USMX-ILA COVID PANDEMIC RELIEF FUND (CPR) APPLICATION FOR BENEFITS

In order to enable the USMX-ILA COVID Pandemic Relief Fund ("Fund") to process your claim for benefits, please complete this form and return it to Steamship Trade Association of Baltimore, Inc. or fax 410-248-3378 , or drop off at 1901 Portal Street, Baltimore, MD 21224

Name SS #.

Address Port #

| Name | SS #. |
|--|--|
| Address | Port # |
| | Employer Name |
| Phone No. email | ILA Local # |
| QUALIFYING EVENT. Please check the category that applies to you: | Required Documentation for each qualifying event. Check if provided: |
| ☐ I have tested positive for COVID-19 | ☐ Documentation of my positive COVID-19 test result |
| ☐ I was quarantined by my employer or a healthcare provider | |
| | ☐ Documentation of quarantine by employer or healthcare provider |
| ☐ A person who lives in my residence has tested positive for COVID-19 | ☐ Documentation of the positive COVID-19 test result of the person living your |
| 2. Required Information (add additional sheets if necessary): | |
| Date you applied for unemployment benefits From what State? | |
| 3. Date GrantedOR Date Denied 4. Amount of weekly benefitDate benefit first received | |
| 5. Period for which benefits are being received | |
| Please submit the following documents: ☐ Documentation of your approval or denial of unemployment benefits ☐ Documentation of amount of benefits received and period of benefits received | |
| IF YOU ANSWERED THAT YOUR APPLICATION FOR UNEMPLOYMENT BENEFITS WAS DENIED, PLEASE PROVIDE THE FOLLOWING ADDITIONAL INFORMATION | |
| 3. Do you qualify for any contractual or governmental sick benefit or disability benefit? YES □ NO □ IF YES, describe benefit: | |
| Did you apply for this benefit: YES □ NO □ Amount of benefit | |
| Period of time benefit covered | |
| 4. Please state the period for which you are seeking CPR benefits: | |
| | |
| The CPR Fund will request periodic updates from you documenting your continued eligibility for the receipt of benefits. | |
| Signature of Applicant: | Date: |