


# FORM LM-3 LABOR ORGANIZATION ANNUAL REPORT

**FOR USE BY LABOR ORGANIZATIONS WITH LESS THAN \$250,000 IN TOTAL ANNUAL RECEIPTS**

This report is mandatory under P.L. 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 2004 Through 09 30 2005	3. (a) AMENDED — If this is an amended report correcting a previously filed report, check here:  (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:
	<b>IMPORTANT</b>  Peel off the address label from the back of the package and place it here.  If the label information is correct, leave Items 4 through 8 blank.  If any of the label information is incorrect, complete Items 4 through 8.		8. MAILING ADDRESS (Type or print in capital letters)  First Name RICHARD  Last Name EVANS  P.O. 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 <input type="checkbox"/>		

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

Item Number	10	CWA LOCAL 1060 HOLDING CO - HOURS TITLE TO LOCAL'S OFFICE BUILDING (FILES SEPARATE LM-3)
Item Number	17	RICHARD EVANS - SECRETARY TREASURER (22,644)

Each of the undersigned, duly authorized officers of the above labor organization, declares, under penalty of perjury and other 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>[Signature]</u> Date: 12/24/05 Telephone Number: (908) 582-284	PRESIDENT (If other title, see instructions.)	58. SIGNED: <u>[Signature]</u> Date: 12/22/05 Telephone Number: (908) 561-8806	TREASURER (If other title, see instructions.)
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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?.....<br>(Answer "Yes" even if there has been repayment or recovery.)  |     | 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?..... Yes No  
*(If the constitution and bylaws have changed, attach two new dated copies. If practices/procedures have changed, see the instructions.)* X
22. What is the date of your organization's next regular election of officers? MO YEAR  
11 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

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(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	5501	5501
Title PRESIDENT				
Last Name 2. MCEWAN	First Name SUSAN Status C	0	2994	2994
Title VICE PRESIDENT				
Last Name 3. EVANS	First Name RICHARD Status C	20994	1650	22644
Title TREASURER				
Last Name 4. DZIEDZIC	First Name JOHN Status C	0	1843	1843
Title GRIEV CHAIRMAN				
Last Name 5. DICKEY	First Name SHARON Status C	0	675	675
Title REC SECRETARY				
Last Name 6. KASPERSON	First Name LARRY Status C	0	338	338
Title CHIEF STEWARD				
Last Name 7. CANNON	First Name DAVE Status N	0	483	483
Title GRIEVANCE CHAIRMAN				
8. Totals from additional pages (if any)				
9. Totals of Lines 1 through 8		20,994	13,484	34,478
10. Less Deductions			4100	
Enter the Total from Line 11 in ..... Item 45 ⇔			11. Net Disbursements	30378

\*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

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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 .....	44688	33545	32. Accounts Payable .....	3000	0
	26. Loans Receivable .....	0		33. Loans Payable .....	0	0
	27. U.S. Treasury Securities .....	0		34. Mortgages Payable .....	0	0
	28. Investments .....	77300	65301	35. Other Liabilities .....	0	0
	29. Fixed Assets .....	0		36. TOTAL LIABILITIES .....	3000	0
	30. Other Assets .....	1500	1500	37. NET ASSETS (Item 31 less Item 36) .....	120488	100346
	31. TOTAL ASSETS .....	123488	100346			

STATEMENT B RECEIPTS AND DISBURSEMENTS	CASH RECEIPTS		CASH DISBURSEMENTS	
	Item	AMOUNT	Item	AMOUNT
	38. Dues .....	51491	45. To Officers (from Item 24) .....	30378
	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 .....	437	48. Office & Administrative Expense .....	12699
	42. Sale of Investments & Fixed Assets .....	0	49. Professional Fees .....	1290
	43. Other Receipts .....	0	50. Benefits .....	0
	44. TOTAL RECEIPTS .....	51928	51. Contributions, Gifts & Grants .....	624
<p><b>If total receipts reported in Item 44 are \$250,000 or more, your organization must file Form LM-2 instead of this form.</b></p>			52. Purchase of Investments & Fixed Assets .....	0
			53. Loans Made .....	0
			54. Other Disbursements .....	18080
			55. TOTAL DISBURSEMENTS .....	63071