Washington State Council of Fire Fighters Employee Benefit Trust Administered by Vimly Benefit Solutions PO Box 6 • Mukilteo, WA 98275 P: (425)-367-0743 • F: 866-676-1530 E: iaff-merp@vimly.com

[DATE]

Name Address City, State Zip

Re: Contribution Data Reports

Dear [EMPLOYER]:

This letter is written on behalf of the Board of Trustees of the IAFF Medical Expense Reimbursement Plan ("Plan") of the Washington State Council of Fire Fighters Employee Benefit Trust ("Trust"). [EMPLOYER] ("Employer") is a participating employer in the Plan and Trust. Please direct this letter to the head of the Department that is responsible for the transfer of contributions to the Trust.

In order to comply with certain U.S. Department of Labor reporting requirements applicable to the Trust, participating employers need to provide contribution reports to the Trust Office which identify and separate out the amount of employee and employer contributions being made (by the participating employer to the Trust) for the covered time period. Participating employers are required to report this information to the Trust Office each time they send contributions to the Trust Office. We have prepared a template form specifically for this purpose; a copy of which is enclosed herewith.

Should you have any questions about this process, **please do not hesitate to contact** [name of Vimly contact person] at the Trust Office at [insert contact person's direct phone] or <u>iaff-merp@vimly.com</u>. We are happy to work with you to make meeting this reporting requirement as easy as possible for you.

Sincerely,

Trust Office, IAFF Medical Expense Reimbursement Plan (MERP) of Washington State Council of Fire Fighters Employee Benefit Trust

Enclosure