Machinists Health and Welfare Trust Fund

Physical Address 7525 SE 24th Street, Suite 200, Mercer Island, WA 98040 • Mailing Address PO Box 34203, Seattle, WA 98124
Phone (206) 441-7574 or (800) 732-1121 • Fax (206) 505-9727

Administered by
Welfare & Pension Administration Service, Inc.

PIN Request Form
(Dependent Only)

Please provide me with a personal identification number (PIN), which I understand when used in combination with my Social Security number or WPAS ID number will allow me access to **Dependent Only** paid claims information via the Machinists Health & Welfare Trust website.

Signature _____ **Date** _____
(Must be signed by participating dependent)

Please print your name, identification number and address:

Dependent Name: _____

Member Name: _____

Dependent Social Security Number ***or***:
Member WPAS ID Number: _____

Address: _____

_____

You may return this form to WPAS, Inc. in one of the following ways:

1. Mail to: WPAS, Inc.
   PO Box 34203
   Seattle, WA 98124-1203
2. Fax to: (206) 505-9727
3. E-mail scanned document to: **forms@wpas-inc.com**