



# CWA Savings & Retirement Trust

Plan ID: 990500050

## LOAN REPAYMENT FORM

### 1. Participant Information

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
 Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
 Name *(Please Print)* \_\_\_\_\_  
 Street Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_  
 Daytime Phone # \_\_\_\_\_

### Information on Loan Prepayments

*(Please read carefully before proceeding.)*

You may payoff the outstanding principal balance of your loan at any time. **Payments must be made by certified bank check or money order. Personal checks will not be accepted and will be returned.** Your check should be made payable to "CWA SRT FBO your name" and include your Social Security Number on your check. Please staple certified bank check or money order to form.

You can call the CWA Trust Office at 202-434-1389 to obtain your current outstanding loan balance or if you are unsure of your payment amount.

### Payoff Outstanding Loan Balance in Full

*(Please complete the following if you want to pay off outstanding loan balance in full)*

Attached with this form is a certified bank check or money order in the amount of \$ \_\_\_\_\_ which will repay loan id# \_\_\_\_\_ in full.

### Loan Repayment Amount

*(Please complete the following if you want to submit outstanding payments missed.)*

Attached with this form is a certified bank check or money order in the amount of \$ \_\_\_\_\_ for missed loan repayments on loan id# \_\_\_\_\_.

**NOTE:** *Loan Repayments must be the exact Re-Payment amount or in exact multiples of the payment amount.*

### 2. Participant Information

*Please sign, date, staple certified bank check or money order to Form and mail to:*

CWA Savings and Retirement Trust  
 Attn: CWA Trust Office  
 501 Third Street NW  
 Washington, DC 20001

Participant Signature \_\_\_\_\_ Date \_\_\_\_\_