## Please send completed form to:

## PRAIRIE TEAMSTERS ADMINISTRATION SERVICES LTD. 155, 7260 – 12 Street S.E. Calgary, AB T2H 2S5 pension@ptadmin.ca

## **APPLICATION TO RE-COMMENCE PENSION**

Please Print Clearly

Plan Name	TEAMSTERS PRAIRIE PR	ROVINCES PENSION PLAN	
Member Name	Last	First	
SIN			
Provinces Pensior  received by Prairi  I understand that	n Plan, request that my pension, when the next calend e Teamsters Administration Service	, a participant of the Teamsters Prairie which is currently suspended, re-commence effective dar month following the date this signed application ces.	ı is
MEMBER SIGNA	TURE	NAME OF WITNESS	
DATE day/mo	)/yr	WITNESS SIGNATURE  DATE day/mo/yr	