

Electronic Employer **Contributions Manual**

TIC International Corporation

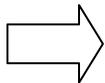
Established January 2009
Updated August 2013

TABLE OF CONTENTS

Electronic Submission Instructions.....	3
Mailing Payment Information	18
Viewing Electronic Contribution History.....	19
Using Prior History File to Create a New File.....	22
File Layout Specifications	27
Converting Excel to a Comma Delimited File	29

Electronic Submission Instructions

1. Go to www.tici.com web page and select Benefit Inquiry Site.



TIC International Corporation
11590 North Meridian St., Suite 600
Carmel, IN 46032 - 4529
Ph: 317.580.8686 | Fax: 317.580.8699 | Email: tici@tici.com

Company Information *TIC International Corporation* (TIC) specializes in consulting and third party administration for multiemployer health care, defined benefit pension, and defined contribution/401(k) plans. A sister company of TIC, [United Actuarial Services, Inc.](#) specializes in actuarial consulting to these multiemployer plans.

Benefit Inquiry Site

TIC Research Materials Employee benefit plan trustees needing a consultant, or administrator to deal with the challenges of plan design, funding, eligibility testing, claim adjudication, benefit payment, FASB ASC 965 (formerly SOP 92-6), COBRA, HIPAA, SPD's, QMCSO's or QDRO's will welcome the comprehensive service solutions available at TIC International Corporation.

To learn more about TIC International Corporation, please click on the [company information](#) link.

TIC International Corporation
11590 North Meridian St., Suite 600
Carmel, IN 46032- 4529
Ph: 317.580.8686 • Fax: 317.580.8699 • Email: tici@tici.com

*BENEFIT
ADMINISTRATORS
AND
CONSULTANTS
SINCE
1951*

Electronic Employer Contributions Manual

2. Sign on to the TIC Benefit Inquiry Site using your Employer Identification Number assigned by the Fund Office. First-time employers should contact the TIC Fund Office for a one-time generic password. Employers posting to multiple funds will need each fund number's generic password; however, the employer may assign the same personal password for each fund during the setup process for each fund.

REMINDER: PASSWORDS ARE CASE-SENSITIVE

TIC International Corporation 11590 North Meridian St., Suite 600
Carmel, IN 46032- 4529
Ph: 317.580.8686 | Fax: 317.580.8699 | Email: tici@tici.com

BIS Menu

- [Terms & Conditions](#)
- [System Maint. Schedule](#)
- [Home](#)

BENEFIT INQUIRY SITE - for - *Current Benefit Status*

Attention Participants:

If you are a first time user and need to establish access to the Benefit Inquiry Site, you may do so by entering in your User ID (SSN) and Assigned Password.

Attention Employers:

If you are a first time user and need to establish access to the Benefit Inquiry Site, you may do so by entering in your Employer ID Number (EIN) and Assigned Password.

If you are a participant of the Benefit Inquiry Site and you have forgotten your password, you may click on the forgot password link below to recover your password.

[Forgot Password?](#)

ID:

PASSWORD:

Important Notice:

Before using the Benefit Inquiry Site, you must read and agree to the [Terms and Conditions](#). Once you have agreed to the **Terms and Conditions**, you may enter your User ID and Password to log on to the Benefit Inquiry Site.

By entering your User ID and Password to gain access to the site, you will have acknowledged your agreement with the **Terms and Conditions** for the use of this site.

Electronic Employer Contributions Manual

3. First-time users should enter their personal information and set up a new password. Should the password be misplaced or forgotten contact the TIC Fund Office to reset your password.

Home **BIS Contractor Sign Up Screen**

WELCOME NEW CONTRACTOR

In order to view your Benefits Online, you must complete the following form. Please fill in all fields.

When you are finished filling out the form, please double check your information and press the "SIGN UP" Button. Once your information is verified and processed you will receive your new User ID and Password to the Benefit Inquiry Site.

Your First Name: **Your Last Name:**
Company Name:

You must set up a new password to use the Benefit Inquiry Site. Please assign yourself a password and then confirm your password by re-typing your password in the confirm password field.

(NOTE: Passwords must be at least six characters long and contain ONLY letters and numbers.)

New Password: **Confirm New Password:**

NOTE: Once the employer and personal information is entered, the user will return to the Log on Screen to enter the Employer Identification Number with the new password.

Electronic Employer Contributions Manual

4. At the Employer Menu click on Electronic Employer Contributions.

EMPLOYER MENU

Click on one of the following links to view information regarding the employer you entered.

- [Name/Address/Delinquency Information](#)
- [Late Payment Assessment Reports](#)
- [Employer List](#)
- [Release Electronic Employer Batches](#)
- [Back to Search](#)
- [Contribution Information](#)
- [Lockbox Information](#)
- [Electronic Employer Contributions](#)
- [View Electronic Employer Contribution History](#)
- [Log Off System](#)

Electronic Employer Contributions Menu

* [Electronic Employer Contributions User Manual](#)

Electronic Employer Contributions Manual

5. Click on Manual Entry Mode or File Upload Entry Mode

Please select the mode of entry for this contribution upload.

Manual Entry Mode

CSV (.csv) Comma Delimited File Upload Entry Mode

- a) Manual Entry mode lets the user key employee reports online with multiple work dates, trades, and differential data in order to transmit a data file to TIC.
- b) Upload File Entry mode provides the user with a web browser to upload a file already created in the file layout per this manual.

Electronic Employer Contributions Manual

6. When selecting CSV Upload Entry Mode verify the employer information and click CONTINUE

Electronic Employer Contributions - Employer Agreement Verification Process

Employer Name: ABLE ELECTRIC
Employer ID: 12345
Employer Suffix: 0
Address: 1234 N MAIN ST
City: OMAHA
State: NE
Zip Code: 68111-0000
Telephone: (402) 555-1212

You have selected "CSV (.csv) Comma Delimited File Upload Entry Mode" for the above employer. Please review this information and if correct then

If you do not wish to make a "CSV (.csv) Comma Delimited File Upload Entry Mode" for this employer or if the above employer information is incorrect then please contact the fund office and

Electronic Employer Contributions Manual

7. To upload a file click the Browse button and find the selected file on your computer system. Double click on file or select file and click Open. Click on Upload to submit your file.

Electronic Employer Contributions - Employer Agreement Verification Process

Employer Name: ABLE ELECTRIC
Employer ID: 12345
Employer Suffix: 0
Address: 1234 N MAIN ST
City: OMAHA
State: NE
Zip Code: 68111-0000
Telephone: (402) 555-1212

Based on the agreement information currently on file for this company, the value

FILE LAYOUT DESCRIPTION

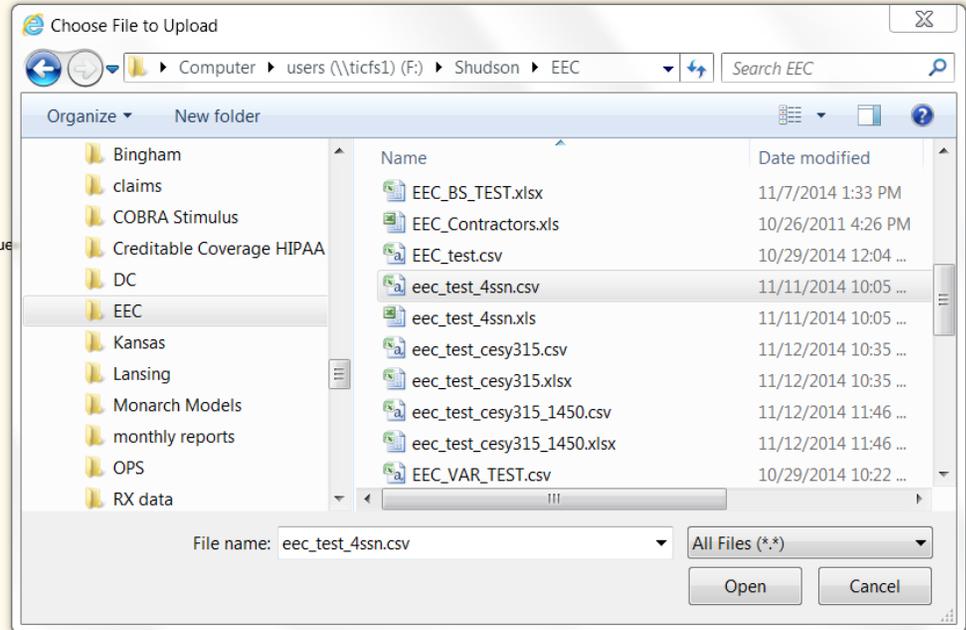
FIELD NAME	FORMAT	LENGTH	REQUIRED
EMPLOYEE SSN	NUMERIC	9	YES
WORK DATE	NUMERIC - CCYYMMDD	8	YES
GROSS WAGES	NUMERIC - DECIMAL	9	*
HOURS WORKED	NUMERIC - DECIMAL	9	*
HOURS PAID	NUMERIC - DECIMAL	9	*
BASE PAID	NUMERIC - DECIMAL	9	*
VARIABLE AMOUNT	NUMERIC - DECIMAL	9	*
LAST NAME	ALPHA	15	YES
FIRST NAME	ALPHA	10	YES
TRADE	ALPHA	2	*
DIFFERENTIAL	ALPHA	2	*

* Pursuant to the Collective Bargaining Agreement (CBA)

Select one of the following options:

1. Upload Your File - Please format your file as a comma delimited CSV (.csv) file in the order listed above and import your data now.

File:



NOTE: To continue you must have already created your contribution file in the comma-separated format. To ensure your file contains the proper detail format see pages 27- 28.

Electronic Employer Contributions Manual

8. This page will show the uploaded file records with a breakdown by each work date, trade, and differential. It will also include the totals for each plan with a total amount due for this contribution file. If you have questions on the rates or amounts and need assistance, contact the TIC Fund Office and ask for the Data Entry Supervisor or the Lead Balancing Clerk.

IMPORTANT INFORMATION:
IF YOU AGREE WITH THE TOTAL AMOUNT DUE BELOW then please print a receipt and attach it with your remittance check and send to the address listed below within 5 business days. You may print and view your receipt by clicking on the 'VIEW PRINTER FRIENDLY RECEIPT' link.

IF YOU DO NOT AGREE WITH THE TOTAL AMOUNT DUE BELOW and wish to cancel this upload then

If you would like to edit your upload file data then

VIEW PRINTER FRIENDLY RECEIPT

Once you have agreed and printed a receipt please click on the 'Process Contribution' button to complete the transaction.

ELECTRONIC EMPLOYER CONTRIBUTION CONFIRMATION

Fund Name:	TEST FUND FOR TIC INTERNATIONAL CORPORATION COMPUTER DIVISION
Employer Name:	ABLE ELECTRIC
Employer ID:	12345
Employer Suffix:	0
Address:	1234 N MAIN ST
City:	OMAHA
State:	NE
Zip Code:	68111
Telephone:	(402) 555-1212

File load successful. You must click the 'Process Contribution' button above to send this transaction to TIC for processing.
 Your confirmation number for this transaction is: **WIF9HOGOUU**

The following is a breakdown of the dollar amounts by Trade, Differential, Work Date and Plan.

TR	DIF	Work Dt	Hrs	Gross \$	\$ Amt	A1	E1	H2	P1
0		20141031	4110.50	\$130,166.27	\$70,289.55	\$6,165.75	\$2,055.25	\$34,117.15	\$27,951.40
50		20141031	136.00	\$2,081.48	\$2,325.60	\$204.00	\$68.00	\$1,128.80	\$924.80
55		20141031	64.00	\$1,077.44	\$1,094.40	\$96.00	\$32.00	\$531.20	\$435.20
60		20141031	441.00	\$8,597.18	\$7,541.10	\$661.50	\$220.50	\$3,660.30	\$2,998.80
80		20141031	197.00	\$4,824.53	\$3,368.70	\$295.50	\$98.50	\$1,635.10	\$1,339.60

The following is a breakdown of the dollar amount owed for each plan.

Plan Code	Plan Name	Dollar Amount	Submit Payment To:
A1	ANNUITY	\$7,422.75	TIC Test Fund
E1	EDUCATION	\$2,474.25	6405 Metcalf
H2	HLTH CARE	\$41,072.55	Suite 200
P1	PENSION	\$33,649.80	Overland Park, KS 66202-9998

Make one check payable to: TIC Test Fund

The Total Amount Due is: \$84,619.35

Signature _____

Electronic Employer Contributions Manual

9. To manually enter employee contribution amounts click on the Manual Entry Mode option.

Please select the mode of entry for this contribution upload.

Manual Entry Mode

CSV (.csv) Comma Delimited File Upload Entry Mode

10. Verify the employer information and click Continue.

Electronic Employer Contributions - Employer Agreement Verification Process

Employer Name:	ABLE ELECTRIC
Employer ID:	12345
Employer Suffix:	0
Address:	1234 N MAIN ST
City:	OMAHA
State:	NE
Zip Code:	68111-0000
Telephone:	(402) 555-1212

You have selected "Manual Entry Mode" for the above employer. Please review this information and if correct then

If you do not wish to make a "Manual Entry" for this employer or if the above employer information is incorrect then please contact the fund office and

Electronic Employer Contributions Manual

11. At this screen enter SSN, first name, last name, gross wages, hours worked, hours paid, work date, trade, and differential. Each agreement or Collective Bargaining Agreement (CBA) may require gross wages, hours paid, base paid, etc. Trade and differential may not pertain to every agreement or CBA. If so, leave those fields blank.

ELECTRONIC EMPLOYER CONTRIBUTION - ADD NEW RECORD

SSN	FIRST NAME	LAST NAME	GROSS WAGES	HOURS WORKED	HOURS PAID	BASE PAID	VARIABLE AMT	WORK DATE (MMDDCCYY)	TRADE	DIFFERENTIAL
123456789	Test	Person	1500	150	150	0.00	0.00	12312012	▼	▼

ELECTRONIC EMPLOYER CONTRIBUTION - EDITS

You may abort this transaction by clicking on the 'Abort Upload' button.

MESSAGE: Your addition to the file was successful and the new information has been saved.

EDIT SSN	DELETE SSN	SSN	FIRST NAME	LAST NAME	GROSS WAGES	HOURS WORKED	HOURS PAID	BASE PAID	VARIABLE AMT	WORK DATE	TRADE	DIFFERENTIAL
EDIT	DELETE	123456789	Test	Person	1,500.00	150.00	150.00	0.00	0.00	12312012		

SSN	FIRST NAME	LAST NAME	GROSS WAGES	HOURS WORKED	HOURS PAID	BASE PAID	VARIABLE AMT	WORK DATE (MMDDCCYY)	TRADE	DIFFERENTIAL
			0.00	0.00	0.00	0.00	0.00	12312012	▼	▼

Once you are finished adding and editing your records, please click the 'continue' button below to proceed.

Press Save to add first employee and key in next employee information

Electronic Employer Contributions Manual

12. Add records until completed then press Continue when finished

***Note:** You may change work date, trade, and differential combinations per employee record.

ELECTRONIC EMPLOYER CONTRIBUTION - EDITS

You may abort this transaction by clicking on the 'Abort Upload' button.

MESSAGE: Your addition to the file was successful and the new information has been saved.

EDIT SSN	DELETE SSN	SSN	FIRST NAME	LAST NAME	GROSS WAGES	HOURS WORKED	HOURS PAID	BASE PAID	VARIABLE AMT	WORK DATE	TRADE	DIFFERENTIAL
EDIT	DELETE	123456789	Test	Person	1,500.00	150.00	150.00	0.00	0.00	12312012		

SSN	FIRST NAME	LAST NAME	GROSS WAGES	HOURS WORKED	HOURS PAID	BASE PAID	VARIABLE AMT	WORK DATE (MMDDCCYY)	TRADE	DIFFERENTIAL
123654789	Test2	Person	2000	200	205	0.00	0.00	12312012	CM	

Once you are finished adding and editing your records, please click the 'continue' button below to proceed.

ELECTRONIC EMPLOYER CONTRIBUTION - EDITS

You may abort this transaction by clicking on the 'Abort Upload' button.

MESSAGE: Your addition to the file was successful and the new information has been saved.

EDIT SSN	DELETE SSN	SSN	FIRST NAME	LAST NAME	GROSS WAGES	HOURS WORKED	HOURS PAID	BASE PAID	VARIABLE AMT	WORK DATE	TRADE	DIFFERENTIAL
EDIT	DELETE	123456789	Test	Person	1,500.00	150.00	150.00	0.00	0.00	12312012		
EDIT	DELETE	123654789	Test2	Person	2,000.00	200.00	205.00	0.00	0.00	12312012	CM	

SSN	FIRST NAME	LAST NAME	GROSS WAGES	HOURS WORKED	HOURS PAID	BASE PAID	VARIABLE AMT	WORK DATE (MMDDCCYY)	TRADE	DIFFERENTIAL
			0.00	0.00	0.00	0.00	0.00	12312012		

Once you are finished adding and editing your records, please click the 'continue' button below to proceed.

Electronic Employer Contributions Manual

13. This page displays the entire file summary with sub-total breakdown for each work date, trade, and differential combination. It includes totals for each plan with a total amount due for this contribution file. If you have questions on the rates or amounts and need assistance, contact the TIC Fund Office and ask for the Data Entry Supervisor or the Lead Balancing Clerk.

IMPORTANT INFORMATION:
IF YOU AGREE WITH THE TOTAL AMOUNT DUE BELOW then please print a receipt and attach it with your remittance check and send to the address listed below within 5 business days. You may print and view your receipt by clicking on the 'VIEW PRINTER FRIENDLY RECEIPT' link.

IF YOU DO NOT AGREE WITH THE TOTAL AMOUNT DUE BELOW and wish to cancel this upload then

If you would like to edit your upload file data then

VIEW PRINTER FRIENDLY RECEIPT

Once you have agreed and printed a receipt please click on the 'Process Contribution' button to complete the transaction.

ELECTRONIC EMPLOYER CONTRIBUTION CONFIRMATION

Fund Name:	TEST FUND FOR TIC INTERNATIONAL CORPORATION COMPUTER DIVISION
Employer Name:	ABLE ELECTRIC
Employer ID:	12345
Employer Suffix:	0
Address:	1234 N MAIN ST
City:	OMAHA
State:	NE
Zip Code:	68111
Telephone:	(402) 555-1212

File load successful. You must click the 'Process Contribution' button above to send this transaction to TIC for processing.
 Your confirmation number for this transaction is: **TGPSI7VZ6S**

The following is a breakdown of the dollar amounts by Trade, Differential, Work Date and Plan.

TR	DIF	Work Dt	Hrs	Gross \$	\$ Amt	A1	D1	E1	H2	P1	P2	V1
CM		20121231	200.00	\$2,000.00	\$3,938.00	\$1,000.00	\$368.00	\$0.00	\$1,370.00	\$500.00	\$300.00	\$400.00

The following is a breakdown of the dollar amount owed for each plan.

Plan Code	Plan Name	Dollar Amount
A1	ANNUITY	\$1,225.00
D1	DUES	\$368.00
E1	EDUCATION	\$75.00
H2	HLTH CARE	\$2,615.00
P1	PENSION	\$1,520.00
P2	SUPP PEN	\$300.00
V1	VACATION	\$400.00

Submit Payment To: TIC Test Fund
 6405 Metcalf
 Suite 200
 Overland Park, KS 66202-9998

Make one check payable to: TIC Test Fund

 Signature

The Total Amount Due is: \$6,503.00

Electronic Employer Contributions Manual

a) ABORT UPLOAD

Click on Abort Upload to erase contribution file and it will return back to the main Employer Menu. A message that your file has been successfully aborted will display.

EMPLOYER MENU

Click on one of the following links to view information regarding the employer you entered.

- [Name/Address/Delinquency Information](#)
- [Late Payment Assessment Reports](#)
- [Employer List](#)
- [Release Electronic Employer Batches](#)
- [Back to Search](#)
- [Contribution Information](#)
- [Lockbox Information](#)
- [Electronic Employer Contributions](#)
- [View Electronic Employer Contribution History](#)
- [Log Off System](#)

Electronic Employer Contributions Menu

* [Electronic Employer Contributions User Manual](#)

MESSAGE: Your Electronic Employer Contribution Upload has been sucessfully aborted.

Electronic Employer Contributions Manual

b) PERFORM FILE EDITS

Click on Perform File Edits to view the data entered from the manual entries. Options include deleting a record, adding another employee, or changing information on an existing employee by using the on-screen instructions.

ELECTRONIC EMPLOYER CONTRIBUTION - EDITS

You may abort this transaction by clicking on the 'Abort Upload' button.

MESSAGE: Your addition to the file was successful and the new information has been saved.

EDIT SSN	DELETE SSN	SSN	FIRST NAME	LAST NAME	GROSS WAGES	HOURS WORKED	HOURS PAID	BASE PAID	VARIABLE AMT	WORK DATE	TRADE	DIFFERENTIAL
EDIT	DELETE	123456789	Test	Person	150.00	150.00	150.00	0.00	0.00	12312012		
EDIT	DELETE	123654789	Test2	Person	200.00	200.00	205.00	0.00	0.00	12312012	CM	

SSN	FIRST NAME	LAST NAME	GROSS WAGES	HOURS WORKED	HOURS PAID	BASE PAID	VARIABLE AMT	WORK DATE (MMDDCCYY)	TRADE	DIFFERENTIAL
<input type="text"/>	<input type="text"/>	<input type="text"/>	0.00	0.00	0.00	0.00	0.00	12312012	▼	▼

Once you are finished adding and editing your records, please click the 'continue' button below to proceed.

ELECTRONIC EMPLOYER CONTRIBUTION - EDITS

EDIT INFO	SSN	FIRST NAME	LAST NAME	GROSS WAGES	HOURS WORKED	HOURS PAID	BASE PAID	VARIABLE AMT	WORK DATE (MMDDCCYY)	TRADE	DIFFERENTIAL
Current Info	123654789	Test2	Person	200.00	200.00	205.00	0.00	0.00	12312012	CM	
New Info	123654789	Test2	Person	200.00	200.00	205.00	0.00	0.00	12312012	▼	▼

Electronic Employer Contributions Manual

c) PROCESS CONTRIBUTION

Click Process Contribution to complete the manual file upload. If an additional receipt is necessary, go to View Electronic Employer Contribution History, select the confirmation number, and click on View Receipt. Use your browser print button.

EMPLOYER MENU

Click on one of the following links to view information regarding the employer you entered.

- [Name/Address/Delinquency Information](#)
- [Late Payment Assessment Reports](#)
- [Employer List](#)
- [Release Electronic Employer Batches](#)
- [Back to Search](#)
- [Contribution Information](#)
- [Lockbox Information](#)
- [Electronic Employer Contributions](#)
- [View Electronic Employer Contribution History](#)
- [Log Off System](#)

Electronic Employer Contributions Menu

* [Electronic Employer Contributions User Manual](#)

MESSAGE: Load Successful. Again your confirmation number is JWUY1DMXK8

Please include this confirmation receipt with the payment

NOTE: This file will not be processed until payment/deposit is received by the Fund Office.

Mailing Payment Information

Once the File Load is Successful:

1. Print receipt.
2. Click the “Process Contribution” button to send this file to TIC for processing.
3. Attach receipt to your remittance check and send payment to address printed on the receipt(s) within 5 business days.
4. Keep copy of receipt(s) for your records.

Viewing Electronic Contribution History

1. The Employer Menu has an option to View Electronic Employer Contribution History. This will show you the files for the work months you have already submitted electronically.

EMPLOYER MENU

Click on one of the following links to view information regarding the employer you entered.

- [Name/Address/Delinquency Information](#)
- [Late Payment Assessment Reports](#)
- [Employer List](#)
- [Release Electronic Employer Batches](#)
- [Back to Search](#)
- [Contribution Information](#)
- [Lockbox Information](#)
- [Electronic Employer Contributions](#)
- [View Electronic Employer Contribution History](#)
- [Log Off System](#)

Electronic Employer Contributions Menu

* [Electronic Employer Contributions User Manual](#)

Electronic Employer Contributions Manual

2. To view the confirmation page with totals or to print again, select View Receipt.

DELETE	CONFIRMATION #	TIC RELEASED	UPLOAD DATE	VIEW RECEIPT
[Delete]	JWUY1DMXK8	YES	1/19/2015	View Receipt
[Delete]	DQYX48ZNS6	YES	2/5/2014	View Receipt
[Delete]	BIPZ69GS20	YES	9/18/2013	View Receipt
[Delete]	AZC5QJYLCW	YES	9/6/2013	View Receipt
[Delete]	HN3LFIBIYB	YES	9/6/2013	View Receipt
[Delete]	LS8HH8LG0K	YES	9/6/2013	View Receipt
[Delete]	SGP04JHBVJ	YES	9/6/2013	View Receipt
[Delete]	SWBGOLMIOF	YES	9/6/2013	View Receipt
[Delete]	5LFMNU7EXX	YES	9/5/2013	View Receipt
[Delete]	LP5EDGMHE	YES	9/5/2013	View Receipt
[Delete]	MIZRCZVF4Q	YES	9/5/2013	View Receipt
[Delete]	Y2ZY16WJ58	YES	9/5/2013	View Receipt
[Delete]	9CHPQDMERN	YES	9/4/2013	View Receipt
[Delete]	25LVWXQNWG	YES	9/3/2013	View Receipt
[Delete]	6VNLIVHTO2	YES	9/3/2013	View Receipt
[Delete]	BQEZJJC4IW	YES	9/3/2013	View Receipt
[Delete]	QE9N3QVA87	YES	9/3/2013	View Receipt
[Delete]	QY6SJGIY9X	YES	9/3/2013	View Receipt
[Delete]	RL20RY65P3	YES	9/3/2013	View Receipt
[Delete]	QT2X4TSUIC	YES	8/30/2013	View Receipt

Electronic Employer Contributions Manual

3. If you would like to print the confirmation page, use your browser print option.

ELECTRONIC EMPLOYER CONTRIBUTION CONFIRMATION													Go Back
You may print this receipt by clicking on the your browser's print button or by selecting 'File' then 'Print' from your browser's menu bar.													
Fund Name:	TEST FUND FOR TIC INTERNATIONAL CORPORATION COMPUTER DIVISION												
Employer Name:	ABLE ELECTRIC												
Employer ID:	12345												
Employer Suffix:	0												
Address:	1234 N MAIN ST												
City:	OMAHA												
State:	NE												
Zip Code:	68111												
Telephone:	(402) 555-1212												
File load successful. Your confirmation number for this transaction is: BIPZ69GS20													
The following is a breakdown of the dollar amounts by Trade, Differential, Work Date and Plan.													
TR	DIF	Work Dt	Hrs	Gross \$	\$ Amt	A1	D1	H2	I1	P1	P2	T1	V1
A0		20130831	350.00	\$3,500.00	\$1,771.75	\$12.50	\$0.00	\$500.00	\$6.25	\$1,250.00	\$0.00	\$3.00	\$0.00
A0		20130731	350.00	\$3,500.00	\$708.70	\$5.00	\$0.00	\$200.00	\$2.50	\$500.00	\$0.00	\$1.20	\$0.00
B1	SH	20130831	150.00	\$1,500.00	\$3,637.50	\$0.00	\$7.50	\$345.00	\$0.00	\$285.00	\$0.00	\$0.00	\$3,000.00
CC		20130831	400.00	\$4,000.00	\$4,236.00	\$375.00	\$501.00	\$1,950.00	\$0.00	\$750.00	\$75.00	\$0.00	\$585.00
CC		20130731	400.00	\$4,000.00	\$1,412.00	\$125.00	\$167.00	\$650.00	\$0.00	\$250.00	\$25.00	\$0.00	\$195.00
The following is a breakdown of the dollar amount owed for each plan.													
Plan Code	Plan Name	Dollar Amount											
A1	ANNUITY	\$517.50											
D1	DUES	\$675.50											
H2	HLTH CARE	\$3,645.00											
I1	INDUSTRY	\$8.75											
P1	PENSION	\$3,035.00											
P2	SUPP PEN	\$100.00											
T1	TRAINING	\$4.20											
V1	VACATION	\$3,780.00											
			Submit Payment To: TIC Test Fund 6405 Metcalf Suite 200 Overland Park, KS 66202-9998										
			Make one check payable to: TIC Test Fund										
			_____ Signature										
The Total Amount Due is:			\$11,765.95										

Using Prior History File to Create a New File

1. Select View Electronic Employer Contribution History, choose the history file you want to use as your template for the new file, and select the Confirmation filename.

DELETE	CONFIRMATION #	TIC RELEASED	UPLOAD DATE	VIEW RECEIPT
[Delete]	JWUY1DMXK8	YES	1/19/2015	View Receipt
[Delete]	DQYX48ZNS6	YES	2/5/2014	View Receipt
[Delete]	BIPZ69GS2O	YES	9/18/2013	View Receipt
[Delete]	AZC5QJYLCW	YES	9/6/2013	View Receipt
[Delete]	HN3LFIBIYB	YES	9/6/2013	View Receipt
[Delete]	LS8HH8LG0K	YES	9/6/2013	View Receipt
[Delete]	SGP04JHBVJ	YES	9/6/2013	View Receipt
[Delete]	SWBGOLMI0F	YES	9/6/2013	View Receipt
[Delete]	5LFMNU7EXX	YES	9/5/2013	View Receipt
[Delete]	LP5EDGIVHE	YES	9/5/2013	View Receipt
[Delete]	MIZRCZVF4Q	YES	9/5/2013	View Receipt
[Delete]	Y2ZY16WJ58	YES	9/5/2013	View Receipt
[Delete]	9CHPQDMERN	YES	9/4/2013	View Receipt
[Delete]	25LVWXQNWG	YES	9/3/2013	View Receipt
[Delete]	6VNLIVHTO2	YES	9/3/2013	View Receipt
[Delete]	BQEZJJC4IW	YES	9/3/2013	View Receipt
[Delete]	QE9N3QVA87	YES	9/3/2013	View Receipt
[Delete]	QY6SJGIY9X	YES	9/3/2013	View Receipt
[Delete]	RL20RY65P3	YES	9/3/2013	View Receipt
[Delete]	QT2X4TSUIC	YES	8/30/2013	View Receipt

Electronic Employer Contributions Manual

2. Select the 'clicking here' option to begin new manual file entry

Upload History View for Confirmation Number JWUY1DMXK8

[Go Back](#)

SSN	FIRST NAME	LAST NAME	GROSS WAGES	HOURS WORKED	HOURS PAID	BASE PAID	VARIABLE AMT	WORK DATE	TRADE	DIFFERENTIAL
123456789	Test	Person	150.00	150.00	150.00	0.00	0.00	12312012		
123654789	Test2	Person	200.00	200.00	205.00	0.00	0.00	12312012	CM	

[Go Back](#)

If you would like to re-use this file information for a new electronic contribution, you may do so by [clicking here](#).

Change all appropriate information such as work month, hours worked, gross amount, trade, or differential. You may also add additional employees or delete employees you do not want to report in this new file.

NOTE: *This option is to create another manual file.*

Do not use this option to upload a CSV file. Instead, go back to the Employer Menu and select Electronic Employer Contributions and select File Upload Entry Mode.

Electronic Employer Contributions Manual

- To add an employee, select 'Add New Record to File'. Enter SSN, name, and applicable amount fields. The new file will default the same work date for the first record. Change work dates per record as needed. Click Save to return to previous screen.

ELECTRONIC EMPLOYER CONTRIBUTION - EDITS

You may abort this transaction by clicking on the 'Abort Upload' button.

EDIT SSN	DELETE SSN	SSN	FIRST NAME	LAST NAME	GROSS WAGES	HOURS WORKED	HOURS PAID	BASE PAID	VARIABLE AMT	TRADE	DIFFERENTIAL
EDIT	DELETE	123456789	Test	Person	150.00	150.00	150.00	0.00	0.00		
EDIT	DELETE	123654789	Test2	Person	200.00	200.00	205.00	0.00	0.00	CM	

SSN	FIRST NAME	LAST NAME	GROSS WAGES	HOURS WORKED	HOURS PAID	BASE PAID	VARIABLE AMT	WORK DATE (MMDDCCYY)	TRADE	DIFFERENTIAL
987654321	Test3	Person	100	100	120	0.00	0.00	01312013	▼	▼

Once you are finished adding and editing your records, please click the 'continue' button below to proceed.

- To change a record, click Edit. Make all necessary changes and click Save.

ELECTRONIC EMPLOYER CONTRIBUTION - EDITS

EDIT INFO	SSN	FIRST NAME	LAST NAME	GROSS WAGES	HOURS WORKED	HOURS PAID	BASE PAID	VARIABLE AMT	WORK DATE (MMDDCCYY)	TRADE	DIFFERENTIAL
Current Info	123456789	Test	Person	150.00	150.00	150.00	0.00	0.00			
New Info	123456789	Test	Person	125	125	125	0.00	0.00	01312013	▼	▼

Electronic Employer Contributions Manual

- To delete a record, click Delete next to the appropriate employee.

ELECTRONIC EMPLOYER CONTRIBUTION - EDITS

You may abort this transaction by clicking on the 'Abort Upload' button.

MESSAGE: SSN 123654789 has been successfully deleted.

EDIT SSN	DELETE SSN	SSN	FIRST NAME	LAST NAME	GROSS WAGES	HOURS WORKED	HOURS PAID	BASE PAID	VARIABLE AMT	WORK DATE	TRADE	DIFFERENTIAL
EDIT	DELETE	123456789	Test	Person	125.00	125.00	125.00	0.00	0.00	01312013		
EDIT	DELETE	987654321	Test3	Person	100.00	100.00	120.00	0.00	0.00	01312013		

SSN	FIRST NAME	LAST NAME	GROSS WAGES	HOURS WORKED	HOURS PAID	BASE PAID	VARIABLE AMT	WORK DATE (MMDDCCYY)	TRADE	DIFFERENTIAL
<input type="text"/>	<input type="text"/>	<input type="text"/>	0.00	0.00	0.00	0.00	0.00	01312013	<input type="text" value="v"/>	<input type="text" value="v"/>

Once you are finished adding and editing your records, please click the 'continue' button below to proceed.

- Once you have made all appropriate changes to the records, click Continue to get to the Confirmation page with totals where you can print your receipt to send with your check for processing.
- You may now Abort the file, Process Contribution, or Perform File Edits

Electronic Employer Contributions Manual

8. This confirmation page is the same page as processing a new file upload. See pages 14 – 17 for instructions.

IMPORTANT INFORMATION:

IF YOU AGREE WITH THE TOTAL AMOUNT DUE BELOW then please print a receipt and attach it with your remittance check and send to the address listed below within 5 business days. You may print and view your receipt by clicking on the 'VIEW PRINTER FRIENDLY RECEIPT' link.

IF YOU DO NOT AGREE WITH THE TOTAL AMOUNT DUE BELOW and wish to cancel this upload then

If you would like to edit your upload file data then

VIEW PRINTER FRIENDLY RECEIPT

Once you have agreed and printed a receipt please click on the 'Process Contribution' button to complete the transaction.

ELECTRONIC EMPLOYER CONTRIBUTION CONFIRMATION

Fund Name:	TEST FUND FOR TIC INTERNATIONAL CORPORATION COMPUTER DIVISION
Employer Name:	ABLE ELECTRIC
Employer ID:	12345
Employer Suffix:	0
Address:	1234 N MAIN ST
City:	OMAHA
State:	NE
Zip Code:	68111
Telephone:	(402) 555-1212

File load successful. You must click the 'Process Contribution' button above to send this transaction to TIC for processing.

Your confirmation number for this transaction is: **XHTTOL7B14**

The following is a breakdown of the dollar amounts by Trade, Differential, Work Date and Plan.

TR	DIF	Work Dt	Hrs	Gross \$	\$ Amt	A1	E1	H2	P1
		20130131	225.00	\$225.00	\$3,847.50	\$337.50	\$112.50	\$1,867.50	\$1,530.00

The following is a breakdown of the dollar amount owed for each plan.

Plan Code	Plan Name	Dollar Amount	Submit Payment To:
A1	ANNUITY	\$337.50	TIC Test Fund
E1	EDUCATION	\$112.50	6405 Metcalf
H2	HLTH CARE	\$1,867.50	Suite 200
P1	PENSION	\$1,530.00	Overland Park, KS 66202-9998

Make one check payable to: TIC Test Fund

The Total Amount Due is: \$3,847.50

Signature

File Layout Specifications

Description	Length	Format
SSN	9	999999999 *
Work Date	8	CCYYMMDD numeric *
Gross Wages	9	9999999.99
Hours Worked	9	9999999.99
Hours Paid	9	9999999.99
Base Paid	9	9999999.99
Variable Amount	9	9999999.99
Last Name	15	alpha
First Name	10	alpha
Trade	2	alpha * must use exact code from fund office
Differential	2	alpha * must use exact code from fund office

*REQUIRED FIELD

Electronic Employer Contributions Manual

Please fill in the appropriate fields that pertain to your particular collective bargaining agreement. Please note that in order for the Fund Office to properly process your file, all information must be submitted; however, the following information **must** be in your file in order for your file to successfully upload: SSN, Work Date, First and Last Name, Hours Worked, Hours Paid, and/or Gross Wages. The Trade and Differential codes are set up by the TIC Fund Office per the CBA so you may need to obtain a key from the office to complete your file.

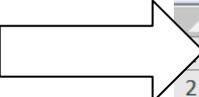
	A	B	C	D	E	F	G	H	I	J	K	L
1	SSN	WORK DATE	GROSS WAGES	HOURS WORKED	HOURS PAID	BASE PAID	VARIABLE AMT	LAST NAME	FIRST NAME	TRADE	DIFFERENTIAL	
2	111111111	20130131	1000	100	105			Person	Test1			
3	222222222	20130131	1500	150	150			Person	Test2	IW		
4	333333333	20121231	2000	200	200			Person	Test3			
5	444444444	20130131	1000	100	102.5			Person	Test4	VD	02	
6												

Trade (Column J) and Differential (Column K) should be formatted as Text in the excel format in order to convert to the comma-separated file correctly. Also reduce column width to 2 char for both these fields.

- * **Note:** If you do not have a listing of the proper Trade and Differential codes, please contact the fund office data entry supervisor/clerk to obtain this list.
Unknown codes in the Trade and/or Differential columns will not get processed successfully.

Converting Excel to a Comma Delimited File (*.csv)

1. Delete any header records from the file so it has only detail lines.



	A	B	C	D	E	F	G	H	I	J	K	L	
	SSN	WORK DATE	GROSS WAGES	HOURS WORKED	HOURS PAID	BASE PAID	VARIABLE AMT	LAST NAME	FIRST NAME	TRADE	DIFFERENTIAL		
2	111111111	20130131	1000	100	105			Person	Test1				
3	222222222	20130131	1500	150	150			Person	Test2	IW			
4	333333333	20121231	2000	200	200			Person	Test3				
5	444444444	20130131	1000	100	102.5			Person	Test4	VD	02		
6													

Electronic Employer Contributions Manual

2. We recommend simply keying an asterisk sign in cell L1 so you won't have to zero fill all cells in which you do not have dollars or amounts to report on each individual.

	A	B	C	D	E	F	G	H	I	J	K	L
1	111111111	20130131	1000	100	105			Person	Test1			*
2	222222222	20130131	1500	150	150			Person	Test2	IW		
3	333333333	20121231	2000	200	200			Person	Test3			
4	444444444	20130131	1000	100	102.5			Person	Test4	VD	02	
5												

	A	B	C	D	E	F	G	H	I	J	K	L
1	111111111	20130131	1000	100	105	0	0	Person	Test1			*
2	222222222	20130131	1500	150	150	0	0	Person	Test2	IW		
3	333333333	20121231	2000	200	200	0	0	Person	Test3			
4	444444444	20130131	1000	100	102.5	0	0	Person	Test4	VD	02	
5												

***Key an asterisk sign in cell L1 –OR- Zero-fill all blank cells in the columns C through G.**

Electronic Employer Contributions Manual

3. Click on **File-Save As** and select file type csv (Comma-Delimited) from the dropdown box.
4. Name the file up to 8 characters in length with no spaces, commas, dashes, or special characters.

	A	B	C	D	E	F	G	H	I	J	K	L	M
1	111111111	20130131	1000	100	105	0	0	Person	Test1			*	
2	222222222	20130131	1500	150	150	0	0	Person	Test2	IW			
3	333333333	20121231	2000	200	200	0	0	Person	Test3				
4	444444444	20130131	1000	100	102.5	0	0	Person	Test4	VD	02		
5													
6													
7													
8													
9													
10													
11													
12													
13													
14													
15													
16													
17													
18													
19													
20													
21													
22													
23													
24													
25													
26													
27													
28													
29													
30													
31													

The screenshot shows a 'Save As' dialog box overlaid on a spreadsheet. The spreadsheet data is as follows:

	A	B	C	D	E	F	G	H	I	J	K	L	M
1	111111111	20130131	1000	100	105	0	0	Person	Test1			*	
2	222222222	20130131	1500	150	150	0	0	Person	Test2	IW			
3	333333333	20121231	2000	200	200	0	0	Person	Test3				
4	444444444	20130131	1000	100	102.5	0	0	Person	Test4	VD	02		

The 'Save As' dialog box is open to the 'Temp' folder on the C: drive. The file name is 'eectest' and the save type is 'CSV (Comma delimited) (*.csv)'. The 'Temp' folder is selected in the left pane. The main pane shows 'No items match your search.' The 'File name' field contains 'eectest', 'Save as type' is 'CSV (Comma delimited) (*.csv)', 'Authors' is 'Hudson, Stephen', 'Tags' is 'Add a tag', and 'Title' is 'Add a title'. There are 'Save' and 'Cancel' buttons at the bottom right.

Electronic Employer Contributions Manual

5. You will receive a warning message from Microsoft Excel, click OK.
6. You may get a second warning message from Microsoft Excel, click Yes to save file in csv format.

	A	B	C	D	E	F	G	H	I	J	K	L
1	111111111	20130131	1000	100	105	0	0	Person	Test1			*
2	222222222	20130131	1500	150	150	0	0	Person	Test2	IW		
3	333333333	20121231	2000	200	200	0	0	Person	Test3			
4	444444444	20130131	1000	100	102.5	0	0	Person	Test4	VD	02	
5												
6												
7												
8												
9												
10												
11												
12												
13												
14												
15												
16												

Microsoft Office Excel

ectest.csv may contain features that are not compatible with CSV (Comma delimited). Do you want to keep the workbook in this format?

- To keep this format, which leaves out any incompatible features, click Yes.
- To preserve the features, click No. Then save a copy in the latest Excel format.
- To see what might be lost, click Help.

Yes No Help

7. Exit the file. If you are prompted to save again, you can click No.
8. Remember where you saved this file on your computer as well as the name so you can find it easily when you are asked to Browse to the file during the upload process.