount of contributions due at the rate of one-half percent (1/2%), per month until paid. In addition, the delinquent Employer shall be liable for the Trustees' reasonable expenses, including attorneys' fees and other disbursements incurred in the collection of such delinquent contributions.

(c-3) Extension of Employer Contributions for Disability: In the event a regular employee is medically certified to be disabled and unable to work for reason of non-occupational injury or illness, the Employer shall continue contributions on the

7/03/2018
EMPR0030

W. PA TEAMSTERS AND EMPLOYERS PENSION FUND
EMPLOYER MASTER FILE - INQUIRY

F1 = COMMENTS
ENT.= CONTINUE

2046
249
PAUL LUMBER & SUPPLY
CHERYL
PO BOX 9280

PITTSBURGH PA 15224 0
412 681 9200

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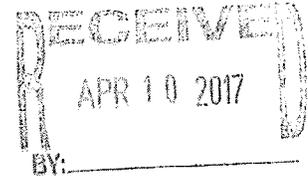
No SELECTION

0.00 0.00
0.00 0.00

EMP	FL	DATE	EMPLOYEE	W/P	H/R RATE	OP DATE
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	5	1 2017	4 30 2018	W	182.6500	182.6500
	5	1 2018	4 30 2019	W	193.6100	193.6100
	5	1 2019	4 30 2020	W	205.2300	205.2300

COLLECTIVE BARGAINING AGREEMENT

Between

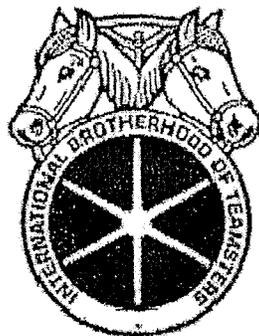


PENSKE TRUCK LEASING CO., L.P.



and

*INTERNATIONAL BROTHERHOOD OF
TEAMSTERS LOCAL NO. 926
PITTSBURGH, PENNSYLVANIA*



PITTSBURGH, PENNSYLVANIA

NOVEMBER 4, 2016 to NOVEMBER 3, 2019

SECTION 13 It shall not be a violation of this agreement and it shall not be cause for discharge or disciplinary action if any associate refuses to perform any service which his Employer undertakes to perform for an Employer or person whose associates are on strike and which service, but for such strike, would be performed by the associates of the Employer or person on strike.

SECTION 14 The parties agree to adopt the Attendance Program attached as Addendum A.

SECTION 15 Employer will keep one (1) Customer Serviceman on the first shift in the stockroom for the duration of this Agreement. Any extra stockroom work will be performed by management (e.g. vacation time, sick time, call-off, any work outside first shift). The Stockroom Customer Serviceman may be required to perform other duties (typical Customer Serviceman, Combination Person, and Fueller Washer duties) as currently assigned. Employer will not deprive the Stockroom Customer Serviceman associate from overtime opportunities.

ARTICLE 18
HEALTH AND WELFARE PLAN

SECTION 1 Associates covered by this Agreement will be covered by the Penske Flex Advantage Health Plan, as modified. The terms and conditions of the Penske Flex Advantage Health Plan, as modified, shall be revised from time to time and such revisions will automatically be extended to associates covered by this Agreement at the earliest feasible date but no later than six (6) months from the date of such revision.

SECTION 2 Associates hired on or after the date of ratification of this Agreement will be eligible to enroll in the Penske Affordable Health Choice Program, as modified, on the 1st of the month following 60 days of employment. The terms and conditions of the Penske Affordable Health Choice Program shall be revised from time to time and any such revisions will automatically be extended to associates covered by this Agreement at the earliest feasible date but no later than six (6) months from the date of such revision. After one (1) years from date of hire, enrolled full-time associates will become eligible for coverage under the Penske Flex Advantage Health Plan as otherwise provided for in this Collective Bargaining Agreement.

SECTION 3 Associates must properly complete the enrollment forms in order to be eligible for coverage.

ARTICLE 19
PENSION PLAN

SECTION 1 The Employer agrees to participate in a program to provide a pension for each regular full time associate covered by this Agreement. Associates hired into the existing classifications of rental representative and customer service representative will be eligible for pension contributions in accordance with all current provisions of the Agreement after six months of continuous employment. To fulfill this obligation, the Employer shall contribute to the Western Pennsylvania Teamsters and Employers Pension Fund at the following weekly rates set forth in the table below.

After six months of continuous employment, all regular full time eligible associates hired into the newly created classifications of fueler-washer, combination person, management trainee, and rental clerk will be enrolled in the current Teamster pension plan at the weekly rates set forth below for each regular associate. The associates in these classifications shall receive additional contributions into the National Teamsters 401(K) Plan, at the rates set forth below:

Classification		11/4/16	11/4/17	11/4/18
CSR	Pension	\$265.25	6% inc.	6% inc.
Combo	Pension	\$16.90	6% inc.	6% inc.
	IBT 401(k)	\$68.50	\$68.50	\$68.50
Fueler/Washer	Pension	\$16.90	6% inc.	6% inc.
	IBT 401(k)	\$68.50	\$68.50	\$68.50

In accordance with the Western Pennsylvania Teamsters and Employers Pension Fund Rehabilitation Plan, effective November 4, 2016, the Employer shall increase its pension contributions on behalf of all associates covered by this Agreement in the amount of Six Percent (6%) compounded annually to remain in compliance with the Rehabilitation Plan.

SECTION 2 The Western Pennsylvania Teamsters and Employers Pension Fund shall be the only pension fund that will be acceptable as fulfillment of the Employer's obligation under this Agreement. By execution of this Agreement, the Employer agrees to enter into any appropriate trust agreements with the Western Pennsylvania Teamsters and Employers Pension Fund as may be necessary for the administration of the Fund and to designate the Trustees under such agreements, hereby waiving any notice thereof and ratifying any action taken by such Trustees within the scope of their authority.

SECTION 3 In the event, during the term of this labor agreement or after the expiration of this agreement and before a new agreement or impasse is reached, the pension contribution rates specified herein should for any reason be increased by the Pension Plan Sponsor and/or any person or entity acting for or through such Pension Plan Sponsor, or should the Employer receive any assessments of "surcharges" or "excise taxes" related to the Pension Fund (as such terms are defined in the PPA of 2006), it is agreed that the Employer may reopen the agreement for negotiations on all economic issues.

ARTICLE 20
SEPARABILITY

SECTION 1 In the event any of the terms or provisions of this Agreement shall be or become invalid or unenforceable by reason of any Federal or State Law, directive, order, rule or regulation, now existing or hereinafter enacted or issued, or any decision or a court of last report, such invalidity or unenforceability shall not affect or impair any other terms or provisions thereof.

7/03/2018
EMPR0030

W. PA TEAMSTERS AND EMPLOYERS PENSION FUND
EMPLOYER MASTER FILE - INQUIRY

F1 = COMMENTS
ENT. = CONTINUE

1450
926
PENSKE TRUCK LEASING CO
GRETCHEN/SANDY/ OPT. 2
ATTN: PAYROLL
P O BOX 563

READING PA 19603 563
800 634 6823

VOLUNTARY DATE 00 00 0000
FEDERAL Y/D
LEAVE CODE A
ADDITIONAL UNIT P PREFERRED

EMPLOYEE 0.00
EMPLOYER 0.00
LTD PLAN 5 1 2018
LTD PLAN 3
ENTRY DATE 9 1 1972
REPRESENTED 0 0 0
CONTRACT Y
EXTENSION N
PARTICIPANT Y N

0.00 0.30-
0.00 0.00

DATE	START DATE	END DATE	WEEK	EMP RATE	S.P. RATE
11	1 2014	10 31 2015	W	236.0700	236.0700
11	1 2015	10 31 2016	W	250.2300	250.2300
11	1 2016	10 31 2017	W	265.2500	265.2500
11	1 2017	10 31 2018	W	281.1700	281.1700

No
SELECTION

2313 00 00 0000
 926 1450
 PENSKE TRUCK LEASING
 GRETCHEN/SANDY/OPT. 2
 ATTN: PAYROLL
 P O BOX 563
 READING PA 19603 563
 (800 634 6823
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*No
 SELECTION*

11	1	2014	10	31	2015	W	15.0400	15.0400
11	1	2015	10	31	2016	W	15.9400	15.9400
11	1	2016	10	31	2017	W	16.9000	16.9000
11	1	2017	10	31	2018	W	17.9100	17.9100

RECEIVED
SEP 21 2015
BY: _____

2206

A G R E E M E N T

b e t w e e n

PITTSBURGH ASSOCIATES

a n d

TURNPIKE, SOFT DRINK, BEER DISTRIBUTOR

AND MISCELLANEOUS SERVICE EMPLOYEES

LOCAL UNION NO. 250

This Agreement is entered and agreed to this 15th day of August, 2015 between PITTSBURGH ASSOCIATES, hereinafter called "Employer" and TURNPIKE, SOFT DRINK, BEER DISTRIBUTOR AND MISCELLANEOUS SERVICE EMPLOYEES, LOCAL NO. 250, an affiliate of the International Brotherhood of Teamsters, hereinafter called the "Union."

ARTICLE I - SCOPE OF WORK

1. Bargaining unit work shall be defined as field maintenance work; painting, including spray painting; carpentry work; cement finishing; assisting in the grading and laying of sod and maintenance thereof; grading and maintenance of artificial turf, if necessary; driving and operating all mobile equipment, including tractors, high lifts, rollers and all other mobile equipment; lubrication and maintenance of all such mobile equipment; general maintenance, including roof repair, glass cleaning and replacement; caulking and waterproofing; operating field cover; assembling and erecting and/or disassembling screens; seat repair; loading and unloading of all trucks where mobile equipment is used and authorized by Employer; miscellaneous sweeping and clean-up work; general field work; preparation of field for events; operating the types of equipment used at night games; general and emergency maintenance, including changing light bulbs in stands and various approaches; and all other general maintenance work which may be required upon the premises or incidental to the primary duties of the bargaining unit described herein.

2. It is understood and agreed that Local 250 does not have exclusive jurisdiction over the work described in paragraph 1 above. The Employer may utilize outside contractors or non-bargaining unit employees to perform such work. The Union recognizes that other individuals will be employed to work at PNC Park by the Pittsburgh Associates and/or by other entities. The Union agrees that employees covered by this Agreement will work cooperatively with other individuals employed at PNC Park.

ARTICLE XIII - PENSION

1. The Employer covenants and agrees to pay into the Western Pennsylvania Teamsters and Employers Pension Fund for each Ballpark Maintenance Worker the following amounts per week on and after the specific dates. The amount shown is intended to constitute a 6% increase in the contribution per year.

11/1/14	11/1/15	11/1/16	11/1/17	11/1/18	11/1/19
\$173.99	\$184.43	\$195.50	\$207.23	\$219.66	\$232.84

2. The Employer's only obligation with respect to pensions for employees subject to this Agreement shall be to make the contributions set forth in this Agreement. The Employer shall have no obligation to supervise the investment or disbursement of assets in the Fund. Pension benefits to employees shall be only as provided from such Fund and the Employer shall have no obligation to provide pension benefits to employees if the assets of the Fund are insufficient to provide employees the full amount of the pension benefits to which they are entitled under the provisions of the plan established with such Fund if for any other reason they fail to receive such benefits.

3. Contribution toward the pension fund shall commence at the beginning of the calendar month following their appointment as a Ballpark Maintenance Worker. Such contributions shall cease at the end of the calendar month following the calendar month in which the employee last performs work as a Ballpark Maintenance Worker.

ARTICLE XIV - HEALTH AND WELFARE

4. 1. The Employer shall contribute for each Ballpark Maintenance Worker to the Western Pennsylvania Teamsters and Motor Carriers Welfare Fund an amount per month which is the minimum amount required to provide Plan IX-B coverage for such employees. Contribution toward the Health and Welfare Fund shall commence at the beginning of the calendar month following their appointment as a Ballpark Maintenance Worker. Such contribution shall cease at the end of the calendar month following the calendar month in which the employee last performs work as a Ballpark Maintenance Worker. The Employer shall not be required to make a contribution to the Health and Welfare Fund if the employee has been off work for twelve consecutive months for any reason. Further, if an excise tax becomes payable during the term of this Agreement, the tax will be shared on an equal basis by the Employer and the employee.

2. Employees covered by this Agreement shall be eligible to participate in the Employer's existing EAP program.

7/03/2018
EMPR0030

W. PA TEAMSTERS AND EMPLOYERS PENSION FUND
EMPLOYER MASTER FILE - INQUIRY

F1 = COMMENTS
ENT = CONTINUE

2200
250
PITTSBURGH ASSOCIATES
LORRAINE MOORHEAD
ATTN: LORRAINE MOORHEAD
PNC PARK
115 FEDERAL STREET
PITTSBURGH PA 15212 0
412 325 4994

MOB WIP DATE: 00 00 0000
FEDERAL OLD
STATUS CODE: A
ACCOMMODAT P PREFERRED
PENSION 0.00
EMPLOYEE 0.00
EFFECTIVE 5 1 2018
EFFECTIVE 3
ENTRY DATE 3 1 2001
CAPITATION: 0 0 0
CONTRACT YEAR Y
NSR RELATIONSHIP
PAPER ACKNOWLEDG Y N

CURRENT TOTAL
0.00 0.00
0.00 0.00

DATE	AGE	DATE	AGE	DATE	AGE	DATE	AGE
11	1	2014	10	31	2015	W	173.9900
11	1	2015	10	31	2016	W	184.4300
11	1	2016	10	31	2017	W	195.5000
11	1	2017	10	31	2018	W	207.2300

NO SELECTION

SCANNED
9-2015

847/585



AGREEMENT

BETWEEN

**PITTSBURGH FLEXICORE COMPANY,
INC.**

AND

TEAMSTERS LOCAL UNION NO. 585

EFFECTIVE DATE: AUGUST 6, 2017
EXPIRATION DATE: OCTOBER 6, 2018

Contract Pittsburgh Flexcore 110000.docx 101000.doc

ARTICLE 15 - HEALTH AND WELFARE BENEFITS (Continued):

C. To be eligible for Health and Welfare benefits, an employee must have completed six (6) months of continuous service. Additionally, for an employee, to be eligible for health and welfare contributions, the employee must have worked one hundred (100) hours or more in the preceding month to qualify for the succeeding month's contributions.

D. Employees injured on the job are to be covered by the Health and Welfare benefits for a period of six (6) months.

E. Employees on lay-off shall receive Health and Welfare benefits until the end of the month in which the lay-off occurs. Health and Welfare benefits ends at the end of the month in which an employees' employment ends.

F. Eligible employees who are recalled from lay-off shall receive Health and Welfare benefits beginning the first (1st) of the month following the month in which recalled, provided the employee works during the month for which benefits are paid.

G. Employees will have the option not to participate in the established W.PA Teamsters & Employers Health & Welfare Plan. An employee, in order to utilize this option, must show proof of other health care coverage of which he or she is enrolled in as participant. This proof of enrollment in another plan must be provided annually. An employee who elects to not be a participant in the employee provided health care plan can become enrolled only by a qualifying event determined by the W.PA Teamsters & Employers Welfare Fund. The employer and employees agree that they are subject to all rules present and future pertaining to when an employee "opts out", "opts down" or "opts in" the W.PA Teamsters & Employers Welfare Fund. Any eligible employee hired prior to February 13, 2005 who opts out of the plan will receive an additional fifty (\$.50) cents per hour in their hourly wage. Any eligible employee hired on or after February 13, 2005 who opts out of the plan will receive an additional twenty-five (\$.25) cents per hour in their hourly wage.

ARTICLE 16 - PENSION PLAN

A. The Employer shall contribute to the Western Pennsylvania Teamsters & Employers Pension Fund, the sum of \$46.64 per week (which includes the 2010 Rehabilitation Plan Adjustment) for each employee covered by this agreement who has been on the payroll for one (1) year. Effective March 2012, The Employer shall contribute to the Western Pennsylvania Teamsters & Employers Pension Fund, the sum of \$46.64 per week (which includes the 2010 Rehabilitation Plan Adjustment) for each employee covered by this agreement who has been on the payroll for one (1) year.

B. Employees who are temporarily recalled from lay-off must work three (3) or more days in a recall week to be eligible for pension contributions.

*WESTERN PENNSYLVANIA
TEAMSTERS AND EMPLOYERS PENSION FUND*

Received
JAN 06 2011
Western PA Teams
& Employers Pension Fund

49 ALTO WAY • PITTSBURGH, PA 15206-3663
(412) 362-4200 • TOLL FREE (800) 362-4201 • FAX (412) 362-3133
EMAIL: comptitus@wppensionfund.com • WEBSITE: <http://www.wppensionfund.com>

RECEIVED
DEC 17 2010
Pittsburgh Flexicore
Company, Inc.

*See to
4/6/11
info
1, 2011
for
request*

2010 REHABILITATION PLAN SELECTION FORM

By execution of this form, the undersigned contributing employer and employee bargaining representative (the "Bargaining Parties"), acknowledge their understanding and agree that the annual rate increases owed to the Western Pennsylvania Teamsters and Employers Pension Fund ("Pension Fund") on behalf of employees covered under one or more collective bargaining agreements or participation agreements determine the benefit structure for benefits as described in the Pension Fund's 2010 Rehabilitation Plan.

The Bargaining Parties acknowledge that a copy of the 2010 Rehabilitation Plan has been provided and that they are aware that it sets forth two alternative schedules of contribution and benefit structures, one of which must be selected by the Bargaining Parties. Only collective bargaining agreements and participation agreements come up for renewal. It also provides for benefit structures which apply in the interim period prior to renewal.

The Bargaining Parties acknowledge their understanding that the "Preferred Schedule" will be deemed to apply to pending agreements which already have a six (6%) percent annual contribution increase in place by the end of 2011. For existing agreements which do not provide for a six (6%) percent contribution increase beginning in 2011, if checked below, the Bargaining Parties hereby agree that the contribution obligation stated in the applicable collective bargaining agreement is amended, effective on the anniversary date of that agreement, by such amount as is necessary to comply with the annual six (6%) percent requirement set forth in the 2010 Rehabilitation Plan. (Note that if compliance with the Rehabilitation Plan is delayed past 2011, greater contribution increases will be required for selection of the Preferred Schedule in 2012 (8%), 2013 (10%) or 2014 (12%).)

If checked below, the Bargaining Parties can select the "Default Schedule"; however, if selected in 2011, annual contribution increases of eight (8%) are required. Greater increases apply if the Default Schedule is first selected or imposed in 2012 (11%), 2013 (14%) or 2014 (17%).

The Bargaining Parties may choose to retain an existing contribution structure which does not provide for annual six (6%) percent contribution increases for the remaining term of a pending collective bargaining agreement which does not expire in 2011. However, by indicating "No Change" on this form, the Bargaining Parties acknowledge their understanding that the 2010 Rehabilitation Plan provides that for service earned after February 1, 2011, Unit Multipliers will be reduced by 50% until the pending collective bargaining agreement is renewed and one of the applicable schedules is selected or imposed.

Verification of Contribution and Benefit Structures			
COMPANY NAME:	Pittsburgh Flexicore Co. Inc.		
LOCAL UNION:	585		
Fund Account Number(s)		PREFERRED SCHEDULE	DEFAULT SCHEDULE
842		<input checked="" type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	NO CHANGE
		<input type="checkbox"/>	<input type="checkbox"/>

Dated: JAN 3 2011 By: [REDACTED] Employer By: [REDACTED] Employee Representative

7/03/2018 W. PA TEAMSTERS AND EMPLOYERS PENSION FUND F1 = COMMENTS
 EMPR0030 EMPLOYER MASTER FILE - INQUIRY ENT.= CONTINUE

842 VOL UNIT DATA 00 00 0000
 585 EMPLOYER ID
 842
 PITTSBURGH FLEXICORE CO INC
 ANN X111
 1877 ROUTE 2023
 STATE/ZIP A
 P PREFERRED

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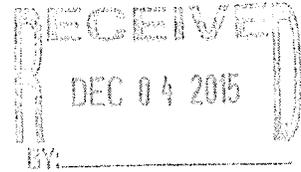
EMP ID	EMP DATE	EMP TYPE	EMP RATE	S/P DATE
3	1 2015	2 29 2016	W 58.8800	58.8800
3	1 2016	2 28 2017	W 62.4200	62.4200
3	1 2017	2 28 2018	W 66.1700	66.1700
3	1 2018	2 28 2019	W 70.1400	70.1400

MONONGAHELA PA 15063 0
 724 258 4450

CARRIED TOTAL
 0.00 0.00
 0.00 0.00

Y N R N





10/1/15 – 12/31/18

AGREEMENT

by and between

PITTSBURGH PARKING AUTHORITY

and

**Teamsters Automotive Chauffeurs, Parts, Garage,
Office Clerical, Airline, Health Care, Petroleum
Industry, Produce, Bakery and Industrial Workers
within Western Pennsylvania and Joint Council #40,
Local Union No. 926, Affiliated with the International
Brotherhood of Teamsters**

above have been met. Any change in carrier shall not result in a loss of benefits or the imposition of any pre existing condition restriction.

C) Employees who can show proof of coverage elsewhere may "opt out" of the health care required by this Agreement and receive a payment of two hundred fifty (\$250.00) dollars per month if the employee would have been eligible for single coverage and \$350.00 per month if the employee would have been eligible for family coverage. The Employer shall continue to provide eye, dental, STD and Life Insurance for an employee who "opts out."

D) An employee electing to "opt out" may not re enter the plan until the next annual renewal period, or unless there has been a life-altering event. In the event an employee has a life-altering event and enters the plan during the plan year, he or she must notify the Employer immediately, and any retroactive application of coverage, and any premiums to be paid by the Employer to the Fund will be limited to two (2) months or less. The employee will re-pay the Employer for any contributions applicable to retroactive coverage, as well as for any opt out payments made. The recovery of such retroactive payments will be spread over eight (8) weekly pays. If an employee notifies the Employer of a life-altering event, on a form prepared by the Employer and returned to the Garage Manager, and the Employer fails to make the appropriate contribution to the Health & Welfare Fund, then the Employer will be required to re-pay all retroactive payments as defined by the Fund.

ARTICLE XVI PENSION

16.1 The Employer agrees to participate in a program to provide a pension for each full time employee covered by this Agreement who has six (6) months or more seniority with the Employer.

16.2 To fulfill this obligation, the Employer shall contribute to the Western Pennsylvania Teamsters and Employer Pension Fund the following sum per week for each such employee participating in the Fund prior to August 1, 1993:

Effective June 1, 2016	\$ 99.29 per week
Effective June 1, 2017	\$ 105.25 per week
Effective June 1, 2018	\$ 111.56 per week

The Employer shall contribute to the Western Pennsylvania Teamsters and Employer Pension Fund the following sum per week for employees who began participating in the Fund on or after August 1, 1993:

Effective June 1, 2016	\$ 87.95 per week
Effective June 1, 2017	\$ 93.23 per week
Effective June 1, 2018	\$ 98.82 per week

16.3 The Western Pennsylvania Teamsters and Employers Pension Fund shall be the only pension fund that will be acceptable as fulfillment of the Employer's obligation under this Agreement.

16.4 By execution Of this Agreement, the Employer further agrees to enter into any appropriate trust agreements with the Western Pennsylvania Teamsters and Employers Pension Fund as may be necessary for the administration of the Fund, and to designate the Employer Trustees under such agreement, hereby waiving all notice thereof and ratifying all actions already taken or to be taken by such Trustees within the scope of their authority.

16.5 If an employee, for whom a pension payment is required, is absent because of illness or off-the-job injury and notifies the Employer of such absence, the Employer shall continue to make the required contributions for a period of four (4) weeks. If an employee is injured on the job, the Employer shall continue to pay the required contributions until such employee returns to work. However, such contributions shall not be paid for a period of more than six (6) months. If an employee is granted a leave of absence, the Employer shall collect from said employee prior to the leave of absence being effective, sufficient monies to pay the required contributions into the pension plan during the period of absence.

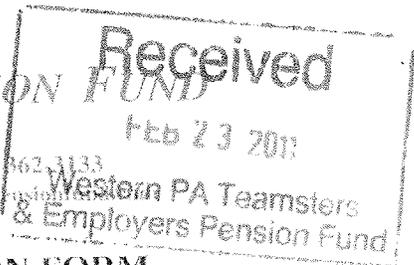
16.6 Contributions to the pension fund must be made for each week for each employee even though such employee may not work a full week.

ARTICLE XVII BEREAVEMENT PAY

17.1 In the event of a death in an employee's immediate family, namely, spouse, child, step children, parent, step parents, brother, sister, mother-in-law, father-in-law or grandchildren an employee shall be paid in full for time lost not to exceed four (4) days. In the event of the death of an employee's grandparent, the employee will be granted two (2) days off with pay to attend the funeral. If an employee needs additional time off, without pay, (up to two additional days, and provided the additional time is requested during the two day bereavement period), he or she will be granted the additional time without discipline.

WESTERN PENNSYLVANIA TEAMSTERS AND EMPLOYERS PENSION FUND

49 AUTO WAY • PITTSBURGH, PA 15206-3663
 (412) 362-4200 • TOLL FREE (800) 362-4201 • FAX (412) 362-3133
 EMAIL: contactus@wpapensionfund.com • WEBSITE: <http://www.wpapensionfund.com>



2010 REHABILITATION PLAN SELECTION FORM

By execution of this form, the undersigned contributing employer and employee bargaining representative (the "Bargaining Parties"), acknowledge their understanding and agree that the annual rate increases owed to the Western Pennsylvania Teamsters and Employers Pension Fund ("Pension Fund") on behalf of employees covered under one or more collective bargaining agreements or participation agreements determine the benefit structure for benefits as described in the Pension Fund's 2010 Rehabilitation Plan.

The Bargaining Parties acknowledge that a copy of the 2010 Rehabilitation Plan has been provided and that they are aware that it sets forth two alternative schedules of contribution and benefit structures, one of which must be selected by the Bargaining Parties when collective bargaining agreements and participation agreements come up for renewal. It also provides for benefit structures which apply in the interim period prior to renewal.

The Bargaining Parties acknowledge their understanding that the "**Preferred Schedule**" will be deemed to apply to pending agreements which already have a six (6%) percent annual contribution increase in place by the end of 2011. For existing agreements which do not provide for a six (6%) percent contribution increase beginning in 2011, if checked below, the Bargaining Parties hereby agree that the contribution obligation stated in the applicable collective bargaining agreement is amended, effective on the anniversary date of that agreement, by such amount as is necessary to comply with the annual six (6%) percent requirement set forth in the 2010 Rehabilitation Plan. (Note that if compliance with the Rehabilitation Plan is delayed past 2011, greater contribution increases will be required for selection of the Preferred Schedule in 2012 (8%), 2013 (10%) or 2014 (12%).)

If checked below, the Bargaining Parties can select the "**Default Schedule**"; however, if selected in 2011, annual contribution increases of eight (8%) are required. Greater increases apply if the Default Schedule is first selected or imposed in 2012 (11%), 2013 (14%) or 2014 (17%).

The Bargaining Parties may choose to retain an existing contribution structure which does not provide for annual six (6%) percent contribution increases for the remaining term of a pending collective bargaining agreement which does not expire in 2011. However, by indicating "**No Change**" on this form, the Bargaining Parties acknowledge their understanding that the 2010 Rehabilitation Plan provides that for service earned after February 1, 2011, Unit Multipliers will be reduced by 50% until the pending collective bargaining agreement is renewed and one of the applicable schedules is selected or imposed.

Verification of Contribution and Benefit Structures			
COMPANY NAME:	Public Parking Auth. Of Pittsburgh		
LOCAL UNION:	926		
Fund Account Number(s)		PREFERRED SCHEDULE	DEFAULT SCHEDULE
2056, 2057, 2115, 2116, 2149, 2152, 2167, 2168, 2192, 2193, 2227, 2228, 2266, 2267, 2268, 2269, 2270, 2271, 2272, 2274, 2316, 2322, 2323, 2324		<input checked="" type="checkbox"/>	<input type="checkbox"/>
		NO CHANGE	
		<input type="checkbox"/>	<input type="checkbox"/>

✱

Dated: 2/11/2011 By: [REDACTED] Employee
 By: [REDACTED] Employee Representative

7/03/2018 W. PA TEAMSTERS AND EMPLOYERS PENSION FUND F1 = COMMENTS
 EMPR0030 EMPLOYER MASTER FILE - INQUIRY ENT. = CONTINUE

2056 00:00/0000
 926 2056
 PUBLIC PARKING AUTH OF PGH
 CHRIS MOORE
 (WOOD ALLIES GARAGE UNIT)
 232 BLVD OF THE ALLIES
 PITTSBURGH PA 15222-0
 412 560 2545

STATUS: A
 ADMN. CODE: P PREFERRED
 PENALTY: 0.00
 PROJ. AMT: 0.00
 E/R DATE: 5 1 2018
 E/R REASON: 0
 ENTRY DATE: 10 1 1994
 CONTRACT: Y
 CONTRACT TYPE: N
 CONTRACT CODE: R
 PART. AGREEMENT: Y
 CONTRACT CODE: N

MEM	EFF. DATE	EXP. DATE	EXP. RATE	E/R RATE	PL. RATE
6	1 2015	5 31 2016	93.6700	93.6700	
6	1 2016	5 31 2017	99.2900	99.2900	
6	1 2017	5 31 2018	105.2500	105.2500	
6	1 2018	5 31 2019	111.5600	111.5600	

2115 2266 2274
 2149 2268
 2167 2270
 2192 2323
 2227 2322

7/03/2018 W. PA TEAMSTERS AND EMPLOYERS PENSION FUND F1 = COMMENTS
 EMPR0030 EMPLOYER MASTER FILE - INQUIRY ENT. = CONTINUE

2057 00 00 0000
 926 2056
 PUBLIC PARKING AUTH NEW HIRES
 CHRIS MOORE
 (WOOD ALLIES GARAGE UNIT)
 232 BLVD OF THE ALLIES
 PITTSBURGH PA 15222-0
 412 560 2545

STATION CODE: A
 AGGRAVATION CODE: P PREFERRED
 PENALTY RATE: 0.00
 PROM. RATE: 0.00
 L/R DATE: 5/1/2018
 L/R REASON: 4
 ENTRY DATE: 10/1/1994
 EXPIRATION: 0 0 0
 L/A RATE: Y
 RECEIVED EMP: N
 PART. AGGRAVATION: Y

AMOUNT	EFF. DATE	EXP. DATE	TYP	E/R RATE	S/P RATE
	6/1/2015	5/31/2016	W	82.9700	82.9700
	6/1/2016	5/31/2017	W	87.9500	87.9500
	6/1/2017	5/31/2018	W	93.2300	93.2300
	6/1/2018	5/31/2019	W	98.8200	98.8200

2272 2152 2271
 2116 2324 2316
 2168 2267
 2228 2269

2164

August 25, 2016 Meeting

Company's Last and Final Offer to Teamsters Local 926
Exchange and Garage

Contract Term: 2 years, will expire March 31, 2018

Wages: \$0.50 increase per year

Healthcare: Employee pays 21% of premium and Company will pay all future increases

Retro Pay for this Year's Increase: The Company will pay each employee in the bargaining unit \$1000 signing bonus in lieu of paying retroactive wages

Vacation: The Company will buy back one week of vacation from all senior members, making their total vacation amount 4 weeks. For this buy back, Company will pay a one-time \$1500 payment for each senior employee.

Overtime: Company has discretion to outsource towing in lieu of paying overtime.



Regional HR Manager

UNION SIGNATURE


Business Representative

Received
JUL 29 2013
Western PA Teamsters
& Employers Pension Fund

WESTERN PENNSYLVANIA TEAMSTERS AND EMPLOYERS PENSION FUND

49 AUTO WAY • PITTSBURGH, PA 15206-3663

(412) 362-4200 • TOLL FREE (800) 362-4201 • Fax (412) 362-3133
EMAIL: contactus@wpapensionfund.com • WEBSITE: <http://www.wpapensionfund.com>

2010 REHABILITATION PLAN SELECTION FORM

By execution of this form, the undersigned contributing employer and employee bargaining representative (the "Bargaining Parties"), acknowledge their understanding and agree that the annual rate increases owed to the Western Pennsylvania Teamsters and Employers Pension Fund ("Pension Fund") on behalf of employees covered under one or more collective bargaining agreements or participation agreements determine the benefit structure for benefits as described in the Pension Fund's 2010 Rehabilitation Plan.

The Bargaining Parties acknowledge that a copy of the 2010 Rehabilitation Plan has been provided and that they are aware that it sets forth two alternative schedules of contribution and benefit structures, one of which must be selected by the Bargaining Parties when collective bargaining agreements and participation agreements come up for renewal. It also provides for benefit structures which apply in the interim period prior to renewal.

The Bargaining Parties acknowledge their understanding that the "Preferred Schedule" will be deemed to apply to pending agreements which already have a six (6%) percent annual contribution increase in place by the end of 2011. For existing agreements which do not provide for a six (6%) percent contribution increase beginning in 2011, if checked below, the Bargaining Parties hereby agree that the contribution obligation stated in the applicable collective bargaining agreement is amended, effective on the anniversary date of that agreement, by such amount as is necessary to comply with the annual six (6%) percent requirement set forth in the 2010 Rehabilitation Plan. (Note that if compliance with the Rehabilitation Plan is delayed past 2011, greater contribution increases will be required for selection of the Preferred Schedule in 2012 (8%), 2013 (10%) or 2014 (12%).)

If checked below, the Bargaining Parties can select the "Default Schedule"; however, if selected in 2011, annual contribution increases of eight (8%) are required. Greater increases apply if the Default Schedule is first selected or imposed in 2012 (11%), 2013 (14%) or 2014 (17%).

The Bargaining Parties may choose to retain an existing contribution structure which does not provide for annual six (6%) percent contribution increases for the remaining term of a pending collective bargaining agreement which does not expire in 2011. However, by indicating "No Change" on this form, the Bargaining Parties acknowledge their understanding that the 2010 Rehabilitation Plan provides that for service earned after February 1, 2011, Unit Multipliers will be reduced by 50% until the pending collective bargaining agreement is renewed and one of the applicable schedules is selected or imposed.

Verification of Contribution and Benefit Structures				
COMPANY NAME:	Pittsburgh Transportation			
LOCAL UNION:	Local 926			
Fund Account Number(s)				
2164 and 2165		PREFERRED SCHEDULE	DEFAULT SCHEDULE	NO CHANGE

Dated: 7-29-13 By: Yellow Cab / Pittsburgh Transportation Employer
By: 

7/03/2018
EMPR0030

W. PA TEAMSTERS AND EMPLOYERS PENSION FUND
EMPLOYER MASTER FILE - INQUIRY

F1 = COMMENTS
ENT. = CONTINUE

EMPLOYEE ID: 2164
EMPLOYEE GROUP: 926
EMPLOYEE NAME: PITTSBURGH TRANSPORTATION
EMPLOYEE TITLE: ACCT PAYABLE - SUSAN
EMPLOYEE ADDRESS: YELLOW CAB (TELEPHONE)
ATTN: SUSAN JACKSON
1825 LIVERPOOL STREET
PITTSBURGH PA 15233 0
PHONE: 412.322.8789

JOIN DATE: 00/00/0000
FEDERAL ID:
STATUS CODE: A
AGREEMENT CODE: P PREFERRED

PROBATION: 0.00
PROBATION DATE: 0.00
L/R DATE: 5 1 2018
L/R REASON: 2
ENTRY DATE: 4 1 1999
EXPIRATION: 0 0 0
CONTRACT Y/N: Y
MSTR. FREIGHT: N
PART. AGREEMENT: 2257 - Y/N. N

CURRENT: 0.00
TOTAL: 0.00
OVERPAID: 0.00
ADJUST: 0.00

EMP ID	EMP DATE	END DATE	TYPE	E/R RATE	C/P RATE
2164	4 1 2015	3 31 2016	W	129.8000	129.8000
2164	4 1 2016	3 31 2017	W	137.5900	137.5900
2164	4 1 2017	3 31 2018	W	145.8500	145.8500
2164	4 1 2018	3 31 2019	W	154.6000	154.6000

2165

August 25, 2016 Meeting

Company's Last and Final Offer to Teamsters Local 926
Exchange and Garage

Contract Term: 2 years, will expire March 31, 2018

Wages: \$0.50 increase per year

Healthcare: Employee pays 21% of premium and Company will pay all future increases

Retro Pay for this Year's Increase: The Company will pay each employee in the bargaining unit \$1000 signing bonus in lieu of paying retroactive wages

Vacation: The Company will buy back one week of vacation from all senior members, making their total vacation amount 4 weeks. For this buy back, Company will pay a one-time \$1500 payment for each senior employee.

Overtime: Company has discretion to outsource towing in lieu of paying overtime.

COMPANY SIGNATURE



Regional HR Manager

UNION SIGNATURE



Business Representative

Received
JUL 29 2013
Western PA Teamsters
& Employers Pension Fund

WESTERN PENNSYLVANIA TEAMSTERS AND EMPLOYERS PENSION FUND

49 AUTO WAY • PITTSBURGH, PA 15206-3663
(412) 362-4200 • TOLL FREE (800) 362-4201 • FAX (412) 362-3133
EMAIL: contactus@wpapensionfund.com • WEBSITE: <http://www.wpapensionfund.com>

2010 REHABILITATION PLAN SELECTION FORM

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The Bargaining Parties acknowledge that a copy of the 2010 Rehabilitation Plan has been provided and that they are aware that it sets forth two alternative schedules of contribution and benefit structures, one of which must be selected by the Bargaining Parties when collective bargaining agreements and participation agreements come up for renewal. It also provides for benefit structures which apply in the interim period prior to renewal.

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Verification of Contribution and Benefit Structures				
COMPANY NAME:	Pittsburgh Transportation			
LOCAL UNION:	Local 926			
Fund Account Number(s)				
2164 and 2165		PREFERRED SCHEDULE	DEFAULT SCHEDULE	NO CHANGE

Dated: 7-29-13 By: Yellow Cab / Pittsburgh Transportation Employer
By: 

2165 00 00 0000
 926 2164
 PITTSBURGH TRANSPORTATION
 ACCT PAYABLE - SUSAN
 YELLOW CAB (GARAGE)
 ATTN: SUSAN JACKSON
 1825 LIVERPOOL STREET
 PITTSBURGH PA 15233 0
 412,322 8789

PENALTY AMT 0.00
 PROM. NOTE 0.00
 L/R DATE 5/ 1 2018
 L/R REASON 4
 ENTRY DATE 4/ 1 1999
 EXPIRATION 0/ 0 0
 CONTRACT YEAR Y
 N

DATE	DESCRIPTION	AMOUNT	DATE	W	AMOUNT	AMOUNT
4 1 2015		152.5600	3 31 2016	W	152.5600	152.5600
4 1 2016		161.7200	3 31 2017	W	161.7200	161.7200
4 1 2017		171.4200	3 31 2018	W	171.4200	171.4200
4 1 2018		181.7100	3 31 2019	W	181.7100	181.7100

Agreement by and between

Teamsters Local Union No. 205
Representing

The Clerical and Dispatch Employees
of Plum Borough

and

Plum Borough

January 1, 2017 through December 31, 2020

The Borough agrees that the Union reserves the right to challenge any final decision rendered by the Borough with respect to the eligibility or termination of benefits under this policy.

The Borough agrees to provide a Long Term Disability benefit equal to sixty-six and two-thirds (66 2/3%) percent of salary consistent with the Borough's insurance policy currently in effect.

10. Dental and Eye Care Program: The Employer agrees to provide and pay for the Dental and Eye Care Program under Employer-Teamsters Local 205 Welfare Fund for employees and his or her dependents.

Effective January 1, 2017, total cost of this benefit shall be sixty-five (\$65.00) dollars per employee. The premium will not increase to more than sixty-nine (\$69.00) dollars through the term of this Agreement

11. Life Insurance: Employees shall be covered by the following Life Insurance Program at the sole cost of the Employer:

Life Insurance during employment	\$40,000.00
Accidental Death/Dismemberment Insurance	\$80,000.00
Group Life Insurance coverage at retirement	\$10,000.00

(Employee must have fifteen (15) years of service to qualify for Group Life Insurance coverage at retirement.)

ARTICLE NO. 15 – PENSION

The Borough agrees to make contributions to the Teamster Pension Plan consistent with the "Preferred Option" as follows:

Effective January 1, 2017, the Employer is to pay one hundred twenty-six dollars and twenty-four cents (\$126.24) per week per employee into the Western Pennsylvania Teamsters and Employers Pension Fund.

Effective January 1, 2018, the Employer is to pay one hundred thirty-three dollars and eighty-two cents (\$133.82) per week per employee into the Western Pennsylvania Teamsters and Employers Pension Fund.

Effective January 1, 2019, the Employer is to pay one hundred forty-one dollars and eighty-five cents (\$141.85) per week per employee into the Western Pennsylvania Teamsters and Employers Pension Fund.

Effective January 1, 2020, the Employer is to pay one hundred fifty dollars and thirty-six cents (\$150.36) per week per employee into the Western Pennsylvania Teamsters and Employers Pension Fund.

Total cost of pension contributions to be paid by the Employer.

Upon request, all employees enrolled in the Principal Financial Group plan shall be reimbursed as per the plan document.

ARTICLE NO. 16 - SICK LEAVE

- A. All full time employees as of January 1 of each year are to receive six (6) sick leave days per year accumulative up to sixty (60) days. Any full time employee absent one (1), two (2) or three (3) days will not need a doctor's certificate in order to be paid. However, any employee off work four (4) days or more must supply the Employer with a doctor's certificate in order to be paid for all lost time. The Employer agrees to "buy back" all unused sick leave days accumulated at one hundred percent (100%) of full time employee's regular rate of pay, at retirement, death or during the first payroll in December of a given year.
- B. All full time employees who have accumulated sick leave days as of the date of this Agreement shall continue to be entitled to them and shall use same before using sick leave days for the current year.
- C. The Borough agrees to pay, by separate check, for all buy-back of sick days.
- D. Employees are permitted to split two (2) sick days into hours (for dental or doctor appointments).

ARTICLE NO. 17 - NON-DISCRIMINATION

- A. The Employer and the Union agree not to discriminate against any individual with respect to hiring, compensation and other terms and conditions of employment because of such individual's race, color, religion, sex, national origin. The parties further agree that there will not be discrimination against disabled persons who are qualified to perform, with or without reasonable accommodations, bargaining unit work.
- B. Whenever any words are used in this Agreement in the masculine gender, they shall be construed as though they were also used in the feminine gender.
- C. Family And Medical Leave- Any employee who has successfully completed their probationary period and who has been employed for one thousand two hundred fifty (1250) hours during the twelve (12) months prior to the requested leave is eligible for up to twelve (12) work weeks of unpaid leave during a calendar year for the following reasons:
 - 1. Due to the birth of a child of the employee and in order to care for such child, within one (1) year after such birth.
 - 2. In order to care for the spouse, child, or parent of the employee, if such person has a serious health condition. Medical certification may be required for such serious health condition.

*WESTERN PENNSYLVANIA
TEAMSTERS AND EMPLOYERS PENSION FUND*

Received
NOV 17 2011
Western PA Teamsters
& Employers Pension Fund

49 AUCHWAY • PITTSBURGH, PA 15206-3663
(412) 362-4200 • TOLL FREE (800) 362-4201 • FAX (412) 362-3133
CONTACTUS@WPPENSIONFUND.COM • WEBSITE: HTTP://WWW.WPPENSIONFUND.COM

2010 REHABILITATION PLAN SELECTION FORM

By execution of this form, the undersigned contributing employer and employee bargaining representative (the "Bargaining Parties"), acknowledge their understanding and agree that the annual rate increases owed to the Western Pennsylvania Teamsters and Employers Pension Fund ("Pension Fund") on behalf of employees covered under one or more collective bargaining agreements or participation agreements determine the benefit structure for benefits as described in the Pension Fund's 2010 Rehabilitation Plan.

The Bargaining Parties acknowledge that a copy of the 2010 Rehabilitation Plan has been provided and that they are aware that it sets forth two alternative schedules of contribution and benefit structures, one of which must be selected by the Bargaining Parties when collective bargaining agreements and participation agreements come up for renewal. It also provides for benefit structures which apply in the interim period prior to renewal.

The Bargaining Parties acknowledge their understanding that the "Preferred Schedule" will be deemed to apply to pending agreements which already have a six (6%) percent annual contribution increase in place by the end of 2011. For existing agreements which do not provide for a six (6%) percent contribution increase beginning in 2011, if checked below, the Bargaining Parties hereby agree that the contribution obligation stated in the applicable collective bargaining agreement is amended, effective on the anniversary date of that agreement, by such amount as is necessary to comply with the annual six (6%) percent requirement set forth in the 2010 Rehabilitation Plan. *(Note that if compliance with the Rehabilitation Plan is delayed past 2011, greater contribution increases will be required for selection of the Preferred Schedule in 2012 (8%), 2013 (10%) or 2014 (12%).)*

If checked below, the Bargaining Parties can select the "Default Schedule": however, if selected in 2011, annual contribution increases of eight (8%) are required. Greater increases apply if the Default Schedule is first selected or imposed in 2012 (11%), 2013 (14%) or 2014 (17%).

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Verification of Contribution and Benefit Structures				
COMPANY NAME:	Plum Boro Clerical & Dispatch			
LOCAL UNION:	205			
Fund Account Number(s)		PREFERRED SCHEDULE	DEFAULT SCHEDULE	NO CHANGE
2222		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Dated: 11-14-11 By: Employer By: Employee Representative

7/03/2018
EMPR0030

W. PA TEAMSTERS AND EMPLOYERS PENSION FUND
EMPLOYER MASTER FILE - INQUIRY

F1 = COMMENTS
ENT.= CONTINUE

2222
205 1667
PLUM BORO CLERICAL & DISPATCH
SUSAN EXT. 4402
4575 NEW TEXAS ROAD

00 00 0000
A
P PREFERRED

PITTSBURGH PA 15239 0
412 795 6800

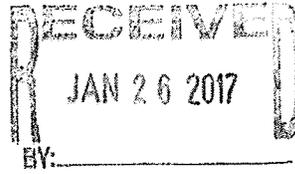
PENALTY BAL 0.00
FROM NOTIF 0.00
L/E DATE 5 1 2018
L/E BEGINS 3
E/RY DATE 1 1 2002
EXPIRATION 0 0 0
Y
PARTICIPANT Y

0.00 0.00
0.00 0.00

DATE	EMP DATE	EXP DATE	TYPE	E/R RATE	S/R RATE
	1 1 2017	12 31 2017	W	126.2500	126.2500
	1 1 2018	12 31 2018	W	133.8200	133.8200
	1 1 2019	12 31 2019	W	141.8500	141.8500
	1 1 2020	12 31 2020	W	150.3600	150.3600



1661



PLUM BOROUGH MUNICIPAL EMPLOYEES

JANUARY 1, 2016

TO

DECEMBER 31, 2019

dollars through the term of this Agreement

- 6 Life Insurance: Employees shall be covered by the following Life Insurance Program at the sole cost of the Employer:

Life Insurance during employment	\$40,000.00
Accidental Death/Dismemberment Insurance	\$80,000.00
Group Life Insurance coverage at retirement	\$10,000.00

ARTICLE NO. 15 - PENSION

The Borough agrees to make contributions to the Teamster Pension Plan consistent with the "Preferred Option" as follows:

Effective January 1, 201⁵~~6~~, the Employer is to pay one hundred forty-eight dollars and fifty-four cents (\$148.54) per week per employee into the Western Pennsylvania Teamsters and Employers Pension Fund.

Effective January 1, 201⁶~~7~~, the Employer is to pay one hundred fifty-seven dollars and forty-five cents (\$157.45) per week per employee into the Western Pennsylvania Teamsters and Employers Pension Fund.

Effective January 1, 201⁷~~8~~, the Employer is to pay one hundred sixty-six dollars and ninety cents (\$166.90) per week per employee into the Western Pennsylvania Teamsters and Employers Pension Fund.

Effective January 1, 201⁸~~9~~, the Employer is to pay one hundred seventy-six dollars and ninety-one cents (\$176.91) per week per employee into the Western Pennsylvania Teamsters and Employers Pension Fund.

In the event the U.S. Pension Protection Act of 2006 allows, the pension contribution shall revert back to the level of one hundred and eleven (\$111.00) dollars per week, per employee.

Total cost of pension contributions to be paid by the Employer.

The Employer agrees, at the option of the employees, to set up a Defined Contribution plan, similar to the Employer's administrative employees. This plan would require the same contributions by the Employer as listed above but would be administered by the Employer. This plan has no relation to the Teamster's pension plan herein described in other paragraphs.

ARTICLE NO. 16 - SICK LEAVE

- A. All employees as of January 1 of each year are to receive six (6) sick leave days per

NOV 21 2011

WESTERN PENNSYLVANIA
TEAMSTERS AND EMPLOYERS PENSION FUND

49 AUTO WAY • PITTSBURGH, PA 15206-3663
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2010 REHABILITATION PLAN SELECTION FORM

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Verification of Contribution and Benefit Structure			
COMPANY NAME:	Plum Boro Public Works Dept.		
LOCAL UNION:	205		
Fund Account Number(s)			
1667	PREFERRED SCHEDULE	DEFAULT SCHEDULE	NO CHANGE
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Dated: 11-17-11 By: BOROUGH OF PLUM Employer

By: [Redacted] Employee Representative Michael A. Thomas Borough Manager

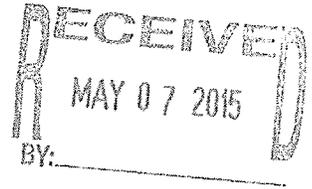
1667
 205 GROUP 1667
 PLUM BORO PUBLIC WORKS DEPT
 SUSAN - EXT. 4402
 BOROUGH OF PLUM - FINANCE
 ATTN: ACCOUNTS PAYABLE
 4575 NEW TEXAS ROAD
 PITTSBURGH PA 15239 0
 412.795.6800

VOL. CATH. DATE 00/00/0000
 FEDERAL T. ID.
 STATUS CODES A
 AGREEMENT CODE P PREFERRED
 DUALITY RATE 0.00
 PROF. RATE 0.00
 E/R DATE 5 1 2018
 E/R REASON 22
 ENTRY DATE 4/15/1976
 EXEMPTION 0 0 0
 CONTRACT Y/N Y
 RETIRE/PROG/CHG N
 PART. AGREEMENT Y 2007-2018 R
 N

0.00 0.00
 0.00 0.00

YR	CRS DATE	EXP DATE	TYP	E/R RATE	S/P RATE
1	1 2016	12 31 2016	W	157.4500	157.4500
1	1 2017	12 31 2017	W	166.9000	166.9000
1	1 2018	12 31 2018	W	176.9100	176.9100
1	1 2019	12 31 2019	W	187.5300	187.5300

2201



AGREEMENT

BETWEEN

PSSI STADIUM CORP. (PSSI)

AND

**TURNPIKE, SOFT DRINK, BEER DISTRIBUTOR
AND MISCELLANEOUS SERVICE EMPLOYEES,
LOCAL UNION No. 250**

MARCH 1, 2015

TO

FEBRUARY 28, 2020

ARTICLE 17 - BEREAVEMENT DAYS

All employees having a death in the immediate family shall receive pay for only five (5) working days lost. Immediate family shall consist of father, mother, sister, brother, wife or husband, and children. In the event of death of mother-in-law or father-in-law of the employee, leave of absence shall be limited to three (3) working days off with pay. If there are any non-working days involved during this bereavement period, the employee shall then receive pay only for the regular working days involved. In the event of death of a brother-in-law or sister-in-law of the employee, leave of absence shall be limited to one (1) day off with pay.

ARTICLE 18 - JURY DUTY LEAVE

An employee who is called for jury services shall be excused from work for the days on which jury duty is served. Such employee shall receive for each day of service on which the employee otherwise would have worked the difference between the payments received for such service and eight (8) times the employee's regular straight time hourly rate.

ARTICLE 19 - PENSION

1. Consistent with Section 4 below, the Employer covenants and agrees to pay into the Western Pennsylvania Teamsters and Employers Pension Fund for each Full Time Regular Employee the following amounts per week on and after the specific dates:

<u>Effective</u> <u>3-1-2015</u>	<u>Effective</u> <u>3-1-2016</u>	<u>Effective</u> <u>3-1-2017</u>	<u>Effective</u> <u>3-1-2018</u>	<u>Effective</u> <u>3-1-2019</u>
\$180.67	\$191.51	\$203.00	\$215.18	\$228.10

2. The Employer's only obligation with respect to pensions for employees subject to this Agreement shall be to make the contributions set forth in this Article. The Employer shall have no obligation to supervise the investment or disbursement of assets in the Fund. Pension benefits to employees shall be only as provided from such Fund and the Employer shall have no obligation to provide pension benefits to employees if the assets of the Fund are insufficient to provide employees the full amount of the pension benefits to which the employees are entitled under the provisions of the plan established with such Fund if for any other reason they fail to receive such benefits.

3. Contribution toward the pension fund shall commence at the beginning of the calendar month following each newly hired individual's employment as a Full Time Regular Employee. Such contributions shall cease at the end of the calendar month following the calendar month in which the employee last performs work as a Full Time Regular Employee.

4. The Union and the Employer recognize (and intended) that the Western Pennsylvania Teamsters and Employers Pension Fund ("Pension Fund") accepted the Employer's agreed-to contributions from March 1, 2010 through March 1, 2014, which were made in accordance with the 2010 Rehabilitation Plan and, for such periods, consistent with a 6% preferred schedule. The Union and the Employer similarly intend that the Pension Fund accepts the Employer's agreed-to contributions for the five-year period beginning March 1, 2015 through

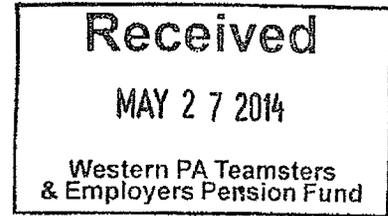
2201 VOL. MFR. DATE: 00/00/0000
 250 OPEN 2201 FEDERAL I.D. NO.
 PSSI STADIUM CORP STATUS CODE: A
 BARB AGPMNT. CODE: P PREFERRED
 900 ART ROONEY AVENUE
 PENALTY AMT 0.00
 PUNISH. AMT 0.00
 PITTSBURGH PA 15212 0 E/S DATE: 5 1 2018
 412.697.7153 L/R REASON 5
 ENTRY DATE 0 0 0
 EXPIRATION: 7 1 2001
 CONTRACT? Y/N: Y
 MSTR. PREFERENCE: S CODE: CODE:
 PART. AGREEMENT: 2007 Y/N: N

CURR. INT TOTAL
 0.00 0.00
 0.00 0.00

PRD	EFF. DATE	EXP. DATE	TYPE	R/W RATE	S/P RATE
	3 1 2015	2 29 2016	W	180.6700	180.6700
	3 1 2016	2 28 2017	W	191.5100	191.5100
	3 1 2017	2 28 2018	W	203.0000	203.0000
	3 1 2018	2 28 2019	W	215.1800	215.1800

No SELECTION

1351/110



COLLECTIVE BARGAINING AGREEMENT

BY AND BETWEEN

**THE ASPHALT PLANT DIVISION
OF THE QUAKER SALES CORPORATION
OF BARNESBORO AND JOHNSTOWN, PA**

AND

**TEAMSTERS, CHAUFFEURS, WAREHOUSEMEN AND HELPERS
LOCAL UNION NO. 110
EBENSBURG, PA**



ARTICLE VI – PENSION

Section 1.

(a) Effective May 1, 2014, the Employer shall contribute to the Western Pennsylvania Teamsters and Employers Pension Fund the amount designated by the Fund but no more than \$152.76 per week for each employee covered by this Agreement who has been on the payroll for thirty (30) days or more.

(b) Effective May 1, 2015, the Employer shall contribute to the Western Pennsylvania Teamsters and Employers Pension Fund the amount designated by the Fund but no more than \$161.93 per week for each employee covered by this Agreement who has been on the payroll for thirty (30) days or more.

(c) Effective May 1, 2016, the Employer shall contribute to the Western Pennsylvania Teamsters and Employers Pension Fund the amount designated by the Fund but no more than the sum of \$171.64 per week for each employee covered by this Agreement who has been on the payroll for thirty (30) days or more.

(d) This fund shall be the Western Pennsylvania Teamsters and Employer Pension Fund. There shall be no other pension fund under this Agreement.

Section 2. By the execution of this Agreement, the Employer authorizes the Employers Associations which are parties hereto to enter into an appropriate trust agreement necessary for the administration of such fund, and to designate the Employer Trustees under such agreement, hereby waiving all notice thereof and ratifying all actions already taken or to be taken by such Trustees within the scope of their authority.

Section 3. The Employer is required to make contributions under Section 1 of this Article only for employees who perform sixteen (16) or more hours of work in a calendar week. No contributions need be made for any employee for any week in which that employee performs less than sixteen (16) hours of work.

Section 4. If an employee is granted a leave of absence and desires that contributions be made to the fund on his behalf during that leave, the Employer shall collect from said employee prior to the leave of absence being effective sufficient monies to pay the required contributions into the pension fund during the period of absence.

Section 5. There shall be no deduction from equipment rental of owner-operators by virtue of the contributions made to the Pension Fund regardless of whether the

WESTERN PENNSYLVANIA TEAMSTERS AND EMPLOYERS PENSION FUND

49 AUTO WAY • PITTSBURGH, PA 15206-3663
 (412) 362-4200 • TOLL FREE (800) 362-4201 • FAX (412) 362-3133
 EMAIL: contactus@wpapensionfund.com • WEBSITE: http://www.wpapensionfund.com

2010 REHABILITATION PLAN SELECTION FORM

By execution of this form, the undersigned contributing employer and employee bargaining representative (the "Bargaining Parties"), acknowledge their understanding and agree that the annual rate increases owed to the Western Pennsylvania Teamsters and Employers Pension Fund ("Pension Fund") on behalf of employees covered under one or more collective bargaining agreements or participation agreements determine the benefit structure for benefits as described in the Pension Fund's 2010 Rehabilitation Plan.

The Bargaining Parties acknowledge that a copy of the 2010 Rehabilitation Plan has been provided and that they are aware that it sets forth two alternative schedules of contribution and benefit structures, one of which must be selected by the Bargaining Parties when collective bargaining agreements and participation agreements come up for renewal. It also provides for benefit structures which apply in the interim period prior to renewal.

The Bargaining Parties acknowledge their understanding that the "**Preferred Schedule**" will be deemed to apply to pending agreements which already have a six (6%) percent annual contribution increase in place by the end of 2011. For existing agreements which do not provide for a six (6%) percent contribution increase beginning in 2011, if checked below, the Bargaining Parties hereby agree that the contribution obligation stated in the applicable collective bargaining agreement is amended, effective on the anniversary date of that agreement, by such amount as is necessary to comply with the annual six (6%) percent requirement set forth in the 2010 Rehabilitation Plan. (Note that if compliance with the Rehabilitation Plan is delayed past 2011, greater contribution increases will be required for selection of the Preferred Schedule in 2012 (8%), 2013 (10%) or 2014 (12%).)

If checked below, the Bargaining Parties can select the "**Default Schedule**"; however, if selected in 2011, annual contribution increases of eight (8%) are required. Greater increases apply if the Default Schedule is first selected or imposed in 2012 (11%), 2013 (14%) or 2014 (17%).

The Bargaining Parties may choose to retain an existing contribution structure which does not provide for annual six (6%) percent contribution increases for the remaining term of a pending collective bargaining agreement which does not expire in 2011. However, by indicating "**No Change**" on this form, the Bargaining Parties acknowledge their understanding that the 2010 Rehabilitation Plan provides that for service earned after February 1, 2011, Unit Multipliers will be reduced by 50% until the pending collective bargaining agreement is renewed and one of the applicable schedules is selected or imposed.

Verification of Contribution and Benefit Structures			
COMPANY NAME:	Quaker Sales Corp.		
LOCAL UNION:	110		
Fund Account Number(s)		PREFERRED SCHEDULE	DEFAULT SCHEDULE
1351		<input checked="" type="checkbox"/>	<input type="checkbox"/>
			NO CHANGE
			<input type="checkbox"/>

Dated: 4-1-11

By: [Redacted]
 Employer
Quaker Sales Corp.

By: [Redacted]
 Employee Representative
[Redacted] # 110

1351
 110 1351
 QUAKER SALES CORP
 DEBBIE X101
 R COOPER AVENUE
 PO BOX 880

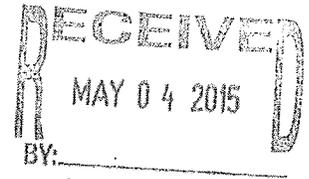
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YR	MO	DATE	W	AMOUNT	TOTAL	
5	1	2015	4 30 2016	W	161.9300	161.9300
5	1	2016	4 30 2017	W	171.6400	171.6400
5	1	2017	4 30 2018	W	181.9400	181.9400
5	1	2018	4 30 2019	W	192.8600	192.8600

R & L DEVELOPMENT COMPANY contract 4-1-15 thru 3-31-20



COLLECTIVE BARGAINING AGREEMENT

BY AND BETWEEN

INTERNATIONAL BROTHERHOOD OF TEAMSTERS

LOCAL UNIONS NO. 110 & 538

AND

R & L DEVELOPMENT COMPANY

**FOR WORK AT THE HOMER CITY, CONEMAUGH, SEWARD AND
KEYSTONE POWER PLANTS**



R & L DEVELOPMENT COMPANY contract 4-1-15 thru 3-31-20

Plan AA \$1,220.00/month = \$141.00/ month deficit contribution

Plan A \$1,015.00/month = \$64.00/month excess contribution

Plan B \$895.00/month = \$184.00/month excess contribution

***Trustees of the Teamsters' Industry Welfare Fund have the authority and discretion to change Plan costs.**

If the cost of the Plan elected by the Employee exceeds the negotiated contract contribution for the coverage month, the difference will be deducted from the Employees' pay through an authorized payroll deduction, included with the Employer contract contribution amount, and remitted with the required Fund report to the Teamsters Contribution Account to provide the correct Plan cost for coverage for that month. If the cost of the Plan selected is less than the negotiated contract contribution remitted by the Employer for the coverage month, the excess contribution will be "banked" by the Teamsters' Industry Welfare Fund for use by the Employee for future Fund benefit coverage.

Section 7. Opt-out of the negotiated health plan with proof of coverage and compliance with the Fund Trust agreement will be discussed with the Company on a case by case basis and documented by a signed Memorandum of Understanding ("MOU") between the Company, Union, and Employee.

ARTICLE VIII: PENSION:

The following schedule of contribution rates is provided to comply with the Pension Fund's Rehabilitation Plan and includes weekly contributions increasing 6% annually pursuant to the Pension Fund's Preferred Schedule.

Effective April 1, 2015 the Company shall contribute to the Western Pennsylvania Teamsters & Employers Pension Fund the sum of \$227.50 per week for each employee covered by this Agreement, provided the employee has met the requirements of Article V Seniority, and been placed on the regular seniority list.

Effective April 1, 2016 the weekly contribution shall be increased to \$241.15 per week, per employee for each employee covered by this Agreement provided the employee has met the requirements of Article V - Seniority, and been placed on the regular seniority list.

Effective April 1, 2017 the weekly contribution shall be increased to \$255.62 per week, per employee for each employee covered by this Agreement provided the employee has meet the requirements of Article V - Seniority, and been placed on the regular seniority list.

R & L DEVELOPMENT COMPANY contract 4-1-15 thru 3-31-20

Effective April 1, 2018 the weekly contribution shall be increased to \$270.96 per week, per employee for each employee covered by this Agreement provided the employee has meet the requirements of Article V - Seniority, and been placed on the regular seniority list.

Effective April 1, 2019 the weekly contribution shall be increased to \$287.21 per week, Per employee for each employee covered by this Agreement provided the employee has meet the requirements of Article V - Seniority, and been placed on the regular seniority list.

Contributions to the Pension Fund must be made for each regular employee who works sixteen (16) hours in anyone (1) week.

This Fund shall be the Western Pennsylvania Teamsters & Employers Pension Fund. There shall be no other pension fund under this Agreement for operations under this contract or for operations to which the Employers who are party to this contract are also parties.

ARTICLE IX: DELINQUENCIES IN HEALTH & WELFARE OR PENSION PAYMENTS:

Notwithstanding anything herein contained, it is agreed that in the event any Company is delinquent at the end of a period in the payment of his contribution to the Health & Welfare or Pension Fund or Funds created under this Agreement, in accordance with the rules and regulations of the Trustees of such Funds, after the proper official of the Local Union has given seventy-two (72) hours notice to the Company of such delinquency in Health & Welfare or Pension payments, the employees or their representatives shall have the right to take such action as may be necessary until such delinquent payments are made, and it is further agreed that in the event such action is taken, the Company shall be responsible to the employees for losses resulting therefrom.

ARTICLE X: VACATIONS

Section 1. All employees covered by this Agreement shall receive vacation as follows:
One (1) year of service One (1) week vacation with pay

Section 1a. All employees covered by this Agreement may take unpaid vacations as follows:

Three (3) years of service one (1) week unpaid vacation

Eight (8) years of service two (2) weeks of unpaid vacation

Section 2. After one (1) year of service, any employee discharged or terminated for any reason shall receive vacation with pay on a prorated basis.

4/1/11
 Not returned
 1/10/12

Received
 JAN 3 2011
 Western PA Teamsters
 & Employers Pension Fund

WESTERN PENNSYLVANIA
 TEAMSTERS AND EMPLOYERS PENSION FUND

49 AULD WAY • PITTSBURGH, PA 15206-3663
 (412) 362-4200 • TOLL FREE (800) 362-4201 • FAX (412) 362-4202
 Email: contactus@wppensionfund.com • WEBSITE: http://www.wppensionfund.com

2010 REHABILITATION PLAN SELECTION FORM

By execution of this form, the undersigned contributing employer and employee bargaining representative (the "Bargaining Parties"), acknowledge their understanding and agree that the annual rate increases owed to the Western Pennsylvania Teamsters and Employers Pension Fund ("Pension Fund") on behalf of employees covered under one or more collective bargaining agreements or participation agreements determine the benefit structure for benefits as described in the Pension Fund's 2010 Rehabilitation Plan.

The Bargaining Parties acknowledge that a copy of the 2010 Rehabilitation Plan has been provided and that they are aware that it sets forth two alternative schedules of contribution and benefit structures, one of which must be selected by the Bargaining Parties when collective bargaining agreements and participation agreements come up for renewal. It also provides for benefit structures which apply in the interim period prior to renewal.

The Bargaining Parties acknowledge their understanding that the "Preferred Schedule" will be deemed to apply to pending agreements which already have a six (6%) percent annual contribution increase in place by the end of 2011. For existing agreements which do not provide for a six (6%) percent contribution increase beginning in 2011, if checked below, the Bargaining Parties hereby agree that the contribution obligation stated in the applicable collective bargaining agreement is amended, effective on the anniversary date of that agreement, by such amount as is necessary to comply with the annual six (6%) percent requirement set forth in the 2010 Rehabilitation Plan. (Note that if compliance with the Rehabilitation Plan is delayed past 2011 greater contribution increases will be required for selection of the Preferred Schedule in 2012 (8%), 2013 (10%) or 2014 (12%).)

If checked below, the Bargaining Parties can select the "Default Schedule"; however, if selected in 2011, annual contribution increases of eight (8%) are required. Greater increases apply if the Default Schedule is first selected or imposed in 2012 (11%), 2013 (14%) or 2014 (17%).

The Bargaining Parties may choose to retain an existing contribution structure which does not provide for annual six (6%) percent contribution increases for the remaining term of a pending collective bargaining agreement which does not expire in 2011. However, by indicating "No Change" on this form, the Bargaining Parties acknowledge their understanding that the 2010 Rehabilitation Plan provides that for service earned after February 7, 2011, Unit Multipliers will be reduced by 10% until the pending collective bargaining agreement is renewed and one of the applicable schedules is selected or imposed.

Verification of Contribution and Benefit Structures				
COMPANY NAME:	R&L Development			
LOCAL UNION:	110, 538			
Fund Account Number(s)		PREFERRED SCHEDULE	DEFAULT SCHEDULE	NO CHANGE
1531, 2058		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Date: 1-12-11 By: R&L Development Employer Company By: [Redacted] Employee Representative VP/CEO

2/2/11

1531
 EMPLOYER ID: 110 GROUP: 1531
 EMPLOYER NAME: R & L DEVELOPMENT-HOMER CITY
 CONTACT NAME: SUE RIDILLA
 ADDRESS: CONEMAUGH - SEWARD
 PO BOX 529
 NEW ALEXANDRIA PA 15670 0
 724 668 2223
 FEDERAL TAX ID: 00/00/0000
 STATUS CODE: A
 AGREEMENT CODE: P PREFERRED
 PENALTY RATE: 0.00
 PENSION RATE: 0.00
 EXP. DATE: 5 1 2018
 EMP. DATE: 4 1 1973
 CONTRACT TYPE: Y
 MSTR. FREIGHT: N EXC. FROM: N
 PART. AGREEMENT: N 7257 - N/A N



NR	EFF. DATE	EXP. DATE	TYP	R/R RATE	S/P RATE
4	1 2016	3 31 2017	W	241.1500	241.1500
4	1 2017	3 31 2018	W	255.6200	255.6200
4	1 2018	3 31 2019	W	270.9600	270.9600
4	1 2019	3 31 2020	W	287.2100	287.2100

1687

AGREEMENT BETWEEN

Teamsters Local Union No. 205

Representing

SCHNEIDER'S DAIRY - CLERICAL EMPLOYEES

AND

Schneider's Dairy

Effective March 1, 2017 through February 28, 2020

The Employer shall continue the office clerical employees in the Employees and Teamsters Local 205 Welfare Fund-Dental and Eye Program to cover the employee and his/her dependents. The total cost will be paid for by the Employer.

The Employer agrees to enroll and make monthly contributions to the Employer-Teamsters Local 205 Legal Service Program. The total cost to be paid by the Employer.

Employees on approved sick and accident leave of absence shall continue to be covered by Hospitalization, Life Insurance, Dental and Eye Care Program for a period of one (1) year. An employee on sick leave due to injury on the job shall have continued coverage for employee and family under the program for a maximum period of two years.

Any employee electing not to apply for the Keystone Blue provision provided for in this agreement, shall receive a medical allowance of \$4,200.00 per contract year (\$350.00 per month), the same level as the Drivers and Plant Employees during the life of this agreement. If the Drivers and Plant Employees receive an increase in their future negotiations, the same shall apply to this Unit. The employee can elect to take this monthly or a lump sum payment at the end of each contract year.

Health Insurance Employee Contribution: Two hundred dollars (\$200.00) per month, per employee on a pre-tax basis. Employees on single coverage only shall contribute one hundred dollars (\$100.00) per month.

ARTICLE NO. 14 - BEREAVEMENT PAY

When an employee is absent due to death in his immediate family, he shall be paid a maximum of three days' earnings at his regular rate. A member of the immediate family shall be considered as Mother, Father, Wife, Husband, Children, Foster Parents, Brothers, Sisters, mother-in-law or father-in-law.

In the event of death of a Grandparent, the employee shall be paid for the absence on the day of the funeral.

The intent of this provision shall be to protect an employee against a loss in earnings.

ARTICLE NO. 15 - JURY DUTY PAY

Employees called for jury duty will be compensated by the employer for the difference between their regular pay and jury pay, it being agreed that the employee report for work when the Court is not in session.

ARTICLE NO. 16 - PENSION PLAN

New employees shall not participate in the pension plan and no contributions shall be made into the fund on their behalf for the first full year of their employment.

Effective March 1, 2017, for each week an employee works the employer agrees to pay one

hundred forty-four dollars and thirty-five cents (\$144.35) per week into the Western Pennsylvania Teamsters & Employers Pension Fund. Effective March 1, 2018, the employer agrees to pay one hundred fifty-three dollars and one cent (\$153.01) per week into the Western Pennsylvania Teamsters & Employers Pension Fund. Effective March 1, 2019, the employer agrees to pay one hundred sixty-two dollars and nineteen cents (\$162.19) per week into the fund for each week an employee works. New employees shall not participate in the pension plan and no contributions shall be made into the fund on their behalf for the first full year of their employment.

ARTICLE NO. 17 - SEVERANCE PAY

A. Purpose - The purpose of the Company's severance pay plan is to assist financially an employee whose employment is terminated by action of the company through no fault of the employee or who is not eligible for other specified benefits.

B. Eligibility - Any regular full time employee whose employment is permanently terminated for the reasons listed below shall be eligible for severance pay in accordance with the schedule in Section D, except where an employee's employment is continued by the new employer in case of sale, merger or consolidation:

- (1) Elimination of Jobs;
- (2) Consolidation or mergers;
- (3) Abandonment of plans; or
- (4) Technological changes

C. An employee will not be eligible for severance pay if his employment is terminated for any one or a combination of the following reasons:

- (1) Layoff of less than six months due to seasonal schedule reductions;
- (2) Layoff as the result of an act of God, or National War Emergency;
- (3) A strike or picketing causing a temporary cessation of work;
- (4) Dismissal for cause;
- (5) Resignation or refusal of job reassignment;
- (6) Retirement;
- (7) Death; or
- (8) Military service or other approved leave of absence.

D. Schedules and Calculations of Payment - Severance Pay for an eligible employee shall be paid as follows:

Minimum of five years service, three weeks, fifteen days' pay. One (1) day's pay for each four (4) months' service. Maximum severance pay of ten (10) weeks. (50 days' pay)

The amount payable will be calculated on the basis of the employee's straight time hourly or daily rate. Payments shall be made no sooner than ninety (90) days after the date of termination and shall be made weekly until the full amount is paid.

If an employee is rehired within two years of the date on which his employment was

7/03/2018
EMPR0030

W. PA TEAMSTERS AND EMPLOYERS PENSION FUND
EMPLOYER MASTER FILE - INQUIRY

F1 = COMMENTS
ENT. = CONTINUE

EMPLOYEE ID: 1687
 EMPLOYER ID: 205 GROUP: 5013
 EMPLOYEE NAME: SCHNEIDER'S DAIRY CLERICAL
 EMPLOYEE NAME: DAVID SCHNEIDER - ACCT
 EMPLOYEE NAME: DAVID SCHNEIDER
 ADDRESS: 726 FRANK STREET
 CITY: PITTSBURGH PA 15227 0
 ZIP: 412 881 3525
 FEDERAL ID: 00 00 0000
 STATUS CODE: A
 AGENT CODE: P PREFERRED
 PENALTY RATE: 0.00
 PROB. HOYE: 0.00
 HIR DATE: 5 1 2018
 HIR REASON: 5
 ENTRY DATE: 3 1 1977
 EXPIRATION: 0 0 0
 CONTRACT TYPE: Y
 RET. TYPE: N (CY) R
 PART. ADMIN: Y 2017 N

CLEARLY TOTAL
 OVERPAYMENT: 0.00 0.00
 UNDERPAYMENT: 0.00 0.00

HRP	HIR DATE	EXP DATE	TYP	HR RATE	S/P DATE
3	1 2016	2 28 2017	W	136.1800	136.1800
3	1 2017	2 28 2018	W	144.3500	144.3500
3	1 2018	2 28 2019	W	153.0100	153.0100
3	1 2019	2 29 2020	W	162.1900	162.1900

No SELECTION

LABOR AGREEMENT

BETWEEN

SCHNEIDER'S DAIRY

AND

GENERAL TEAMSTERS

UNION LOCAL #585

10/1/2016 THROUGH 9/30/2019



ARTICLE XIV-HOLIDAYS

All employees shall be paid holiday pay for Memorial Day, the Fourth of July, Thanksgiving Day, Christmas Day and New Year's Day, provided they meet the following eligibility rules: The employee must have worked the last scheduled work day prior to and the next scheduled work day after such holiday. Also, if the employee is scheduled to work on a holiday, he must work to receive holiday pay.

Effective 1993, employees shall receive holiday pay for Labor Day and effective in 1995, employees shall be paid for Easter Sunday. All holidays will be paid at one and one-half (1 1/2) times the employee's hourly rate of pay for all hours worked on the holiday, plus eight (8) hours holiday pay.

An employee is entitled to leave work and receive his/her eight (8) or ten (10) hours when finished with their routes on the following days: New Year's Eve, Good Friday, Memorial Day, Fourth of July, Labor Day, Day after Thanksgiving, Christmas Eve, and the Employee's Birthday, Spouse's Birthday and the employee's Wedding Anniversary. The Company is still entitled to merge routes which has been done in the past and if the employee abuses this policy by not doing the job to the customer's satisfaction, they will lose their right to leave early for one year.

ARTICLE XV - PENSION

The Employer shall contribute to the Western Pennsylvania Teamsters & Employers Pension Fund per week for each employee covered by this Agreement who has been on the payroll one hundred twenty (120) calendar days in accordance with the schedule below:

October 1, 2016	\$146.45 per week per employee
October 1, 2017	\$155.24 per week per employee
October 1, 2018	\$164.55 per week per employee

There shall be no other pension fund under this contract for operations under this contract or for operations to which Employers who are party to this contract are also parties.

By the execution of this Agreement, the Employer authorizes the Employer Associations which are parties hereto to enter into appropriate trust agreements necessary for the administration of such Fund, and to designate the Employer Trustees under such agreement, hereby waiving all notice thereof and ratifying all actions already taken or to be taken by such Trustees within the scope of their authority.

If the employee is absent because of illness, on the job injury, or off the job injury and notifies the Employer of such absence, the Employer shall continue to make the

required contributions until such employee returns to work; however, such contributions shall not be paid for a period of more than twelve (12) months, unless the employee is working at the facility in any capacity.

If an employee is granted a leave of absence, the Employer shall collect from said employee, prior to the leave of absence being effective, sufficient monies to pay the required contributions into the Pension Fund during the period of absence.

Contributions to the Pension Fund must be made for each week for each regular employee, even though such employee may work only part-time under the provisions of this contract, including weeks where work is performed for the Employer, but not under the provisions of this contract, and although contributions may be made for those weeks into some other pension fund. Employees who work either temporarily or in cases of emergency under this terms of this contract shall not be covered by the provisions of this paragraph.

ARTICLE XVI

This Agreement shall be in effect from October 1, 2016 through September 30, 2019 and shall continue in effect from year to year thereafter unless either party to this agreement shall give sixty (60) days written notice to the other party prior to the expiration date hereof, that is desires to change, modify, or terminate this Agreement Terms of any agreement reached shall be retroactive to the above given termination date.

IN WITNESS WHEREOF, the Schneiders Dairy Company and General Teamsters Local #585, affiliated with the International Brotherhood of Teamsters, Chauffeurs, Warehousemen, and Helpers of America, have caused this Agreement to be executed by the hands of its proper officers and its seal to be affixed hereto.

FOR THE UNION

[Redacted signature block]

William Rhoades, President

[Redacted signature block]

[Redacted signature block]

Eric Allen

[Redacted signature block]

David Schneider

[Redacted signature block]

William Schneider

7/03/2018
EMPR0030

W. PA TEAMSTERS AND EMPLOYERS PENSION FUND
EMPLOYER MASTER FILE - INQUIRY

F1 = COMMENTS
ENT.= CONTINUE

1661
585 5013
SCHNEIDER'S DAIRY
DAVID SCHNEIDER
DAVID SCHNEIDER
726 FRANK STREET

PITTSBURGH PA 15227 0
412 881 3525

00 00 0000
FEDERAL PLAN
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5 1/1976
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Y
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Y N

No
SELECTION

COMPLET TOTAL
0.00 0.00
0.00 0.00

DATE	START	END	WEEK	AMOUNT	TOTAL
10	1 2014	9 30 2015	W	130.3400	130.3400
10	1 2015	9 30 2016	W	138.1600	138.1600
10	1 2016	9 30 2017	W	146.4500	146.4500
10	1 2017	9 30 2018	W	155.2400	155.2400

5013

5082

Agreement By and Between

Service Personnel And Employees Of
The Dairy Industry,

TEAMSTER LOCAL UNION NO. 205

Representing the Production, Distribution and Maintenance Employees
and

SCHNEIDER DAIRY, INC.

Effective

MAY 1, 2016 thru APRIL 30, 2019

EXHIBIT A

PENSION PLAN

THIS AGREEMENT is part of a Collective Bargaining Agreement between the Employer and the Union and is intended to encompass pension matters and shall be designated as Exhibit "A" of such Collective Bargaining Agreement which expires April 30, 2019.

The Employer and Union agree that pension benefits for its employees covered by the Collective Bargaining Agreement shall be provided by the Western Pennsylvania Teamsters and Employers Pension Fund (Western Pennsylvania Fund) in accordance with the terms thereof including the terms of the amended Articles of Merger between the Trustees of Greater Pittsburgh Dairy Industry Pension Fund and the Trustees of the Western Pennsylvania Teamsters and Employers Pension Fund as revised and adopted in 1982. There shall be no other pension plan under this Contract or for operations under this Contract.

The Employer shall make the "preferred" contributions to the Western Pennsylvania Pension Fund in accordance with the schedule below for each employee covered by this Agreement who has been on the payroll one hundred fifty (150) days or more.

	<u>8 Years of Service</u> (Upper Tier)	<u>Less than 8 Years of Service</u> (Lower Tier)
May 1, 2016	\$165.97 per week	\$109.24 per week
May 1, 2017	\$175.93 per week	\$115.79 per week
May 1, 2018	\$186.49 per week	\$122.74 per week

Employees who attain eight (8) years of continuous employment during the term hereof shall receive the applicable contribution rate at the time thereof. Effective May 1, 2011, any employee who has been employed after May 1, 1984, and has worked previously under a Local 205 Dairy Contract at the then maximum pension contribution rate shall have his pension contribution increased to the upper tier level at age 55 or May 1, 2011, whichever is later.

By the execution of this Agreement, the Employer authorizes the Western Pennsylvania Motor Carriers Association, Inc., to enter into appropriate Trust Agreement necessary for the administration of the Western Pennsylvania Fund, and to designate the Employer Trustees under such agreement, hereby waiving all notice thereof and ratifying all actions already taken or to be taken by such Trustees within the scope of their authority.

If an employee is absent because of illness or off-the-job injury and notifies the Employer of such absence, the Employer shall continue to make the required contributions for a period of four (4) weeks. If an employee is injured on-the-job, the Employer shall continue to pay the required contributions until such employee returns to work; however, such contributions shall not be paid for a period of more than twelve (12) months which shall be calculated from the date of the

7/03/2018
EMPR0030

W. PA TEAMSTERS AND EMPLOYERS PENSION FUND
EMPLOYER MASTER FILE - INQUIRY

F1 = COMMENTS
ENT. = CONTINUE

5013
205 5013
SCHNEIDER'S DAIRY
DAVID SCHNEIDER - ACCT
DAVID SCHNEIDER
726 FRANK STREET

PITTSBURGH PA 15227 0
412 881 3525

00 00 0000
A
P PREFERRED

PENALTY DAY 0.00
PRON. NOTE 0.00
L/R DATE 5 1 2018
L/R REASON 44
ENTRY DATE 5 1 1980
EXPIRATION 0 0 0
Y
N R
Y N

0.00 0.00
0.00 0.00

YR	MO	DATE	YR	MO	DATE	W	AMOUNT	AMOUNT
5	1	2015	4	30	2016	W	156.5700	156.5700
5	1	2016	4	30	2017	W	165.9700	165.9700
5	1	2017	4	30	2018	W	175.9300	175.9300
5	1	2018	4	30	2019	W	186.4900	186.4900

No
SELECTION

7/03/2018
EMPR0030

W. PA TEAMSTERS AND EMPLOYERS PENSION FUND
EMPLOYER MASTER FILE - INQUIRY

F1 = COMMENTS
ENT. = CONTINUE

*No
SELECTION*

EMPLOYEE ID:	5022	EMPLOYEE NAME:	SCHNEIDER'S DAIRY	STATUS CODE:	A
EMPLOYEE ID:	205	EMPLOYEE NAME:	DAVID SCHNEIDER - ACCT	AGREEMENT CODE:	P
EMPLOYEE ID:		EMPLOYEE NAME:	DAVID SCHNEIDER		
EMPLOYEE ID:		EMPLOYEE NAME:	726 FRANK STREET		
EMPLOYEE ID:		EMPLOYEE NAME:	PITTSBURGH PA 15227 0		
EMPLOYEE ID:		EMPLOYEE NAME:	412 881 3525		
				PENALTY BAL	0.00
				PROF. NOTE	0.00
				E/R DATE	5 1 2018
				E/R REASON	20
				ENTRY DATE	5 1 1984
				EXPIRATION	0 0 0
				CONTRACT YEAR	Y
				REST. BELIEF	N
				PART. GRANT	Y

	0.00	0.00
	0.00	0.00

AGE	ENT. DATE	EXP. DATE	TYPE	E/R RATE	S/P RATE
1	5 1 2015	4 30 2016	W	103.0500	103.0500
2	5 1 2016	4 30 2017	W	109.2400	109.2400
3	5 1 2017	4 30 2018	W	115.7900	115.7900
4	5 1 2018	4 30 2019	W	122.7400	122.7400

September 1, 2017 thru August 31, 2020

AGREEMENT

By and between

**SCHOLASTIC TECHNICAL SERVICE EMPLOYEES
AND PROFESSIONAL AND OFFICE EMPLOYEES,
LOCAL UNION NO. 8**

And

**AUTOMOTIVE CHAUFFEURS, PARTS, GARAGE, OFFICE
CLERICAL,
AIRLINE, HEALTHCARE, PERTOLEUM INDUSTRY, BAKERY &
INDUSTRIAL WORKERS WITHIN WESTERN PA AND JOINT
COUNCIL #40
LOCAL UNION NO. 926**

INDEX

1

24 mos. to 36 mos.	95%
36 mos.	100%

B. New employees shall receive a minimum of \$400.00 per week.

ARTICLE X
PENSION

10.1 The Employer agrees to contribute to the Western PA Teamsters and Employers Pension Fund the following schedule of contributions for each regular employee covered by this Agreement.

Effective: March 1, 2005 and each March 1 thereafter, the weekly contribution rate for pension shall be highest weekly rate being paid within the jurisdiction of Joint Council #40.

The Employer agrees that it will enter into appropriate trust agreements necessary to become a member of such Fund, for the administration of such Fund, and to designate the Employer Trustees under such agreement, hereby waiving all notice thereof and ratifying all actions already taken or to be taken by such Trustees within the scope of their authority.

After the Employer becomes a member of the fund, it is agreed that if an employee is absent because of illness or off-the-job injury and notifies the Employer of such absence, the Employer shall continue to make the required contributions for a period of four (4) weeks. If an employee is injured on-the-job, the Employer shall continue to pay the required contributions until such employee returns to work, however, such contributions shall not be paid for a period of more than nine (9) months. If an employee is granted a leave of absence, the Employer shall collect from said employee, prior to the leave of absence being effective, sufficient monies to pay the required contributions into the Pension Fund during the period of absence.

ARTICLE 11
HEALTH AND WELFARE

11.1 The Employer agrees to contribute to an employee's Health and Welfare Fund the entire cost of whatever contribution rate is required to maintain Plan 9F, for the term of this Agreement. The name of such Health and Welfare Fund shall be the Western Pennsylvania Teamsters and Mother Carriers Welfare fund and the conditions of its administration shall be attached to and be part of this Agreement.

Effective: March 1, 2005 and each March 1 thereafter the Employer shall contribute the required contribution, as billed, by the Fund to provide Plan 9F coverage to its full-time office clerical employee(s).

2/28/2018		W. PA TEAMSTERS AND EMPLOYERS PENSION FUND		F1 = COMMENTS	
EMPR0030		EMPLOYER MASTER FILE - INQUIRY		ENT. = CONTINUE	
2006		2006		00 00 0000	
926					
LOCAL UNION NO 8				A	
NANCY ZIMMERMAN				P	PREFERRED
CLERICAL					
2225 HIGH TECH ROAD					0.00
					0.00
STATE COLLEGE PA 16803	0			1 1 2018	
(800)537 1757					1
				3 1 1992	
				0 0 0	
				Y	
	0.00	0.00		Y	R
	0.00	0.00		Y	Y
3 1 2014	2 28 2015	W	408.0000	408.0000	
3 1 2015	2 29 2016	W	432.4800	432.4800	
3 1 2016	2 28 2017	W	458.4200	458.4200	
3 1 2017	2 28 2018	W	502.4600	502.4600	
3-1-2018	2-28-2019			4532.60	

FOLLOWS
LPS

NEEDS ✓ UM

**WESTERN PENNSYLVANIA
TEAMSTERS AND EMPLOYERS PENSION FUND**

49 AUTO WAY • PITTSBURGH, PA 15206 • 3663
(412) 362-4200 • TOLL FREE (800) 362-4201 • FAX (412) 362-3133
EMAIL: contactus@wpapensionfund.com • WEBSITE: <http://www.wpapensionfund.com>

2017 REHABILITATION PLAN SELECTION FORM

February 9, 2017

Preferred Schedule Option Selection:

Now therefore with the intent to be legally bound, Schwebel Baking Co. of Pa and Teamsters Local Union No. 926, acknowledge their understanding and agree to select the Preferred Schedule and the annual rate increases as described in the Pension Fund's Rehabilitation Plan to the extent set forth below.

In conjunction with this selection, 2017 Pension Fund account contributions to the Fund will be paid by the Company:

Participants with more than five (5) years of service, Account No. 8025:

Effective January 1, 2017 - \$249.59/week

Participants with less than five (5) years of service, Account No. 2298:

Effective January 1, 2017 - \$75.17/week

In addition, the Company agrees to pay the Preferred Schedule level of annual Pension Fund rate increases during the term of the current open pending CBA effective each annual CBA anniversary.

Such Preferred Schedule will continue for the balance of the to be agreed term of the Pending CBA.

Except as required by law, nothing in this agreement will bind the parties to the selection of this Preferred Schedule beyond the term of the current open pending. The Bargaining Parties will incorporate by reference this selection into the agreed pending CBA.

Dated: _____ By: _____ By: _____
Employer Employee Representative

NOV 10 2011

WESTERN PENNSYLVANIA TEAMSTERS AND EMPLOYERS PENSION FUND

49 AUTO WAY • PITTSBURGH, PA 15206-3663
 (412) 362-4200 • TOLL FREE (800) 362-4201 • FAX (412) 362-3133
 EMAIL: contactus@wpapensionfund.com • WEBSITE: http://www.wpapensionfund.com

Received
 DEC 27 2011
 Western PA Teamsters
 and Employers Pension Fund

2010 REHABILITATION PLAN SELECTION FORM

By execution of this form, the undersigned contributing employer and employee bargaining representative (the "Bargaining Parties"), acknowledge their understanding and agree that the annual rate increases owed to the Western Pennsylvania Teamsters and Employers Pension Fund ("Pension Fund") on behalf of employees covered under one or more collective bargaining agreements or participation agreements determine the benefit structure for benefits as described in the Pension Fund's 2010 Rehabilitation Plan.

The Bargaining Parties acknowledge that a copy of the 2010 Rehabilitation Plan has been provided and that they are aware that it sets forth two alternative schedules of contribution and benefit structures, one of which must be selected by the Bargaining Parties when collective bargaining agreements and participation agreements come up for renewal. It also provides for benefit structures which apply in the interim period prior to renewal.

The Bargaining Parties acknowledge their understanding that the "Preferred Schedule" will be deemed to apply to pending agreements which already have a six (6%) percent annual contribution increase in place by the end of 2011. For existing agreements which do not provide for a six (6%) percent contribution increase beginning in 2011, if checked below, the Bargaining Parties hereby agree that the contribution obligation stated in the applicable collective bargaining agreement is amended, effective on the anniversary date of that agreement, by such amount as is necessary to comply with the annual six (6%) percent requirement set forth in the 2010 Rehabilitation Plan. *(Note that if compliance with the Rehabilitation Plan is delayed past 2011, greater contribution increases will be required for selection of the Preferred Schedule in 2012 (8%), 2013 (10%) or 2014 (12%).)*

If checked below, the Bargaining Parties can select the "Default Schedule"; however, if selected in 2011, annual contribution increases of eight (8%) are required. Greater increases apply if the Default Schedule is first selected or imposed in 2012 (11%), 2013 (14%) or 2014 (17%).

The Bargaining Parties may choose to retain an existing contribution structure which does not provide for annual six (6%) percent contribution increases for the remaining term of a pending collective bargaining agreement which does not expire in 2011. However, by indicating "No Change" on this form, the Bargaining Parties acknowledge their understanding that the 2010 Rehabilitation Plan provides that for service earned after February 1, 2011, Unit Multipliers will be reduced by 50% until the pending collective bargaining agreement is renewed and one of the applicable schedules is selected or imposed.

Verification of Contribution and Benefit Structures			
COMPANY NAME:	Schwebel Baking Co.		
LOCAL UNION:	926		
Fund Account Number(s)			
2298, 8025, 8026	PREFERRED SCHEDULE	DEFAULT SCHEDULE	NO CHANGE
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Dated: November 7, 2011 By: [Redacted]
 Employer

By: [Redacted]

2298 00 00 0000
 926 8025
 SCHWEBEL BAKING CO.
 KYM X6005
 HIRED ON/AFTER 4/15/2006
 KYM MCGIVERN
 P O BOX 6013
 YOUNGSTOWN OH 44501 0
 300 783 2860

PENALTY PAY 0.00
 PROM. NOTE 0.00
 L/R DATE: 5/ 1 2018
 L/R SEASONS 8
 ENTRY DATE: 4 15 2006
 LYP/EAT/OP: 0 0 0
 CONTRACT: Y
 RATE: N
 POST: N

DATE	START DATE	END DATE	TYP	EAR RATE	S/P RATE
1	1/ 1/2015	12/ 31/2015	W	66.9100	66.9100
1	1/ 1/2016	12/ 31/2016	W	70.9200	70.9200
1	1/ 1/2017	12/ 31/2017	W	75.1800	75.1800
1	1/ 1/2018	12/ 31/2018	W	79.6900	79.6900

7/03/2018
EMPR0030

W. PA TEAMSTERS AND EMPLOYERS PENSION FUND
EMPLOYER MASTER FILE - INQUIRY

F1 = COMMENTS
ENT. = CONTINUE

8025
926
SCHWEBEL BAKING CO.
KYM X6005
KYM MCGIVERN
P O BOX 6013

YOUNGSTOWN OH 44501 0
330 783 2860

VOL. WORK DATE: 00/00/0000
FEDERAL I.D. NO.
STATUS CODE: A
ASPMNT. CODE: P PREFERRED

MANUAL ADJ. 0.00
FROM ADJ. 0.00
L/R REASON: 5 1 2018
52
ENTRY DATE: 10/1/1978
EXPIRATION: 0 0 0

DEBITED BY: 11/11/11
ENC. PAYMENT ADJUST

CURRENT TOTAL
0.00 0.00
0.00 0.00

CONTRACT Y/N:
PSTR. PRIORITY: N
PART. ADJ. Y/N: Y 2250 - 1/1/18 N

ROW	EXP. DATE	EXP. DATE	W/P	E/P RATE	S/P RATE
1	1 2015	12 31 2015	W	222.1400	222.1400
1	1 2016	12 31 2016	W	235.4700	235.4700
1	1 2017	12 31 2017	W	249.6000	249.6000
1	1 2018	12 31 2018	W	264.5800	264.5800

AGREEMENT

1120
2051

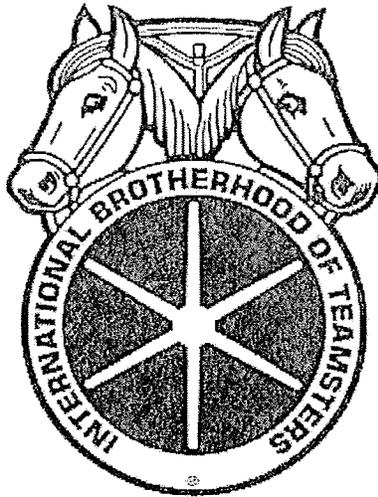
Between

E.E. AUSTIN & SON, INC.
d/b/a AUSTIN ServALL CONCRETE

And

GENERAL TEAMSTERS, LOCAL 397,

An Affiliate of The
INTERNATIONAL BROTHERHOOD OF TEAMSTERS



Effective May 15, 2017 through 11:59 p.m. on May 14, 2022

ARTICLE XVIII
PENSION

(a.) The Employer agrees to pay into the Western Pennsylvania Teamsters and Employers Pension Fund the following:

May 15, 2017	\$180.75 per week
May 15, 2018	\$191.60 per week
May 15, 2019	\$203.10 per week
May 15, 2020	\$215.29 per week
May 15, 2021	\$228.21 per week

(b.) Employees are not eligible for pension plan until seven (7) months of service is completed. Seven (7) months of service means seven (7) months of actual employment and not to include lay-off time.

(c.) Contributions to the Pension Fund must be made for each week for each regular employee providing the employee works at least two (2) days per week, each such day requiring minimum of four (4) hours of work.

(d.) Instead of the provisions of Paragraphs (b.) above, the following applies to any employee hired on or after May 15, 1987:

Employees are not eligible for pension plan until completing twelve (12) months of service and a minimum of nine hundred sixty (960) hours worked. Twelve (12) months of service to mean twelve (12) months of actual employment and not to include lay-off time. In case the employee has not worked nine hundred sixty (960) hours within said twelve (12) month period, his eligibility will begin with the week following the week in which he completes said nine hundred sixty (960) hours after fulfilling the twelve (12) month requirement.

ARTICLE XIX
GENERAL CONDITIONS

Section 1. Lunch Period - An employee must be allowed a thirty (30) minute lunch period between the fourth (4th) and sixth (6th) hour if he desires a lunch period.

Section 2. Employer must provide suitable lavatory, wash-up, and eating area at place of employment.

Section 3. If the Local enters into any agreement with any employer for work in areas covered by this Agreement, or allows an employer to work, upon more favorable terms to

Received
 JAN 05 2011
 Western PA Teamsters
 & Employers Pension Fund

**WESTERN PENNSYLVANIA
 TEAMSTERS AND EMPLOYERS PENSION FUND**

49 ALTO WAY • PITTSBURGH, PA 15206-3663
 (412) 362-4200 • TOLL FREE (800) 362-4201 • FAX (412) 362-3133
 Email: contactus@wppensionfund.com • Website: http://www.wppensionfund.com

RECEIVED
 DEC 27 2010
AUSTIN

2010 REHABILITATION PLAN SELECTION FORM

By execution of this form, the undersigned contributing employer and employee bargaining representative (the "Bargaining Parties"), acknowledge their understanding and agree that the annual rate increases owed to the Western Pennsylvania Teamsters and Employers Pension Fund ("Pension Fund") on behalf of employees covered under one or more collective bargaining agreements or participation agreements determine the benefit structure for benefits as described in the Pension Fund's 2010 Rehabilitation Plan.

The Bargaining Parties acknowledge that a copy of the 2010 Rehabilitation Plan has been provided and that they are aware that it sets forth two alternative schedules of contribution and benefit structures, one of which must be selected by the Bargaining Parties when collective bargaining agreements and participation agreements come up for renewal. It also provides for benefit structures which apply in the interim period prior to renewal.

The Bargaining Parties acknowledge their understanding that the "Preferred Schedule" will be deemed to apply to pending agreements which already have a six (6%) percent annual contribution increase in place by the end of 2011. For existing agreements which do not provide for a six (6%) percent contribution increase beginning in 2011, if checked below, the Bargaining Parties hereby agree that the contribution obligation stated in the applicable collective bargaining agreement is amended, effective on the anniversary date of that agreement, by such amount as is necessary to comply with the annual six (6%) percent requirement set forth in the 2010 Rehabilitation Plan. (Note that if compliance with the Rehabilitation Plan is delayed past 2011, greater contribution increases will be required for selection of the Preferred Schedule in 2012 (8%), 2013 (10%) or 2014 (12%).)

If checked below, the Bargaining Parties can select the "Default Schedule"; however, if selected in 2011, annual contribution increases of eight (8%) are required. Greater increases apply if the Default Schedule is first selected or imposed in 2012 (11%), 2013 (14%) or 2014 (17%).

The Bargaining Parties may choose to retain an existing contribution structure which does not provide for annual six (6%) percent contribution increases for the remaining term of a pending collective bargaining agreement which does not expire in 2011. However, by indicating "No Change" on this form, the Bargaining Parties acknowledge their understanding that the 2010 Rehabilitation Plan provides that for service earned after February 1, 2011, Unit Multipliers will be reduced by 50% until the pending collective bargaining agreement is renewed and one of the applicable schedules is selected or imposed.

Verification of Contribution and Benefit Structures			
COMPANY NAME:	Ready Mixed Concrete Co S & J Trucking		
LOCAL UNION:	110,397		
Fund Account Number(s)		PREFERRED SCHEDULE	DEFAULT SCHEDULE
1120, 2051		<input checked="" type="checkbox"/>	<input type="checkbox"/>
			NO CHANGE

Dated: 1/3/11

By: [Redacted Signature]

Employer
 S & J TRUCKING

By: [Redacted Signature]

Employee Representative
 PRESIDENT

1120
 397 GROUP 1120
 AUSTIN SERVALL CONCRETE
 SARA
 1919 REED STREET
 ERIE PA 16503 0
 814 454 7147
 0.00 0.00
 0.00 0.00
 00 00 0000
 FEDERAL T.D.C.
 STATUS CODE: A X
 AGRMNT CODE: P PREFERRED
 PERSONAL BAL 0.00
 GROUP BAL 0.00
 EXP DATE 5 1 2018
 EXP RATE 15
 ENTRY DATE 5 15 1968
 CONTRACT Y
 Y
 N
 N

EXP DATE	EXP RATE	EXP DATE	EXP RATE	EXP RATE	EXP RATE
5 1 2016	170.5200	4 30 2017	170.5200	170.5200	170.5200
5 1 2017	180.7500	4 30 2018	180.7500	180.7500	180.7500
5 1 2018	191.6000	4 30 2019	191.6000	191.6000	191.6000
5 1 2019	203.1000	4 30 2020	203.1000	203.1000	203.1000

Collective Bargaining Agreement
By and Between

Teamsters Local Union No. 205

AND

**ServiceMaster
Professional Building Maintenance Company**

Effective:
May 1, 2015 - April 30, 2020

B. The Employer shall provide and pay for the following Life Insurance coverage for all regular full-time employees:

Life Insurance	\$15,000
Accidental Death or Dismemberment	\$15,000

C. The Employer shall pay the cost of Sick and Accident Benefits in the amount of one hundred fifty dollars (\$150.00) per week. Such benefits shall be provided through the Employer Teamsters Local 205 Health and Welfare Fund.

D. Any employee off on approved Medical Leave and/or Workers Compensation shall be entitled to all coverages for a period of twelve (12) months. Any employee laid off shall be entitled to benefits for a period of three (3) months, provided such termination is not for proven just cause. Just cause termination shall include the current month only for coverage.

E. The Employer shall provide for each regular full-time employee and their family, Dental and Eye Care coverage administered through the Employer-Teamsters Local 205 Health and Welfare Fund. The Employer shall contribute one hundred percent (100%) of the plan cost.

F. All employees who have Dental and Eye Care coverage elsewhere may opt-out of the Dental and Eye Care Program and the Employer shall pay an additional thirty-five cents (\$.35) per hour in wages to said employee.

ARTICLE NO. 12 - PENSION

Effective May 1, 2003, the Employer agrees to participate in and enroll its employees in the Western Pennsylvania Teamsters and Employers Pension Fund. The Employer shall make the following contributions per week, per employee:

<u>5/1/2015</u>	<u>5/01/2016</u>	<u>5/01/2017</u>	<u>5/01/2018</u>	<u>5/01/2019</u>
\$22.26	\$23.59	\$25.01	\$26.51	\$28.10

*Pension payments shall be retroactive to 5/1/2015

ARTICLE NO. 13 - SICK LEAVE

A. All regular full-time employees with one (1) or more years of service as of the beginning of any contract year shall be entitled to four (4) days of sick leave during the contract year; an employee with less than one (1) year of service shall be entitled to prorated sick leave in said contract year.

All regular part-time employees shall be entitled to fifty (50%) percent of the full-time allocation.

B. Sick days may be accumulated up to ten (10) days. (It is understood that the sick day

2234
 205 2234
 SERVICE MASTER PROF BLDG MNT CO
 RENE (412-372-7771)
 FRANK GIBSON, PRESIDENT
 1330 WALL AVENUE
 PITCAIRN PA 15140 0
 412 373 1440
 00:00 0000
 FEDERAL 301
 STATUS CODE A
 ACCT CODE P PREFERRED
 PRIORITY 0.00
 FROM 0.00
 LTR DATE 5 1 2018
 LTR REASON 12
 ENTRY DATE 5 1 2003
 EXPIRATION 0 0 0
 CONTRACT Y/N Y
 MSTR. PRIORITY N
 PART. ACREDIT Y N

CORP. TOTAL
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 0.00 0.00

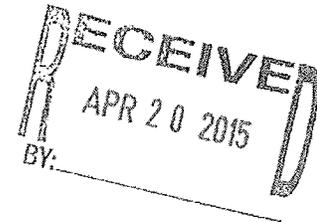
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5 1 2015			4 30 2016	W	22.2600	22.2600
5 1 2016			4 30 2017	W	23.5900	23.5900
5 1 2017			4 30 2018	W	25.0100	25.0100
5 1 2018			4 30 2019	W	26.5100	26.5100

No SELECTION

2244

AGREEMENT

Between



SHENANGO TOWNSHIP

AND

TEAMSTERS LOCAL UNION 261

Affiliated with the
INTERNATIONAL BROTHERHOOD
OF TEAMSTERS

JANUARY 1, 2015 THROUGH DECEMBER 31, 2017

SECTION 5

The Employer shall continue to pay the premium for life insurance at the current level (\$50,000.00) and sickness and accident insurance at the current levels throughout the life of the agreement. This does not include probationary or part-time employees.

SECTION 6

Aflac or a similar policy for short term and/or long term disability will be available for employees to purchase at their expense, through payroll deduction on a pretax basis.

ARTICLE 21

PENSION

SECTION 1

The Employer agrees to participate in the Western Pennsylvania Teamsters and Employers Pension Fund for each eligible employee.

SECTION 2

Eligibility for participation and contribution for full time employees shall begin upon completion of the probationary period.

SECTION 3

The rate of contribution for eligible full time employees shall be as follows:

- Effective 1/1/2015 \$108.14 per week
- Effective 1/1/2016 \$114.63 per week
- Effective 1/1/2017 \$121.51 per week

An eligible full time employee must work at least two (2) days in a week for contributions to be made for the week. Vacation, paid sick days, personal days, jury duty and funeral leave shall be considered as time worked for pension contribution purposes.

SECTION 4

If an eligible employee is absent from work because of a compensable injury or illness, the Employer shall continue to make the required contributions for such an employee for a maximum of twenty-six (26) weeks during such absence. In cases of non-occupational injury or illness, the Employer will continue to make such payments for a maximum of twelve (12) weeks during such absence.

SECTION 5

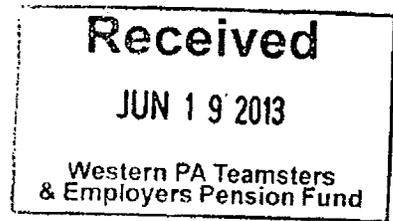
Payments shall be remitted to the Fund by the date specified in the Fund's Trust Agreement.

2244 VOL (WTD) DATE: 00:00:0000
 261 FEDERAL ID:
 SHENANGO TOWNSHIP STATE ID:
 ALBERT BURICK USMMN: 0001
 1000 WILLOWBROOK ROAD
 NEW CASTLE PA 16101-0000
 (724) 658 4460
 PREFERRED
 0.00
 0.00
 5/ 1/ 2018
 4
 1/ 1/ 2003
 0/ 0/ 0
 Y
 Y N

No SELECTION

LINE	DATE	DATE	W	RATE	WAGE
1	1/ 1/ 2017	12/ 31/ 2017	W	121.5100	121.5100
2	1/ 1/ 2018	12/ 31/ 2018	W	128.8000	128.8000
3	1/ 1/ 2019	12/ 31/ 2019	W	136.5300	136.5300
4	1/ 1/ 2020	12/ 31/ 2020	W	144.7200	144.7200

Collective Bargaining
Agreement



STONE & COMPANY
AND
TEAMSTERS LOCAL UNION # 585

May 1, 2013
through
April 30, 2018

ARTICLE 23.00
PENSIONS

23.1 During the term of this Agreement, the Company will tender to the Western Pennsylvania Teamsters and Employers Pension Fund contributions for full time bargaining unit employees subject to the following conditions:

- (a) It is expressly understood and agreed by the parties that the Company's obligation to tender contributions to the Fund for any employee is limited to those employees classified as full time employees who have completed their probationary period, have attained six (6) months of continuous employment, and who are employed in the bargaining unit as evidenced by their placement on the seniority list at the Charleroi facility.
- (b) Weekly contributions shall be tendered for each eligible bargaining unit employee who performs work in the bargaining unit during such week. No weekly contribution will be tendered for any otherwise eligible bargaining unit employee who has not performed work in the bargaining unit for such week.

(C) The weekly contribution for full time bargaining unit employees shall be as follows.

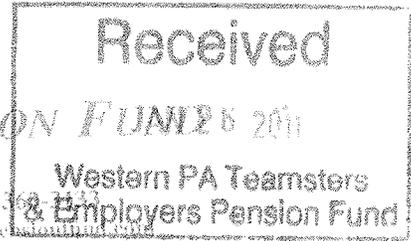
Those employed Prior to May 1, 1997	Those employed after May 1, 1997
2013 = \$88.75 per week	2013 = \$1.40 per hour
2014 = \$94.07 per week	2014 = \$1.60 per hour
2015 = \$102.89 per week	2015 = \$1.80 per hour
2016 = \$112.24 per week	2016 = \$2.00 per hour
2017 = \$122.15 per week	2017 = \$2.20 per hour

All increases are above the 6% increase required under the Western Pennsylvania Teamsters and Employers Pension Fund preferred rehabilitation program.

23.2 If the Company shall fail to tender the required contribution to the Fund when the same shall be due and payable, it shall be considered delinquent and in breach of this Agreement and shall pay, as an additional amount to cover added bookkeeping costs and other incidental expenses, the sum of five (\$5.00) dollars, or five percent (5%) of the amount of Company contributions, whichever is greater, plus interest on the amount of contributions due at the rate of one-half percent (1/2%) per month until paid. In addition, the delinquent Employer shall be liable for the Trustee's other disbursements incurred in the collection of such delinquent contributions.

**WESTERN PENNSYLVANIA
TEAMSTERS AND EMPLOYERS PENSION FUND**

39 ALLO WAY • PITTSBURGH, PA 15206-3663
 (412) 362-4200 • TOLL FREE (800) 362-4201 • FAX (412) 362-4201
 Email: contactus@wpapensionfund.com • Web site: http://www.wpape.com



2010 REHABILITATION PLAN SELECTION FORM

By execution of this form, the undersigned contributing employer and employee bargaining representative (the "Bargaining Parties"), acknowledge their understanding and agree that the annual rate increases owed to the Western Pennsylvania Teamsters and Employers Pension Fund ("Pension Fund") on behalf of employees covered under one or more collective bargaining agreements or participation agreements determine the benefit structure for benefits as described in the Pension Fund's 2010 Rehabilitation Plan.

The Bargaining Parties acknowledge that a copy of the 2010 Rehabilitation Plan has been provided and that they are aware that it sets forth two alternative schedules of contribution and benefit structures, one of which must be selected by the Bargaining Parties when collective bargaining agreements and participation agreements come up for renewal. It also provides for benefit structures which apply in the interim period prior to renewal.

The Bargaining Parties acknowledge their understanding that the "Preferred Schedule" will be deemed to apply to pending agreements which already have a six (6%) percent annual contribution increase in place by the end of 2011. For existing agreements which do not provide for a six (6%) percent contribution increase beginning in 2011, if checked below, the Bargaining Parties hereby agree that the contribution obligation stated in the applicable collective bargaining agreement is amended, effective on the anniversary date of that agreement, by such amount as is necessary to comply with the annual six (6%) percent requirement set forth in the 2010 Rehabilitation Plan. (Note that if compliance with the Rehabilitation Plan is delayed past 2011, greater contribution increases will be required for selection of the Preferred Schedule in 2012 (8%), 2013 (10%) or 2014 (12%).)

If checked below, the Bargaining Parties can select the "Default Schedule"; however, if selected in 2011, annual contribution increases of eight (8%) are required. Greater increases apply if the Default Schedule is first selected or imposed in 2012 (11%), 2013 (14%) or 2014 (17%).

The Bargaining Parties may choose to retain an existing contribution structure which does not provide for annual six (6%) percent contribution increases for the remaining term of a pending collective bargaining agreement which does not expire in 2011. However, by indicating "No Change" on this form, the Bargaining Parties acknowledge their understanding that the 2010 Rehabilitation Plan provides that for service earned after February 1, 2011, Unit Multipliers will be reduced by 50% until the pending collective bargaining agreement is renewed and one of the applicable schedules is selected or imposed.

Verification of Contribution and Benefit Structures			
COMPANY NAME:	Stone & Co.		
LOCAL UNION:	585		
Fund Account Number(s)		PREFERRED SCHEDULE	DEFAULT SCHEDULE
2104, 2213		<input checked="" type="checkbox"/>	<input type="checkbox"/>
		NO CHANGE	<input type="checkbox"/>

Dated: 1/24/11 By: [Redacted] By: [Redacted]
 Employer Employee Representative

2213
 585 2104
 STONE & CO.
 RICK BROADWATER X213
 (HIRED AFTER MAY 1, 1997)
 606 MCCORMICK AVENUE
 P O BOX 776
 CONNELLSVILLE PA 15425 776
 724.628.2200

00 00 0000
 GENERAL YTD
 STATION CODE: A
 AGREEMENT CODE: P PREFERRED
 PENALTY BAL. 0.00
 PROB. NOTE: 0.00
 E/R DATE: 5 1 2018
 E/R REASON: 12
 ENTRY DATE: 5 1 2000
 EXPIRATION: 0 0 0
 CONTRACT Y/N: Y
 PSTR. PENSION: 100% MAP R
 PART. ADJ. Y/N: 2010 - Y/N N

0.00 0.00
 0.00 0.00

EFF. DATE	EXP. DATE	TYE	E/R RATE	S/P RATE
5 1 2000	4 30 2005	W	10.0000	10.0000
5 1 2005	4 30 2006	W	17.0000	17.0000
5 1 2006	4 30 2007	W	22.0000	22.0000
5 1 2007	4 30 2019	W	27.0000	27.0000

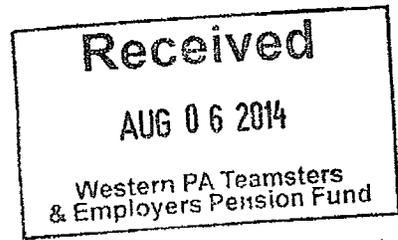
MAY 1, 2018 - \$2.33 PER HOUR

2104
 585 GROUPS 2104
 STONE & COMPANY
 RICK BROADWATER X213
 606 MCCORMICK AVENUE
 P O BOX 776
 CONNELLSVILLE PA 15425 776
 724/628 2200

00:00 0000
 FEDERAL Y. D. L.
 STATUS CODES A
 ACCOUNT CODES P PREFERRED
 0.00
 0.00
 L/R DATE 5 1 2018
 L/R REASON 1
 ENTRY DATE 2 1 1997
 EXPIRATION 0 0 0
 CONTRACT Y/N Y
 MGR. FREIGHT Y
 PART. AGREEMENT Y

CURRENT TOTAL
 0.00 0.00
 0.00 0.00

DATE	TYPE	AMOUNT	BALANCE
5 1 2015	W	102.8900	102.8900
5 1 2016	W	112.2400	112.2400
5 1 2017	W	122.1500	122.1500
5 1 2018	W	129.4800	129.4800



1800

AGREEMENT

Between

T. BRUCE CAMPBELL COMPANY

And

TEAMSTERS LOCAL UNION NO. 261
Affiliated with the International Brotherhood of Teamsters

Effective Date

May 31, 2014 to June 1, 2019

- (B) All employees* covered by this agreement shall be covered in the pension plan of the Western Pennsylvania Teamsters and Employers Pension Fund. The Employer shall contribute \$96.62 per week effective 6/1/14, \$102.42 per week effective 6/1/15, \$108.56 per week effective 6/1/16, \$115.07 per week effective 6/1/17 and \$121.97 per week effective 6/1/18 for each employee.
 - (C) The Health, Welfare and Pension contribution for new employees will start the first of the month following their completion of their probationary period.
 - (D) If an employee is absent because of illness or off-the-job injury and notifies the employer of such absence, the employer shall continue to make the required contribution for a period of three (3) months. If an employee is injured on the job, the employer shall continue to pay the required contributions until such employee returns to work; however, such contributions shall not be paid for a period of more than twelve (12) months for Health, Welfare and Pension.
 - (E) Notwithstanding anything herein contained, it is agreed that in the event any employer is delinquent at the end of a period in the payment of his contributions to the Health and Welfare Fund, or funds created under this contract, in accordance with the rules and regulations of the trustees of such funds, the employees or their representative shall have the right to take such action as they deem necessary until such delinquent payments are made, and it is further agreed that in the event such action is taken, the employer shall be responsible to the employee for losses resulting therefrom.
- (*) See Memorandum of Understanding – PENSION.

ARTICLE XII

ENTRY INTO ARMED FORCES

- (A) Seniority of any employee who may be drafted under the present conscription bill, or voluntarily enlists in the Armed Forces for the United States, shall continue to accrue during the period of such service. Such employees shall be reinstated with full seniority if he applies for such reinstatement within ninety (90) days after discharge from such military service.
- (B) When an employee applies for reinstatement on the seniority list and is found to have been incapacitated to such a degree that prevents him from substantially performing his former duties, but is not totally disabled, the union committee, in cooperation with the employer, will attempt to provide a position in the terminal suitable to his impaired capacity.

*No
SELECTION*

EMPLOYER ID: 1800 VOL. (MTH. DATE): 00 00 0000
 EMPLOYEE ID: 261 (MTH. DATE): 1800
 EMPLOYER NAME: T BRUCE CAMPBELL COMPANY FEDERAL I.D. #:
 EMPLOYEE NAME: MARY ELLEN STATUS CODE: A
 ADDRESS: BOX 607 AGENT CODE: P PREFERRED
 CITY: WEST MIDDLESEX PA 16159 0 FINANCIAL STATE: 0.00
 ZIP: 724.528.9961 PROF. STATE: 0.00
 U.S. DATE: 5 1 2018
 U.S. REASON: 1
 ENTRY DATE: 1 1 1980
 EXPIRATION: 0 0 0
 CONTRACT TYPE: Y
 MSTR. PREFERRED: N ESC. PLAN: N
 PART. ADMIN. CODE: Y 0000 0000 N

EMP ID	EMP DATE	EMP DATE	TYPE	EMP RATE	EMP RATE
261	6 1 2015	5 31 2016	W	102.4200	102.4200
261	6 1 2016	5 31 2017	W	108.5600	108.5600
261	6 1 2017	5 31 2018	W	115.0700	115.0700
261	6 1 2018	5 31 2019	W	121.9700	121.9700

WESTERN PENNSYLVANIA TEAMSTERS AND EMPLOYERS PENSION FUND

583

c/o Pen-Wel, Inc.
FOSTER PLAZA VIII • 730 HOLIDAY DRIVE • PITTSBURGH, PA 15220
PITTSBURGH AREA 412/937-7900
TOLL FREE 1-800-327-3876

W. PA. TEAMSTERS AND EMPLOYERS
PENSION FUND

APR - 5 1991

ADMINISTRATIVE OFFICE

PARTICIPATION AGREEMENT

The undersigned Employer, having entered into a written collective bargaining agreement with a Local Union affiliated with Teamsters Joint Council No. 40, International Brotherhood of Teamsters, Chauffeurs, Warehousemen and Helpers of America, which provides among other things for contributions to the WESTERN PENNSYLVANIA TEAMSTERS AND EMPLOYERS PENSION FUND ("FUND"), agrees to be bound by the FUND's Trust Agreement and Pension Plan, both originally executed on August 27, 1956 and as subsequently amended, and all of the rules and regulations heretofore and hereafter adopted by the FUND's Trustees pursuant to the Trust Agreement and Pension Plan, and all of the actions of the Trustees in administering the FUND in accordance with the Trust Agreement, the Pension Plan, and the adopted rules and regulations.

The undersigned Employer also hereby accepts as Employer Trustees the present Employer Trustees appointed under the Trust Agreement, and all such past or succeeding Employer Trustees as shall have been or will be appointed in accordance with the Trust Agreement, and further agrees to be bound by all actions taken by the Employer Trustees pursuant to the Trust Agreement, the Pension Plan, and the adopted rules and regulations.

This Participation Agreement shall become effective upon its acceptance by the Trustees and shall continue in effect until the undersigned Employer is no longer obligated, pursuant to a collective bargaining agreement with a Local Union, to make contributions to this FUND.

IN WITNESS WHEREOF, the Employer has executed this Participation Agreement this 4th day of April, 1991.

WITNESS



EMPLOYER Teamsters Local 250

BY:

TITLE: Secy Treas.

ADDRESS: 4127 Brownsville Rd. Suite A-1
Pgh, PA. 15227

(If the Employer is a corporation, execution must be by an authorized corporate officer; if the Employer is a partnership, execution must be by all partners or by the managing partners; if the Employer is an individual, execution must be by the individual.)



WESTERN PENNSYLVANIA TEAMSTERS AND EMPLOYERS PENSION FUND

49 AUTO WAY - PO BOX 5260 • PITTSBURGH, PA 15206-0260
(412) 362-4200 • TOLL FREE (800) 362-4201 • FAX (412) 362-3133
EMAIL: contactus@wpapensionfund.com • WEBSITE: http://www.wpapensionfund.com

PARTICIPATION AGREEMENT

The undersigned Employer, TEAMSTERS LOCAL 261 AND EMPLOYERS WELFARE FUND, being eligible to participate as an "Employer" in the Western Pennsylvania Teamsters and Employers Pension Fund ("Pension Fund") pursuant to Section 1.7 of the Pension Fund's Agreement And Declaration of Trust, as amended ("Trust Agreement"), and Section 2.11 of the Pension Fund's Pension Plan, as amended ("Pension Plan"), hereby agrees to make contributions for its eligible office employees to the Pension Fund, as follows:

1. The undersigned Employer agrees to be bound by (1) all of the provisions of the Trust Agreement, originally executed on August 27, 1956, and as subsequently amended; (2) all of the provisions of the Pension Plan, originally executed on August 27, 1956, and as subsequently amended; (3) all of the rules and regulations heretofore and hereafter adopted by the Pension Fund's Trustees pursuant to the Trust Agreement and Pension Plan; and (4) all of the actions of the Pension Fund's Trustees in administering the Pension Fund in accordance with the Trust Agreement, Pension Plan, and the adopted rules and regulations; and

2. The undersigned Employer hereby accepts, and irrevocably designates as its Trustees, the present Employer Trustees appointed to the Pension Fund pursuant to the Trust Agreement, and all such past or succeeding Employer Trustees as shall have been or will be appointed in accordance with the Trust Agreement, and the undersigned Employer further agrees to be bound by all actions taken by the Employer Trustees pursuant to the Trust Agreement; and

3. The undersigned Employer agrees to make contributions to the Pension Fund for all its full-time administrator as required by Sections 1.6 and 1.7 of the Trust Agreement and Sections 2.10 and 2.11 of the Pension Plan, at the following weekly contribution rates:

<u>Effective Date Of Contribution</u>	<u>Weekly Contribution Rate</u>
January 1, 1999	\$ 152.00

4. The undersigned Employer agrees to make contributions to the Pension Fund for all of its office employees as required by Sections 1.6 and 1.7 of the Trust Agreement and Sections 2.10 and 2.11 of the Pension Plan, at the following weekly contribution rates:

Effective Date Of
Contribution

Weekly Contribution
Rate

March 1, 2001

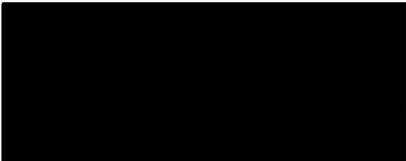
\$ 80.00

This Participation Agreement shall become effective upon its acceptance by the Trustees, and shall be retroactively effective as of the date of the first contribution made by the undersigned Employer to the Pension Fund, and shall continue in effect until the undersigned Employer is no longer obligated to make contributions to the Pension Fund.

IN WITNESS WHEREOF, the Employer has executed this Participation Agreement this 12th day of June, 2001.

WITNESS

EMPLOYER: TEAMSTERS LOCAL 261 AND
EMPLOYERS PENSION FUND



BY: 

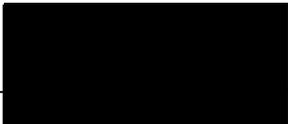
TITLE: Chairman

ADDRESS: R.D. 3 Box 3A-1
New Castle, Pa. 16105.

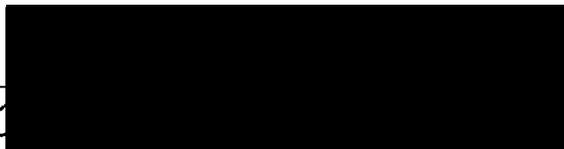
ACCEPTANCE OR REJECTION BY TRUSTEES

IN WITNESS WHEREOF, the Trustees of the Western Pennsylvania Teamsters and Employers Pension Fund accept (reject) the Participation Agreement of the above Employer, effective the 11th day of July, 2001.

UNION TRUSTEE



EMPLOYER TRUSTEE



VPS7525.WPD

1627/261

EMPLOYERS PENSION PLAN AUTHORIZATION

The undersigned Employer, a corporation, a partnership or individual (circle appropriate designation) of P. O. Box 5036, New Castle, Pa. 16105 (address) having entered into a written collective bargaining agreement with a Local Union affiliated with the Joint Council #40, International Brotherhood of Teamsters, Chauffeurs, Warehousemen and Helpers of America, which provides among other things for contributions to the Western Pennsylvania Teamsters and Employers Pension Fund, agrees to be bound by the Trust Agreement and the Pension Plan dated August 27, 1956, as amended, and hereby irrevocably designates as its Trustees under the Trust Agreement such persons as are named in said Agreement as Employer Trustees, together with their successors selected in the manner provided for in the Agreement and agrees to be bound by all actions taken by the said Employer Trustees pursuant to said Pension Plan Agreement and Pension Plan.

This authorization shall become effective upon its acceptance by the Trustees and shall continue in effect until the said Employer is no longer obligated, pursuant to a Collective Bargaining Agreement with the Union, to make contributions to this Pension Fund.

IN WITNESS WHEREOF, the Employer has executed this authorization this 7th day of November, 1975.

WITNESS: _____ EMPLOYER Tri-County Teamsters, Motor Carriers & Asso. Welfare Fund

By:

By:

(Be sure to use exact name of Employer, including trade name, if any). Corporation must execute by duly authorized officers, partnerships by all partners or managing partners, individual owner personally.

ACCEPTANCE OR REJECTION BY TRUSTEES

IN WITNESS WHEREOF, the Trustees of the Western Pennsylvania Teamsters and Employers Pension Fund accept (reject) the authorization of the above Employer effective the 6th day of September, 1975.

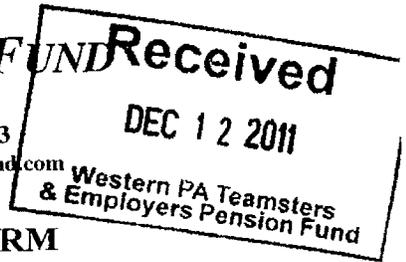
UNION TRUSTEE

EMPLOYER TRUSTEE

TEAMSTERS
No 261

WESTERN PENNSYLVANIA TEAMSTERS AND EMPLOYERS PENSION FUND

49 AUTO WAY • PITTSBURGH, PA 15206-3663
 (412) 362-4200 • TOLL FREE (800) 362-4201 • FAX (412) 362-3133
 EMAIL: contactus@wpapensionfund.com • WEBSITE: http://www.wpapensionfund.com



2010 REHABILITATION PLAN SELECTION FORM

By execution of this form, the undersigned contributing employer and employee bargaining representative (the "Bargaining Parties"), acknowledge their understanding and agree that the annual rate increases owed to the Western Pennsylvania Teamsters and Employers Pension Fund ("Pension Fund") on behalf of employees covered under one or more collective bargaining agreements or participation agreements determine the benefit structure for benefits as described in the Pension Fund's 2010 Rehabilitation Plan.

The Bargaining Parties acknowledge that a copy of the 2010 Rehabilitation Plan has been provided and that they are aware that it sets forth two alternative schedules of contribution and benefit structures, one of which must be selected by the Bargaining Parties when collective bargaining agreements and participation agreements come up for renewal. It also provides for benefit structures which apply in the interim period prior to renewal.

The Bargaining Parties acknowledge their understanding that the "Preferred Schedule" will be deemed to apply to pending agreements which already have a six (6%) percent annual contribution increase in place by the end of 2011. For existing agreements which do not provide for a six (6%) percent contribution increase beginning in 2011, if checked below, the Bargaining Parties hereby agree that the contribution obligation stated in the applicable collective bargaining agreement is amended, effective on the anniversary date of that agreement, by such amount as is necessary to comply with the annual six (6%) percent requirement set forth in the 2010 Rehabilitation Plan. *(Note that if compliance with the Rehabilitation Plan is delayed past 2011, greater contribution increases will be required for selection of the Preferred Schedule in 2012 (8%), 2013 (10%) or 2014 (12%).)*

If checked below, the Bargaining Parties can select the "Default Schedule"; however, if selected in 2011, annual contribution increases of eight (8%) are required. Greater increases apply if the Default Schedule is first selected or imposed in 2012 (11%), 2013 (14%) or 2014 (17%).

The Bargaining Parties may choose to retain an existing contribution structure which does not provide for annual six (6%) percent contribution increases for the remaining term of a pending collective bargaining agreement which does not expire in 2011. However, by indicating "No Change" on this form, the Bargaining Parties acknowledge their understanding that the 2010 Rehabilitation Plan provides that for service earned after February 1, 2011, Unit Multipliers will be reduced by 50% until the pending collective bargaining agreement is renewed and one of the applicable schedules is selected or imposed.

Verification of Contribution and Benefit Structures			
COMPANY NAME:	Teamsters Local 261 & Employers Welfare Fund		
LOCAL UNION:	261		
Fund Account Number(s)		PREFERRED SCHEDULE	DEFAULT SCHEDULE
1622, 2191, 2260		<input checked="" type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	NO CHANGE
		<input type="checkbox"/>	<input type="checkbox"/>

Dated: 12/8/11

By: [REDACTED]
Employer

By: _____
Employee Representative

217.18
157.81

run 7/26/2017 W. PA TEAMSTERS AND EMPLOYERS PENSION FUND F1 = COMMENTS
 EMPR0030 EMPLOYER MASTER FILE - INQUIRY ENT. = CONTINUE

EMPLOYEE ID: 1622 VOL. W/O. DATE: 00/00/0000
 TEAMSTER 261 & EMPLOYERS FEDERAL T.D. #
 COLLEEN SIMMONS STATE CODE: A
 WELFARE FUND AGREEMENT CODE: P PREFERRED
 351 NORTHGATE CIRCLE HEALTH CARE: 0.00
 SUITE B PERS. WOTE: 0.00
 NEW CASTLE PA 16105 0 L/R DATE: 6 1 2017
 (724) 652 4667 L/R REASON: 1
 ENTRY DATE: 9 7 1975
 EXPIRATION: 0 0 0
 CONTRACT? Y/N:
 INST. FREIGHT: N 150/17 1/01
 PART. AGREEMENT: Y 0257 1/01 N

	CURRINT	TOTAL
OVERHEAD/INVOICE	0.00	0.00
DEBIT/AMOUNT ADJ	0.00	0.00

NO.	EFF. DATE	EXPI. DATE	W/P	F/R RATE	C/D RATE
12	1 2013	11 30 2014	W	243.9900	243.9900
12	1 2014	11 30 2015	W	258.6300	258.6300
12	1 2015	11 30 2016	W	274.1500	274.1500
12	1 2016	11 30 2017	W	290.6000	290.6000

run

7/26/2017 W. PA TEAMSTERS AND EMPLOYERS PENSION FUND F1 = COMMENTS
 EMPR0030 EMPLOYER MASTER FILE - INQUIRY ENT.= CONTINUE

EMPLOYEE ID: 2191 YOF WHT DATE: 00 00 0000
 EMPLOYER ID: 261 CDD ID: 1622 FEDERAL I.D.
 TEAMSTERS 261 WF STAFF STATUS CODES: A
 COLLEEN SIMMONS ANNUAL COL: P PREFERRED
 351 NORTHGATE CIRCLE
 SUITE B
 NEW CASTLE PA 16105 0
 724 652 4667

REGULAR PAY 0.00
 TIME AND A HALF 0.00
 OVERTIME 6 1 2017
 HOLIDAY 1
 SICK LEAVE 3 1 2001
 PA ADJUSTMENT 0 0 0
 CONTRACT PAY
 MOBILE FREIGHT N
 PART ADJUSTMENT Y 2001 2001 N

EMP	EXP DATE	EXP DATE	EXP	E/K RATE	S/P RATE
12 1 2013	11 30 2014		W	177.3200	177.3200
12 1 2014	11 30 2015		W	187.9600	187.9600
12 1 2015	11 30 2016		W	199.2400	199.2400
12 1 2016	11 30 2017		W	211.2000	211.2000

**WESTERN PENNSYLVANIA
TEAMSTERS AND EMPLOYERS PENSION FUND**

49 AUTO WAY - PO Box 5260
PITTSBURGH, PA 15206-0260

TOLL FREE (800) 362-4201

FAX (412) 362-3133

(412) 362-4200



PARTICIPATION AGREEMENT

The undersigned Employer, TEAMSTERS LOCAL UNION 261, being eligible to participate as an "Employer" in the Western Pennsylvania Teamsters and Employers Pension Fund ("Pension Fund") pursuant to Section 1.7 of the Pension Fund's Agreement And Declaration of Trust, as amended ("Trust Agreement"), and Section 2.11 of the Pension Fund's Pension Plan, as amended ("Pension Plan"), hereby agrees to make contributions for its eligible employees to the Pension Fund, as follows:

1. The undersigned Employer agrees to be bound by (1) all of the provisions of the Trust Agreement, originally executed on August 27, 1956, and as subsequently amended; (2) all of the provisions of the Pension Plan, originally executed on August 27, 1956, and as subsequently amended; (3) all of the rules and regulations heretofore and hereafter adopted by the Pension Fund's Trustees pursuant to the Trust Agreement and Pension Plan; and (4) all of the actions of the Pension Fund's Trustees in administering the Pension Fund in accordance with the Trust Agreement, Pension Plan, and the adopted rules and regulations; and

2. The undersigned Employer hereby accepts, and irrevocably designates as its Trustees, the present Employer Trustees appointed to the Pension Fund pursuant to the Trust Agreement, and all such past or succeeding Employer Trustees as shall have been or will be appointed in accordance with the Trust Agreement, and the undersigned Employer further agrees to be bound by all actions taken by the Employer Trustees pursuant to the Trust Agreement; and

3. The undersigned Employer agrees to make contributions to the Pension Fund for all of its full-time officers and employees as required by Sections 1.6 and 1.7 of the Trust Agreement and Sections 2.10 and 2.11 of the Pension Plan, at the weekly contribution rate required by the then current National Master Freight Agreement and Supplemental Agreement thereto.

This Participation Agreement shall become effective upon its acceptance by the Trustees, and shall be retroactively effective as of the date of the first contribution made by the undersigned Employer to the Pension Fund, and shall continue in effect until the undersigned Employer is no longer obligated to make contributions to the Pension Fund.

IN WITNESS WHEREOF, the Employer has executed this Participation Agreement this 2nd day of SEPTEMBER, 1994.

WITNESS

[Redacted]

EMPLOYER: TEAMSTERS LOCAL UNION 261

[Redacted]

BY:

TITLE: President and Principal Officer

ADDRESS: R.D.#3 Box 3A

New Castle, PA 16105

ACCEPTANCE OR REJECTION BY TRUSTEES

IN WITNESS WHEREOF, the Trustees of the Western Pennsylvania Teamsters and Employers Pension Fund accept (reject) the Participation Agreement of the above Employer, effective the 9th day of Sept, 1994.

UNION TRUSTEE

[Redacted]

EMPLOYER TRUSTEE

[Redacted]

1102/1/11/08

WESTERN PENNSYLVANIA TEAMSTERS AND EMPLOYERS PENSION FUND

49 AUTO WAY • PITTSBURGH, PA 15206-3663
 (412) 362-4200 • TOLL FREE (800) 362-4201 • FAX (412) 362-3133
 EMAIL: contactus@wppensionfund.com • WEBSITE: <http://www.wppensionfund.com>

Received
 OCT 13 2011
 Western PA Teamsters
 & Employers Pension Fund

2010 REHABILITATION PLAN SELECTION FORM

By execution of this form, the undersigned contributing employer and employee bargaining representative (the "Bargaining Parties"), acknowledge their understanding and agree that the annual rate increases owed to the Western Pennsylvania Teamsters and Employers Pension Fund ("Pension Fund") on behalf of employees covered under one or more collective bargaining agreements or participation agreements determine the benefit structure for benefits as described in the Pension Fund's 2010 Rehabilitation Plan.

The Bargaining Parties acknowledge that a copy of the 2010 Rehabilitation Plan has been provided and that they are aware that it sets forth two alternative schedules of contribution and benefit structures, one of which must be selected by the Bargaining Parties when collective bargaining agreements and participation agreements come up for renewal. It also provides for benefit structures which apply in the interim period prior to renewal.

The Bargaining Parties acknowledge their understanding that the "Preferred Schedule" will be deemed to apply to pending agreements which already have a six (6%) percent annual contribution increase in place by the end of 2011. For existing agreements which do not provide for a six (6%) percent contribution increase beginning in 2011, if checked below, the Bargaining Parties hereby agree that the contribution obligation stated in the applicable collective bargaining agreement is amended, effective on the anniversary date of that agreement, by such amount as is necessary to comply with the annual six (6%) percent requirement set forth in the 2010 Rehabilitation Plan. *(Note that if compliance with the Rehabilitation Plan is delayed past 2011, greater contribution increases will be required for selection of the Preferred Schedule in 2012 (8%), 2013 (10%) or 2014 (12%).)*

If checked below, the Bargaining Parties can select the "Default Schedule": however, if selected in 2011, annual contribution increases of eight (8%) are required. Greater increases apply if the Default Schedule is first selected or imposed in 2012 (11%), 2013 (14%) or 2014 (17%).

The Bargaining Parties may choose to retain an existing contribution structure which does not provide for annual six (6%) percent contribution increases for the remaining term of a pending collective bargaining agreement which does not expire in 2011. However, by indicating "No Change" on this form, the Bargaining Parties acknowledge their understanding that the 2010 Rehabilitation Plan provides that for service earned after February 1, 2011, Unit Multipliers will be reduced by 50% until the pending collective bargaining agreement is renewed and one of the applicable schedules is selected or imposed.

Verification of Contribution and Benefit Structures			
COMPANY NAME:	Teamsters Local Union #261 Clerical		
LOCAL UNION:	261		
	Fund Account Number(s)		
2117		PREFERRED SCHEDULE	DEFAULT SCHEDULE
		<input type="checkbox"/>	<input type="checkbox"/>
		NO CHANGE	
		<input type="checkbox"/>	

Dated: 10/13/11

By: [REDACTED]
Employer

By: _____
Employee Representative

8/02/2018
EMPR0030

W. PA TEAMSTERS AND EMPLOYERS PENSION FUND
EMPLOYER MASTER FILE - INQUIRY

F1 = COMMENTS
ENT. = CONTINUE

2117
2117
LOCAL 261 CLERICAL
SANDY HOULETTE
351 NORTHGATE CIRCLE
SUITE A

NEW CASTLE PA 16105 0
724.658.5554

00:00:0000
A
P PREFERRED
0.00
0.00
6 1 2018
1
8 1 1997
0 0 0

0.00 0.00
0.00 0.00

YR	MO	DATE	YR	MO	DATE	W	AMOUNT	AMOUNT
8	1	2015	7	31	2016	W	274.1500	274.1500
8	1	2016	7	31	2017	W	290.6000	290.6000
8	1	2017	7	31	2018	W	308.0400	308.0400
8	1	2018	7	31	2019	W	326.5300	326.5300

LOCAL UNION NO 261
 SANDY HOULETT
 351 NORTHGATE CIRCLE
 SUITE A
 NEW CASTLE PA 16105 0
 724.658.5554

00.00 0000
 A
 P PREFERRED
 0.00
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 6 1.2017
 3
 9 1.1958
 0 0 0
 N
 N Y

0.00 0.00
 0.00 0.00

DATE	DATE	TYP	F/R RATE	F/P RATE
8 1 2014	7 31 2015	W	447.1900	447.1900
8 1 2015	7 31 2016	W	474.0200	474.0200
8 1 2016	7 31 2017	W	502.4600	502.4600
8 1 2017	7 31 2018	W	532.6000	532.6000

**WESTERN PENNSYLVANIA
TEAMSTERS AND EMPLOYERS PENSION FUND**

49 AUTO WAY - PO Box 5260

PITTSBURGH, PA 15206-0260

(412) 362-4200

TOLL FREE (800) 362-4201

FAX (412) 362-3133



PARTICIPATION AGREEMENT

The undersigned Employer, TEAMSTERS LOCAL UNION NO. 110, being eligible to participate as an "Employer" in the Western Pennsylvania Teamsters and Employers Pension Fund ("Pension Fund") pursuant to Section 1.7(b) of the Pension Fund's Agreement And Declaration of Trust, as amended ("Trust Agreement"), and Section 2.11(b) of the Pension Fund's Pension Plan, as amended ("Pension Plan"), hereby agrees to make contributions for its eligible clerical and office employees to the Pension Fund, as follows:

1. The undersigned Employer agrees to be bound by (1) all of the provisions of the Trust Agreement, originally executed on August 27, 1956, and as subsequently amended; (2) all of the provisions of the Pension Plan, originally executed on August 27, 1956, and as subsequently amended; (3) all of the rules and regulations heretofore and hereafter adopted by the Pension Fund's Trustees pursuant to the Trust Agreement and Pension Plan; and (4) all of the actions of the Pension Fund's Trustees in administering the Pension Fund in accordance with the Trust Agreement, Pension Plan, and the adopted rules and regulations; and

2. The undersigned Employer hereby accepts, and irrevocably designates as its Trustees, the present Employer Trustees appointed to the Pension Fund pursuant to the Trust Agreement, and all such past or succeeding Employer Trustees as shall have been or will be appointed in accordance with the Trust Agreement, and the undersigned Employer further agrees to be bound by all actions taken by the Employer Trustees pursuant to the Trust Agreement; and

3. The undersigned Employer agrees to make contributions to the Pension Fund for all of its full-time employees as required by Sections 1.6(b) and 1.7(b) of the Trust Agreement and Sections 2.10(b) and 2.11(b) of the Pension Plan, at the initial weekly contribution rate of \$150.00, to be increased as provided by the Employer.

This Participation Agreement shall become effective upon its acceptance by the Trustees, and shall be retroactively effective as of the date of the first contribution made by the undersigned Employer to the Pension Fund, and shall continue in effect until the undersigned Employer is no longer obligated to make contributions to the Pension Fund.

IN WITNESS WHEREOF, the Employer has executed this Participation Agreement this 17th day of October, 1996.

WITNESS

EMPLOYER: TEAMSTERS LOCAL UNION
NO. 110

[REDACTED]

BY: [REDACTED]

TITLE: President

ADDRESS: P. O. Box 180

Ebensburg, PA 15931

ACCEPTANCE OR REJECTION BY TRUSTEES

IN WITNESS WHEREOF, the Trustees of the Western Pennsylvania Teamsters and Employers Pension Fund accept (reject) the Participation Agreement of the above Employer, effective the 7th day of Nov, 1996.

UNION TRUSTEE

[REDACTED]

EMPLOYER TRUSTEE

[REDACTED]

*WESTERN PENNSYLVANIA
TEAMSTERS AND EMPLOYERS PENSION FUND*

49 ACETO WAY • PITTSBURGH, PA 15206-3663
 (412) 362-4200 • TOLL FREE (800) 362-4201 • FAX (412) 362-3133
 EMAIL: CONTACTUS@WPPENSIONFUND.COM • WEBSITE: HTTP://WWW.WPPENSIONFUND.COM

2010 REHABILITATION PLAN SELECTION FORM

By execution of this form, the undersigned contributing employer and employee bargaining representative (the "Bargaining Parties"), acknowledge their understanding and agree that the annual rate increases owed to the Western Pennsylvania Teamsters and Employers Pension Fund ("Pension Fund") on behalf of employees covered under one or more collective bargaining agreements or participation agreements determine the benefit structure for benefits as described in the Pension Fund's 2010 Rehabilitation Plan.

The Bargaining Parties acknowledge that a copy of the 2010 Rehabilitation Plan has been provided and that they are aware that it sets forth two alternative schedules of contribution and benefit structures, one of which must be selected by the Bargaining Parties when collective bargaining agreements and participation agreements come up for renewal. It also provides for benefit structure which apply in the interim period prior to renewal.

The Bargaining Parties acknowledge their understanding that the "Preferred Schedule" will be deemed to apply to pending agreements which already have a six (6%) percent annual contribution increase in place by the end of 2011. For existing agreements which do not provide for a six (6%) percent contribution increase beginning in 2011, if checked below, the Bargaining Parties hereby agree that the contribution obligation stated in the applicable collective bargaining agreement is amended, effective on the anniversary date of that agreement, by such amount as is necessary to comply with the annual six (6%) percent requirement set forth in the 2010 Rehabilitation Plan. (Note that if compliance with the Rehabilitation Plan is delayed past 2011, greater contribution increases will be required for selection of the Preferred Schedule in 2012 (8%), 2013 (10%) or 2014 (12%).)

If checked below, the Bargaining Parties can select the "Default Schedule"; however, if selected in 2011, annual contribution increases of eight (8%) are required. Greater increases apply if the Default Schedule is first selected or imposed in 2012 (11%), 2013 (14%) or 2014 (17%).

The Bargaining Parties may choose to retain an existing contribution structure which does not provide for annual six (6%) percent contribution increases for the remaining term of a pending collective bargaining agreement which does not expire in 2011. However, by indicating "No Change" on this form, the Bargaining Parties acknowledge their understanding that the 2010 Rehabilitation Plan provides that for service contracts which terminate in 2011, the Multiplier will be reduced to .90% until the pending collective bargaining agreement is renewed and one of the applicable schedules is selected or imposed.

Verification of Contribution and Benefit Structures			
COMPANY NAME:	Teamsters Local Union # 110		
LOCAL UNION:	110		
	Fund Account Number(s)	PREFERRED SCHEDULE	DEFAULT SCHEDULE
591, 2101		<input checked="" type="checkbox"/>	<input type="checkbox"/>
			NO CHANGE
			<input type="checkbox"/>

Dated: 1/5/11 By: [Redacted] Employee Representative

8/02/2018
EMPR0030

W. PA TEAMSTERS AND EMPLOYERS PENSION FUND
EMPLOYER MASTER FILE - INQUIRY

F1 = COMMENTS
ENT. = CONTINUE

2101
LOCAL 110 CLERICAL
DENISE MATEJOVICH
PO BOX 180

MONTH END DATE 00 00 0000
STATUS CODE A
AGREEMENT CODE P PREFERRED

EBENSBURG PA 15931 0
814 472 6646

MONTH END DATE 0.00
FIDUCIARY DATE 9 1 2016
EXPIRATION DATE 11 1 1996
CONTRACT YEAR 0 0 0

CURRENT 0.00
TOTAL 0.00

NOTICE PERIOD Y
PARTICIPANT Y

DATE	PERIOD	DATE	W	AMOUNT	AMOUNT
8 1 2015		7 31 2016	W	458.4200	458.4200
8 1 2016		7 31 2017	W	485.9300	485.9300
8 1 2017		7 31 2018	W	515.0700	515.0700
8 1 2018		7 31 2019	W	545.9800	545.9800

**WESTERN PENNSYLVANIA
TEAMSTERS AND EMPLOYERS PENSION FUND**

49 AUTO WAY • PITTSBURGH, PA 15206-3663
(412) 362-4200 • TOLL FREE (800) 362-4201 • FAX (412) 362-3133
EMAIL: contactus@wpapensionfund.com • WEBSITE: http://www.wpapensionfund.com

PARTICIPATION AGREEMENT

TEAMSTERS LOCAL UNION NO. 110 - FULL-TIME OFFICERS

The undersigned Employer, TEAMSTERS LOCAL UNION NO. 110, being eligible to participate as an "Employer" in the Western Pennsylvania Teamsters and Employers Pension Fund ("Pension Fund") pursuant to Section 1.6 of the Pension Fund's Agreement And Declaration of Trust, as amended ("Trust Agreement"), and Section 2.10 of the Pension Fund's Pension Plan, as amended ("Pension Plan"), hereby agrees to make contributions for its eligible Full-Time Officers to the Pension Fund, as follows:

1. The undersigned Employer agrees to be bound by (1) all of the provisions of the Trust Agreement, originally executed on August 27, 1956, and as subsequently amended; (2) all of the provisions of the Pension Plan, originally executed on August 27, 1956, and as subsequently amended; (3) all of the rules and regulations heretofore and hereafter adopted by the Pension Fund's Trustees pursuant to the Trust Agreement and the Pension Plan; and (4) all of the actions of the Pension Fund's Trustees in administering the Pension Fund in accordance with the Trust Agreement, Pension Plan, and the adopted rules and regulations; and

2. The undersigned Employer hereby accepts, and irrevocably designates as its Trustees, the present Employer Trustees appointed to the Pension Fund pursuant to the Trust Agreement, and all such past or succeeding Employer Trustees as shall have been or will be appointed in accordance with the Trust Agreement, and the undersigned Employer further agrees to be bound by all actions taken by the Employer Trustees pursuant to the Trust Agreement; and

3. The undersigned Employer agrees to make contributions to the Pension Fund for all of its Full-Time Officers as required by Sections 1.5 and 1.6 of the Trust Agreement and Sections 2.9 and 2.10 of the Pension Plan, at the weekly contribution rate required by the then current National Master Freight Agreement and Supplemental Agreement thereto.

This Participation Agreement shall become effective upon its acceptance by the Trustees, and shall be retroactively effective as of the date of the first contribution made by the undersigned Employer to the Pension Fund, and shall continue in effect until the undersigned Employer is no longer obligated to make contributions to the Pension Fund.

IN WITNESS WHEREOF, the Employer has executed this Participation Agreement this ___ day of _____, 2008.

WITNESS



EMPLOYER: TEAMSTERS LOCAL

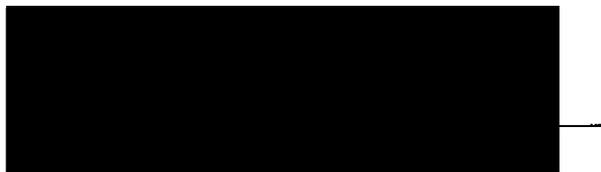
BY: _____

TITLE: PRESIDENT

ADDRESS: 153 EBONY RD., BOX 180
EBENSBURG, PA 15931

ACCEPTANCE OR REJECTION BY TRUSTEES

IN WITNESS WHEREOF, the Trustees of the Western Pennsylvania Teamsters and Employers Pension Fund accept (reject) the Participation Agreement of the above Employer, effective the 9th day of July, 2008.



33077.WP

**WESTERN PENNSYLVANIA
TEAMSTERS AND EMPLOYERS PENSION FUND**

49 AUTO WAY • PITTSBURGH, PA 15206-3663
(412) 362-4200 • TOLL FREE (800) 362-4201 • FAX (412) 362-3133
EMAIL: contactus@wpapensionfund.com • WEBSITE: http://www.wpapensionfund.com

2010 REHABILITATION PLAN SELECTION FORM

By execution of this form, the undersigned contributing employer and employee bargaining representative (the "Bargaining Parties"), acknowledge their understanding and agree that the annual rate increases owed to the Western Pennsylvania Teamsters and Employers Pension Fund ("Pension Fund") on behalf of employees covered under one or more collective bargaining agreements or participation agreements determine the benefit structure for benefits as described in the Pension Fund's 2010 Rehabilitation Plan.

The Bargaining Parties acknowledge that a copy of the 2010 Rehabilitation Plan has been provided and that they are aware that it sets forth two alternative schedules of contribution and benefit structures, one of which must be selected by the Bargaining Parties when collective bargaining agreements and participation agreements come up for renewal. It also provides for benefit structures which apply in the interim period prior to renewal.

The Bargaining Parties acknowledge their understanding that the "Preferred Schedule" will be deemed to apply to pending agreements which already have a six (6%) percent annual contribution increase in place by the end of 2011. For existing agreements which do not provide for a six (6%) percent contribution increase beginning in 2011, if checked below, the Bargaining Parties hereby agree that the contribution obligation stated in the applicable collective bargaining agreement is amended, effective on the anniversary date of that agreement, by such amount as is necessary to comply with the annual six (6%) percent requirement set forth in the 2010 Rehabilitation Plan. (Note that if compliance with the Rehabilitation Plan is delayed past 2011, greater contribution increases will be required for selection of the Preferred Schedule in 2012 (8%), 2013 (10%) or 2014 (12%).)

If checked below, the Bargaining Parties can select the "Default Schedule"; however, if selected in 2011, annual contribution increases of eight (8%) are required. Greater increases apply if the Default Schedule is first selected or imposed in 2012 (11%), 2013 (14%) or 2014 (17%).

The Bargaining Parties may choose to retain an existing contribution structure which does not provide for annual six (6%) percent contribution increases for the remaining term of a pending collective bargaining agreement which does not expire in 2011. However, by indicating "No Change" on this form, the Bargaining Parties acknowledge their understanding that the 2010 Rehabilitation Plan provides that for service earned after February 1, 2011, Unit Multipliers will be reduced by 50% until the pending collective bargaining agreement is renewed and one of the applicable schedules is selected or imposed.

Verification of Contribution and Benefit Structures			
COMPANY NAME:	Teamsters Local Union #110		
LOCAL UNION:	110		
	Fund Account Number(s)	PREFERRED SCHEDULE	DEFAULT SCHEDULE
591, 2101		<input checked="" type="checkbox"/>	<input type="checkbox"/>
			NO CHANGE
			<input type="checkbox"/>

Dated: 1/5/11

By: Employee

By: Employee Representative

8/02/2018
EMPR0030

W. PA TEAMSTERS AND EMPLOYERS PENSION FUND
EMPLOYER MASTER FILE - INQUIRY

F1 = COMMENTS
ENT. = CONTINUE

591 00 00 0000
110 591
LOCAL UNION NO 110
DENISE MATEJOVICH CHERI-PT
PO BOX 180
EBENSBURG PA 15931 0
814 472 6646
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A
P PREFERRED
0.00
0.00
6 1 2018
2
9 1 1958
0 0 0
Y
Y Y

EA	EN	DATE	EXP DATE	TYM	EMP RATE	W/P RATE
8	1	2015	7 31 2016	W	458.4200	458.4200
8	1	2016	7 31 2017	W	485.9300	485.9300
8	1	2017	7 31 2018	W	515.0700	515.0700
8	1	2018	7 31 2019	W	545.9800	545.9800