

EPR Refund/Credit Request

(Notes must also be included in the amended report/s in EPR)

All fields must be fully completed

EIN _____ Company Name _____ Date _____

Reason for amendment: _____

Local _____ Agreement Name: _____

Work Month _____

Fund	Amount
------	--------

_____	_____
-------	-------

_____	_____
-------	-------

_____	_____
-------	-------

_____	_____
-------	-------

_____	_____
-------	-------

_____	_____
-------	-------

_____	_____
-------	-------

_____	_____
-------	-------

_____	_____
-------	-------

_____	_____
-------	-------

_____	_____
-------	-------

_____	_____
-------	-------

_____	_____
-------	-------

_____	_____
-------	-------

_____	_____
-------	-------

Request By _____ Phone _____

Email _____

Please email completed request to eprhelp@westernlineneca.org