



# ALASKA TEAMSTER-EMPLOYER WELFARE TRUST

520 E 34<sup>TH</sup> Ave, Suite 107

Anchorage, Alaska 99503-4116

907/565-8300 or 800/478-4450 (Toll Free)

## STATEMENT OF SUPPORT

Paying benefits for children can become complicated because of family arrangements. To help us determine which plan will pay first on your dependent's claims, we follow the same Coordination of Benefit guidelines used by most insurance companies and plans governed by ERISA.

For children whose parents are divorced, should a court decree state that one of the parents is responsible for the child's health care expenses; that plan pays first. Otherwise, the plan of the parent with custody of the child pays first.

We need the following information for our records before we can enroll your children or stepchildren.

Alaska Teamster Member: \_\_\_\_\_ SS# \_\_\_\_\_

1. Individual with legal custody of child: \_\_\_\_\_

Relationship to child: \_\_\_\_\_

2. Individual in whose home the child resides: \_\_\_\_\_

3. Do you provide more than 50% of the child's support? YES \_\_\_\_\_ NO \_\_\_\_\_

4. Does the child have other coverage available to him/her through parents or step-parents?  
YES \_\_\_\_\_ NO \_\_\_\_\_ If YES, complete below:

Individual with other coverage: \_\_\_\_\_

Relationship to child/children: \_\_\_\_\_

Name of other insurance plan: \_\_\_\_\_

5. Does the divorce decree or any other legal document establish financial responsibility for insurance coverage for this child/children? NO \_\_\_\_\_ YES \_\_\_\_\_

**If YES, please attach a copy of the section of your or your spouse's divorce decree that pertains to the support and insurance for the children.**

6. Please list the names of the children affected by the divorce decree:

\_\_\_\_\_  
\_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_