

MICHIGAN CARPENTERS' FRINGE BENEFIT FUNDS

Michigan Carpenters' Health Care Fund
Michigan Carpenters' Pension Fund

Managed for the Trustees by:
TIC MIDWEST

AFFIDAVIT DECLARING MARITAL STATUS

STATE OF _____)

COUNTY OF _____)

_____ being duly sworn deposes and says that he/she

resides at _____, city of _____

state of _____. That he/she and the deceased, _____

were legally married and living together as husband and wife at the time of his/her death.

Signed _____

(spouse signature)

Subscribed and sworn to me before this _____ day of _____ 20____.

Notary Public

County

State

My Commission Expires