

FORM LM-3 LABOR ORGANIZATION ANNUAL REPORT

FOR USE BY LABOR ORGANIZATIONS WITH LESS THAN \$200,000 IN TOTAL ANNUAL RECEIPTS

This report is mandatory under PL 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

For Official Use Only	1 FILE NUMBER 002-676	2 PERIOD COVERED MO DAY YEAR From 10 01 2003 Through 09 30 2004	3 (a) AMENDED — If this is an amended report correcting a previously filed report, check here <input checked="" type="checkbox"/> (b) TERMINAL — If your organization ceased to exist and this is its terminal report, see Section XII of the instructions and check here (c) SUBSIDIARY — If this is a report for a subsidiary organization of your union as defined in Section X of the instructions, check here
	<p>IMPORTANT</p> <p>Peel off the address label from the back of the package and place it here.</p> <p>If the label information is correct, leave Items 4 through 8 blank</p> <p>If any of the label information is incorrect, complete Items 4 through 8</p>		8 MAILING ADDRESS (Type or print in capital letters)
4 AFFILIATION OR ORGANIZATION NAME AFL-CIO		First Name RICHARD	
5 DESIGNATION (Local, Lodge, etc) LOCAL		Last Name EVANS	
6 DESIGNATION NUMBER 1060		PO Box • Building and Room Number (if any)	
7 UNIT NAME (if any)		Number and Street 595 SOMERSET ST	
9 Are your organization's records kept at its mailing address? (If "No" provide address in Item 56) Yes <input checked="" type="checkbox"/> No		City NORTH PLAINFIELD	
		State ZIP Code + 4 NJ 07060-4908	

56 ADDITIONAL INFORMATION (If more space is needed, attach additional pages properly identified)

Item Number	Description
10	CWA LOCAL 1060 HOLDING CO - HOLDS TITLE TO LOCAL'S OFFICE BUILDING (FILES SEPARATE LM-3)
11	RICHARD EVANS - SECRETARY TRB NUMBER

Each of the undersigned, duly authorized officers of the above labor organization, declares, under the applicable penalties of law, that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See Section VI on penalties in the instructions)

57 SIGNED <u>Douglas L. Bunker</u>	PRESIDENT (If other title, see instructions)	58 SIGNED <u>Richard J. Evans</u>	TREASURER (If other title, see instructions)
<u>7/21/05</u> Date	<u>(908) 582-2843</u> Telephone Number	<u>07/21/05</u> Date	<u>(908) 561-8806</u> Telephone Number

During the Reporting Period Did Your Organization

- | | | |
|---|-----|----|
| | Yes | No |
| 10 Have a "subsidiary organization" as defined in Section X of the instructions? | X | |
| 11 Create or participate in the administration of a trust or other fund or organization, as defined in the instructions, which provides benefits for members or their beneficiaries? | | X |
| 12 Have a political action committee (PAC) fund? | | X |
| 13 Acquire or dispose of any goods or property in any manner other than by purchase or sale? | | X |
| 14 Have an audit or review of its books and records by an outside accountant or by a parent body auditor/representative? | | X |
| 15 Discover any loss or shortage of funds or other property?
<i>(Answer "Yes" even if there has been repayment or recovery)</i> | | X |
| 16 Have any officer who was paid \$10,000 or more by your organization and also received \$10,000 or more as an officer or employee of another labor organization or of an employee benefit plan? | | X |
| 17 Pay any employee salary, allowances, and other expenses which, together with any payments from affiliates, totaled more than \$10,000? | | X |
| 18 Have loans totaling more than \$250 to any officer, employee, or member, or make any loans to a business enterprise? | | X |

(If the answer to any of the above questions is "Yes," provide details in Item 56 on page 1 as explained in the instructions for each item)

- 19 How many members did your organization have at the end of the reporting period? 142
- 20 What is the maximum amount recoverable under your organization's fidelity bond for a loss caused by any officer or employee of your organization? \$ 50000
- 21 During the reporting period, did your organization have any changes in its constitution and bylaws (other than rates of dues and fees) or in practices/procedures listed in the instructions?
(If the constitution and bylaws have changed, attach two new dated copies. If practices/procedures have changed, see the instructions)
- | | | |
|--|-----|----|
| | Yes | No |
| | | X |
- 22 What is the date of your organization's next regular election of officers?
MO: 11 YEAR: 2005
- 23 What are your organization's rates of dues and fees?
(Enter a minimum and maximum if more than one rate applies for any line)

Rates of Dues and Fees	
(a) Regular Dues/Fees	\$ <u>VARIABLE</u> per <u>MONTH</u> <small>(Month, Year, etc.)</small>
(b) Initiation Fees	\$ <u>5</u>
(c) Transfer Fees	\$ <u>NONE</u>
(d) Work Permits	\$ <u>NONE</u> per _____ <small>(Month, Year, etc.)</small>

24. ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

Enter Amounts in Dollars Only — Do Not Enter Cents

FILE NUMBER 002-676

(A) Name <small>(List all persons who held office during the reporting period even if they received no salary or other disbursements Use all capital letters)</small>		Gross Salary (before taxes and other deductions) (D)	Allowances and Other Disbursements (E)	Total (F)
(B) Title <small>(Enter title of officer, such as PRESIDENT or TREASURER)</small>	Status (C)*			
Last Name 1. BROWN	First Name DOUGLAS Status C	0	1532	1532
Title PRESIDENT				
Last Name 2. M'EWAN	First Name SUSAN Status C	0	1320	1320
Title VICE PRESIDENT				
Last Name 3. EVANS	First Name RICHARD Status C	23978	1703	25681
Title TREASURER				
Last Name 4. DZIEDZIC	First Name JOHN Status C	0	1320	1320
Title GRIEV CHAIRMAN				
Last Name 5. DICKET	First Name SHARON Status C	0	540	540
Title REC SECRETARY				
Last Name 6. KASPERSON	First Name LARRY Status C	0	270	270
Title CHIEF STEWARD				
Last Name 7.	First Name Status			
Title				
8 Totals from additional pages (if any)				
9 Totals of Lines 1 through 8		23978	6685	30663
10 Less Deductions			3660	
Enter the Total from Line 11 in		Item 45 ⇨	11 Net Disbursements	27003

*Code for Status (C) past officer — P, continuing officer — C, new officer during the reporting period — N (If any officer was not elected at a regular election in accordance with your organization's constitution and bylaws, explain in Item 56 on page 1.)

Enter Amounts in Dollars Only — Do Not Enter Cents

FILE NUMBER 002-676

STATEMENT A ASSETS AND LIABILITIES	ASSETS		LIABILITIES			
	Item	Start of Reporting Period (A)	End of Reporting Period (B)	Item	Start of Reporting Period (C)	End of Reporting Period (D)
	25 Cash	36475	44688	32 Accounts Payable	3000	3000
	26 Loans Receivable	0	0	33 Loans Payable	0	0
	27 U S Treasury Securities	0	0	34 Mortgages Payable	0	0
	28 Investments	89301	77300	35 Other Liabilities	0	0
	29 Fixed Assets	0	0	36 TOTAL LIABILITIES	3000	3000
	30 Other Assets	1500	1500			
	31 TOTAL ASSETS	127276	123488	37 NET ASSETS (Item 31 less Item 36)	124276	120488

STATEMENT B RECEIPTS AND DISBURSEMENTS	CASH RECEIPTS		CASH DISBURSEMENTS	
	Item	AMOUNT	Item	AMOUNT
	38 Dues	52741	45 To Officers (from Item 24)	27003
	39 Per Capita Tax	0	46 To Employees (less deductions)	0
	40 Fees, Fines, Assessments & Work Permits	0	47 Per Capita Tax	0
	41 Interest & Dividends	128	48 Office & Administrative Expense	10718
	42 Sale of Investments & Fixed Assets	0	49 Professional Fees	2065
	43 Other Receipts	0	50 Benefits	0
	44 TOTAL RECEIPTS	52869	51 Contributions, Gifts & Grants	618
<p>If total receipts reported in Item 44 are \$200,000 or more, your organization must file Form LM-2 instead of this form.</p>			52 Purchase of Investments & Fixed Assets	0
			53 Loans Made	0
			54 Other Disbursements	4250
			55 TOTAL DISBURSEMENTS	44656

DO NOT KEY PUNCH DATA

SUBSIDIARY REPORT


SCAN AS ATTACHMENT FOR PDF

FORM LM-3 LABOR ORGANIZATION ANNUAL REPORT

FOR USE BY LABOR ORGANIZATIONS WITH LESS THAN \$200,000 IN TOTAL ANNUAL RECEIPTS

This report is mandatory under PL 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.

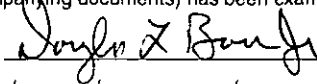
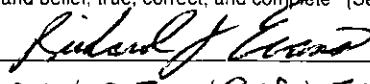
READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

For Official Use Only 	1 FILE NUMBER	2 PERIOD COVERED	3 (a) AMENDED — If this is an amended report correcting a previously filed report, check here <input checked="" type="checkbox"/>
	002-676	MO DAY YEAR From 1001 2003 Through 0930 2004	(b) TERMINAL — If your organization ceased to exist and this is its terminal report, see Section XII of the instructions and check here (c) SUBSIDIARY — If this is a report for a subsidiary organization of your union as defined in Section X of the instructions, check here

<p align="center">IMPORTANT</p> <p>Peel off the address label from the back of the package and place it here</p> <p>If the label information is correct, leave Items 4 through 8 blank</p> <p>If any of the label information is incorrect, complete Items 4 through 8</p>	8 MAILING ADDRESS (Type or print in capital letters)	
	First Name RICHARD Last Name EVANS PO Box • Building and Room Number (if any) Number and Street 595 SOMERSET ST City NORTH PLAINFIELD State ZIP Code + 4 NJ 07060-4908	
4 AFFILIATION OR ORGANIZATION NAME	AFL-CIO	
5 DESIGNATION (Local, Lodge, etc)	LOCAL	6 DESIGNATION NUMBER 1060
7 UNIT NAME (if any)		
9 Are your organization's records kept at its mailing address? (If "No," provide address in Item 56)	Yes <input checked="" type="checkbox"/> No	

56 ADDITIONAL INFORMATION (If more space is needed, attach additional pages properly identified)	
Item Number	

Each of the undersigned, duly authorized officers of the above labor organization, declares, under the applicable penalties of law, that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See Section VI on penalties in the instructions)

57 SIGNED		PRESIDENT (If other title, see instructions)	58 SIGNED		TREASURER (If other title, see instructions)
	7/21/05	(908) 582-2843		07/21/05	(908) 561-8806
	Date	Telephone Number		Date	Telephone Number

During the Reporting Period Did Your Organization

- | | | |
|---|-----|----|
| | Yes | No |
| 10 Have a "subsidiary organization" as defined in Section X of the instructions? | | X |
| 11 Create or participate in the administration of a trust or other fund or organization, as defined in the instructions, which provides benefits for members or their beneficiaries? | X | |
| 12 Have a political action committee (PAC) fund? | X | |
| 13 Acquire or dispose of any goods or property in any manner other than by purchase or sale? | X | |
| 14 Have an audit or review of its books and records by an outside accountant or by a parent body auditor/representative? | X | |
| 15 Discover any loss or shortage of funds or other property?
<i>(Answer "Yes" even if there has been repayment or recovery)</i> | X | |
| 16 Have any officer who was paid \$10,000 or more by your organization and also received \$10,000 or more as an officer or employee of another labor organization or of an employee benefit plan? | X | |
| 17 Pay any employee salary, allowances, and other expenses which, together with any payments from affiliates, totaled more than \$10,000? | X | |
| 18 Have loans totaling more than \$250 to any officer, employee, or member, or make any loans to a business enterprise? | X | |

(If the answer to any of the above questions is "Yes," provide details in Item 56 on page 1 as explained in the instructions for each item)

- 19 How many members did your organization have at the end of the reporting period? 140
- 20 What is the maximum amount recoverable under your organization's fidelity bond for a loss caused by any officer or employee of your organization? \$ 50000
- 21 During the reporting period, did your organization have any changes in its constitution and bylaws (other than rates of dues and fees) or in practices/procedures listed in the instructions?
(If the constitution and bylaws have changed, attach two new dated copies. If practices/procedures have changed, see the instructions)
- | | | |
|--|-----|----|
| | Yes | No |
| | | X |
- 22 What is the date of your organization's next regular election of officers? MO 11 YEAR 2005
- 23 What are your organization's rates of dues and fees?
(Enter a minimum and maximum if more than one rate applies for any line)

Rates of Dues and Fees	
(a) Regular Dues/Fees	\$ <u>NA</u> per _____ <i>(Month, Year, etc)</i>
(b) Initiation Fees	\$ <u>NA</u>
(c) Transfer Fees	\$ <u>NA</u>
(d) Work Permits	\$ <u>NA</u> per _____ <i>(Month, Year, etc)</i>

24. ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

Enter Amounts in Dollars Only — Do Not Enter Cents

FILE NUMBER 002-676

(A) Name <small>(List all persons who held office during the reporting period even if they received no salary or other disbursements Use all capital letters)</small>		Status (C)*	Gross Salary (before taxes and other deductions) (D)	Allowances and Other Disbursements (E)	Total (F)
(B) Title <small>(Enter title of officer, such as PRESIDENT or TREASURER)</small>					
1	BROWN Last Name PRESIDENT Title	DOUGLAS First Name Status C	0	0	0
2	MC EWAN Last Name VICE PRESIDENT Title	SUSAN First Name Status C	0	0	0
3	EVANS Last Name TREASURER Title	RICHARD First Name Status C	0	1324	1324
4	DZIEDZIC Last Name GRIEV CHAIRMAN Title	JOHN First Name Status C	0	0	0
5	DICKEY Last Name RECOMMEND SEC Title	SHARON First Name Status C	0	0	0
6	KASPERSON Last Name CHIEF STEWARD Title	LARRY First Name Status C	0	0	0
7					
8	Totals from additional pages (if any)				
9	Totals of Lines 1 through 8		0	1324	1324
10			Less Deductions		100
Enter the Total from Line 11 in			Item 45 ⇨	11 Net Disbursements	1224

*Code for Status (C) past officer — P, continuing officer — C, new officer during the reporting period — N

(If any officer was not elected at a regular election in accordance with your organization's constitution and bylaws, explain in Item 56 on page 1)

Enter Amounts in Dollars Only — Do Not Enter Cents

FILE NUMBER 002-676

STATEMENT A ASSETS AND LIABILITIES	ASSETS		LIABILITIES			
	Item	Start of Reporting Period (A)	End of Reporting Period (B)	Item	Start of Reporting Period (C)	End of Reporting Period (D)
	25 Cash	9956	9954	32 Accounts Payable	0	0
	26 Loans Receivable	0	0	33 Loans Payable	0	0
	27 U S Treasury Securities	0	0	34 Mortgages Payable	0	0
	28 Investments	0	0	35 Other Liabilities	3575	4039
	29 Fixed Assets	134828	130420	36 TOTAL LIABILITIES	3575	4039
	30 Other Assets	0	0			
	31 TOTAL ASSETS	144784	140374	37 NET ASSETS (Item 31 less Item 36)	141209	136335

STATEMENT B RECEIPTS AND DISBURSEMENTS	CASH RECEIPTS		CASH DISBURSEMENTS	
	Item	AMOUNT	Item	AMOUNT
	38 Dues	0	45 To Officers (from Item 24)	1224
	39 Per Capita Tax	0	46 To Employees (less deductions)	0
	40 Fees, Fines, Assessments & Work Permits	0	47 Per Capita Tax	0
	41 Interest & Dividends	107	48 Office & Administrative Expense	2937
	42 Sale of Investments & Fixed Assets	0	49 Professional Fees	200
	43 Other Receipts	22316	50 Benefits	0
	44 TOTAL RECEIPTS	22423	51 Contributions, Gifts & Grants	0
<p>If total receipts reported in Item 44 are \$200,000 or more, your organization must file Form LM-2 instead of this form.</p>			52 Purchase of Investments & Fixed Assets	0
			53 Loans Made	0
			54 Other Disbursements	18064
			55 TOTAL DISBURSEMENTS	22425