# REMITTANCE FORM FOR CURRENT YEAR CONTRIBUTIONS

**Year-End Processing:** This Year’s Contributions Due by December 20

## FOR MONTH(S) OF:

<table>
<thead>
<tr>
<th>EMPLOYER</th>
<th>SSN (last 4 digits only)</th>
<th>PRINT LEGAL NAME</th>
<th>ER EMPLOYER CONTRIBUTION (default)</th>
<th>EE EMPLOYEE SALARY REDUCTION</th>
<th>TOTAL CONTRIBUTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Church:</td>
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<td>District:</td>
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</tr>
</tbody>
</table>

(If the ER or EE is not filled in, the default is the ER)

**CHECK TOTAL:** $  

**TREASURER NAME:**  
**EMAIL:**

- New members require a completed enrollment form for funds to be processed.  
- Please try to pay/send in same month the contribution is for.  
- Only one remittance form should accompany the check(s).  
- Use business-size envelopes with business-size checks (#10).  
- Life & Long-Term Disability Insurance is only available with ER contributions.  
- Remittance must be filled out and readable. Please print or type.  
- Please do not cut, staple, tape or tear the form or check.  
- Please tri-fold and mail in a #10 envelope to:

  **WESLEYAN PENSION FUND INC**  
  **PO BOX 50434**  
  **INDIANAPOLIS, INDIANA 46250**

**OTHER PAYMENT METHODS:**

- **ONLINE PAYMENT OPTION:** WPF would like you to use our Online Payment System for making scheduled, automated payments—even for one person. Visit our website, www.wesleyanpensionfund.com, and click “First-Time Users” for set-up. *No more checks—envelopes—postage—remittance slips—mailings—or errors!*  
- **BILL-PAY OPTION:** If using a bill-pay service, please use our Import Transaction Workbook (Excel) template on our website, under FORMS. Read the instructions tab, email workbook when check is mailed. Save workbook and re-use for next time.