

# Roofers Local No. 20 Health and Welfare Fund and Pension Trust Fund

HEALTH AND WELFARE  
EMPLOYER TRUSTEES  
ANDREW CHRIST  
JOHN DALY  
NORMAN WATERS

6321 Blue Ridge Blvd., Suite 101  
Raytown, Missouri 64133  
816-313-9427  
Fax 816-313-0004

HEALTH AND WELFARE  
UNION TRUSTEES  
STEVE GERCONE  
JOE LOGSDON  
PAUL POST

PENSION EMPLOYER  
TRUSTEES  
MATT PIERCE  
MARY McNAMARA  
JAMES BOLAND

PENSION UNION  
TRUSTEES  
STEVE GERCONE  
JOE LOGSDON  
PAUL POST



## Annual Physical Examination Incentive Verification

There is no co-pay to be collected/required for a screening that is 100% preventive

This is to verify, that I, \_\_\_\_\_ (Name) have completed my  
Annual Physical Examination on \_\_\_\_\_ (Date).

Covered Member or Spouse Name:	Covered Member or Spouse Signature:	Date:
Physician Name:	Physician Signature:	Date:

<i>Please print the following information:</i>	
Member	
Work Phone	
Email Address	

Please keep a copy of this certificate for your records and provide the original to the Fund Administrator, Michelle Ross, by no later than **November 15, 2022.**

If you have any questions, please contact Michelle Ross at (816) 313-9427 or fax (816) 313-0004 or 6321 Blue Ridge Blvd., Suite 101, Raytown, MO 64133. **PARTICIPANTS ARE RESPONSIBLE FOR THE SUBMISSION OF FORMS.**

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