ADDENDUM I  
WAGES, FRINGE CONTRIBUTIONS AND DEDUCTIONS  
EFFECTIVE: MAY 1, 2018

The wages, fringe contributions and deductions for Heavy, Highway & Utility Construction shall be as described below:

LOCAL UNION: 751  
Kankakee

LABORER RATE $37.26

PENSION FUND 12.30

ANNUITY PLAN 6.00

N. CENTRAL IL WELFARE FUND 8.20

N. IL WELFARE FUND .72

TRAINING FUND .80

L.E.C.E.T.* .19

MRFFC .11

IAF .03

TOTAL PACKAGE $65.61

DEDUCTIONS:

MARKET PRESERVATION 0.66

VACATION FUND 3.00

WORKING DUES CHECK-OFF 5%

1) All payments (except otherwise noted below) to be sent to North Central Illinois Laborers’ Health & Welfare Fund, 4208 W. Partridge Way Unit 3, Peoria, Illinois 61615-5650.

2) Overtime hours worked to be paid at the applicable overtime rate.

3) Pension and Annuity payments sent to Central Laborers’ Fringe Benefit Funds, P.O. Box 1267, Jacksonville, Illinois 62651. Overtime hours for Annuity will be paid at the applicable overtime rate.

4) Employers that perform work in the Hazardous Waste, Asbestos and Lead Base Paint Industries shall pay a training program contribution of $1.30 per hour.

5) Dues Check-Off and Market Preservation Fund to be deducted from the Basic Labor Rate for Local 751 sent to Local 751, 1390 Stanford Dr., Kankakee, IL 60901-9412.

6) Dues Check-Off calculated as a percentage of gross pay.

7) Vacation Fund Contributions: Overtime hours to be paid at the applicable overtime rate.

8) Welfare Fund Contributions: Welfare contributions for overtime hours worked to be paid at the straight time rate.

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WAGE INCREASES:

EFFECTIVE: MAY 1, 2019 $2.13 increase per hour total package to $67.74.
EFFECTIVE: MAY 1, 2020 $2.20 increase per hour total package to $69.94.
EFFECTIVE: MAY 1, 2021 $2.27 increase per hour total package to $72.21.

AGC OF ILLINOIS:

By: ____________________________ 
Frank Kazenske, Director of Labor Relations 5/9/2018

GREAT PLAINS LABORERS' DISTRICT COUNCIL:

By: ____________________________
Anthony Penn, Business Manager

By: ____________________________
Steve Pfingsten, Laborers Local #751

Contractor's Signature

Contractor's Name

Contractor's Address

City ____________________________ State ____________________________ Zip ____________________________

Telephone Number ____________________________ Date ____________________________

Facsimile Number

Federal Employer Identification Number