


FORM LM-2 LABOR ORGANIZATION ANNUAL REPORT

MUST BE USED BY LABOR ORGANIZATIONS WITH \$200,000 OR MORE IN TOTAL ANNUAL RECEIPTS AND LABOR ORGANIZATIONS IN TRUSTESHIP

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 0 0 0 - 1 4 9	2. PERIOD COVERED MO DAY YEAR From 0 1 0 1 2 0 0 0 Through 1 2 3 1 2 0 0 0	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:
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<p>IMPORTANT</p> <p>RUBEN BURKE (03) 000-149 313-926-5431 079 12/00</p>	8. MAILING ADDRESS (Type or print in capital letters.) First Name _____ Last Name _____ P.O. Box • Building and Room Number (if any) _____ Number and Street _____ 8 0 0 0 E J E F F E R S O N City _____ D E T R O I T State _____ ZIP Code + 4 _____ M I 4 8 2 1 4 -
	4. AFFILIATION OR ORGANIZATION NAME INTERNATIONAL UNION, UNITED AUTOMOBILE, AEROSPACE & 5. DESIGNATION (Local, Lodge, etc.) N/A 6. DESIGNATION NUMBER N/A 7. UNIT NAME (if any) 9. Are your organization's records kept at its mailing address? (If "No," provide address in Item 75.) Yes <input checked="" type="checkbox"/> No

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

Item Number	
*	See Attached Schedules for Additional Information.

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.)

76. SIGNED: <u>Stephen P. Gorkis</u> *PRESIDENT (If other title, see instructions.) Date: 03 / 30 / 2001 Telephone Number: (313) 926 - 5431	77. SIGNED: <u>Ruben Burke</u> *TREASURER (If other title, see instructions.) Date: 03 / 30 / 2001 Telephone Number: (313) 926 - 5431
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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? | | X |
| <i>(Answer "Yes" even if there has been repayment or recovery.)</i> | | |
| 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. Liquidate or reduce any liabilities without disbursement of cash? | | X |

(If the answer to any of the above questions is "Yes," provide details in Item 75 on page 1 as explained in the instructions for each item.)

18. How many members did your organization have at the end of the reporting period? 6 7 1 8 5 3
19. What is the date of your organization's next regular election of officers? MO YEAR
0 6 2 0 0 2
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? \$ 5 0 0 0 0 0
21. 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>N/A</u> per _____ <i>(Month, Year, etc.)</i>
(b) Initiation Fees	\$ <u>N/A</u>
(c) Transfer Fees	\$ <u>N/A</u>
(d) Work Permits	\$ <u>N/A</u> per _____ <i>(Month, Year, etc.)</i>

- | | | |
|---|-----|----|
| 22. 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 |
| <i>(If the constitution and bylaws have changed, attach two new dated copies. If practices/procedures have changed, see the instructions.)</i> | | X |
| 23. Were any of your organization's assets pledged as security or encumbered in any other way at the end of the reporting period? | | X |
| 24. Did your organization have any contingent liabilities at the end of the reporting period? | | X |

(If the answer to Item 23 or 24 is "Yes," provide details in Item 75 on page 1.)

STATEMENT A — ASSETS AND LIABILITIES

FILE NUMBER: 0 0 0 - 1 4 9

Complete Schedules 1 Through 15 Before Completing Statement A

Enter Amounts in Dollars Only — Do Not Enter Cents

	ASSETS		From SCH #	Start of Reporting Period (A)	End of Reporting Period (B)
	Item				
ASSETS	25. Cash			4 4 4 2 0	- 1 0 5 5 3 9 7
	26. Accounts Receivable				
	27. Loans Receivable	1		2 0 4 8 7 0 8 5	2 7 6 3 1 4 3 8
	28. U.S. Treasury Securities			7 0 4 8 4 8 5 9 2	7 2 3 6 9 6 0 7 5
	29. Investments	2		2 2 8 4 7 2 4 5 4	2 5 6 5 8 2 9 9 3
	30. Fixed Assets	5		5 0 2 3 4 4 8 4	6 6 3 7 8 4 7 4
	31. Other Assets	3		3 3 3 1 7 9 7 8	2 7 2 4 7 9 7 4
	32. TOTAL ASSETS			1 0 3 7 4 0 5 0 1 3	1 1 0 0 4 8 1 5 5 7
LIABILITIES	33. Accounts Payable			5 2 1 1 1 4	5 5 0 4 2 4
	34. Loans Payable	8		4 5 6 0 2 8 7	4 2 3 3 6 2 1
	35. Mortgages Payable				
	36. Other Liabilities	4		1 6 5 0 2 1	1 8 3 4 0 1
	37. TOTAL LIABILITIES			5 2 4 6 4 2 2	4 9 6 7 4 4 6
	38. NET ASSETS (Item 32 less Item 37)			1 0 3 2 1 5 8 5 9 1	1 0 9 5 5 1 4 1 1 1

STATEMENT B — RECEIPTS AND DISBURSEMENTS

FILE NUMBER: 0 0 0 — 1 4 9

Complete Schedules 1 Through 15 Before Completing Statement B

Enter Amounts in Dollars Only — Do Not Enter Cents

CASH RECEIPTS		From SCH #	AMOUNT	CASH DISBURSEMENTS		From SCH #	AMOUNT
Item				Item			
39. Dues				56. To Officers	9		1 2 8 0 3 2 6
40. Per Capita Tax			2 2 3 0 8 5 9 8 3	57. To Employees	10		5 8 5 7 8 7 4 1
41. Fees			5 5 4 2 1	58. Per Capita Tax			5 1 2 2 6 5 1
42. Fines				59. Fees, Fines, Assessments, etc.			
43. Assessments				60. Office & Administrative Expense	13		3 5 2 9 3 3 3 7
44. Work Permits				61. Educational & Publicity Expense ...			1 1 5 2 7 6 6 5
45. Sale of Supplies			3 8 0 5 1 0	62. Professional Fees			3 2 4 4 4 1 9
46. Interest			5 5 9 7 6 2 6 2	63. Benefits	11		4 2 1 1 2 9 4 5
47. Dividends			1 4 9 1 6	64. Contributions, Gifts & Grants	12		1 0 6 1 2 8 2
48. Rents			1 3 0 4 1 5	65. Supplies for Resale			7 6 0 2 7 6
49. Sale of Investments & Fixed Assets	6		3 0 5 6 5 7	66. Direct Taxes			8 1 3 9 8 6 6
50. Loans Obtained	8			67. Withholding Taxes			2 8 8 3 1 3 1 5
51. Repayments of Loans Made	1		2 8 0 0 0 5 9	68. Purchase of Investments & Fixed Assets	7		5 9 5 4 7 5 7 4
52. On Behalf of Affiliates for Transmittal to Them			6 8 0 8 8 7 9	69. Loans Made	1		1 0 0 8 0 1 2 2
53. From Members for Disbursement on Their Behalf				70. Repayment of Loans Obtained	8		3 2 6 6 6 6
54. Other Receipts	14		4 0 5 6 6 0 8 3	71. To Affiliates of Funds Collected on Their Behalf			6 7 7 9 5 6 9
(SEE FOOTNOTE ATTACHED)				72. On Behalf of Individual Members ...			1 8 3 2 4 2 5 9
55. TOTAL RECEIPTS	*		3 3 0 1 2 4 1 8 5	73. Other Disbursements	15		4 0 4 3 4 0 2 1
				(SEE FOOTNOTE ATTACHED)			
				74. TOTAL DISBURSEMENTS	*		3 3 1 4 4 5 0 3 4

If more space is needed to complete Schedules 1 through 8 or 11 through 15, continue on additional pages, using the same column headings used on the schedule, and enter the totals on the line provided for additional pages in each schedule. For Schedules 9 and 10, use the continuation pages provided.

Enter Amounts in Dollars Only — Do Not Enter Cents

SCHEDULE 1 — LOANS RECEIVABLE

List below loans to officers, employees, or members which at any time during the reporting period exceeded \$250 and list all loans to business enterprises regardless of amount. (A)	Loans Outstanding at Start of Period (B)	Loans Made During Period (C)	Repayments Received During Period		Loans Outstanding at End of Period (E)
			Cash (D)(1)	Other Than Cash (D)(2)	
1. Name: <u>Notes Receivable</u> Purpose: <u>(See Attached Schedule)</u> Security: _____ Terms of Repayment: _____	11,215,348	7,064,843	404,700		17,875,491
2. Name: <u>Mortgages Receivable</u> Purpose: <u>(See Attached Schedule)</u> Security: _____ Terms of Repayment: _____	5,786,183	1,062,629	1,050,002		5,798,810
3. Name: <u>Loans Receivable</u> Purpose: <u>(See Attached Schedule)</u> Security: _____ Terms of Repayment: _____	1,621,094	1,759,729	1,158,261	135,710	2,086,852
4. Totals from additional pages (if any)	0	0	0	0	0
5. Totals of loans not listed above	1,864,460	192,921	187,096		1,870,285
6. Totals of Lines 1 through 5	20 4 8 7 0 8 5	10 0 8 0 1 2 2	2 8 0 0 0 5 9	1 3 5 7 1 0	27 6 3 1 4 3 8
Enter the Totals from Line 6 in	↑ Item 27 Column (A)	↑ Item 69	↑ Item 51	↑ Item 75 with Explanation	↑ Item 27 Column (B)

SCHEDULE 2 — INVESTMENTS
(OTHER THAN U.S. TREASURY SECURITIES)

FILE NUMBER: 0 0 0 - 1 4 9

SCHEDULE 3 — OTHER ASSETS

Description (A)	Amount (B)
Marketable Securities	
1. Total Cost	256,582.993
2. Total Book Value	256,582.993
3. List each marketable security which has a book value over \$1,000 and exceeds 20% of Line 2.	
(a) Equities	51,387,351
(b) _____	
(c) _____	
(d) _____	
Other Investments	
4. Total Cost	6,600,000
5. Total Book Value	0
6. List each other investment which has a book value over \$1,000 and exceeds 20% of Line 5. Also list each subsidiary for which separate reports are attached.	
(a) UBN, Inc.	0
(b) UBG, Inc.	0
(c) _____	
(d) _____	
(e) Total from additional pages (if any)	
7. Total of Lines 2 and 5	2 5 6 5 8 2 9 9 3
Enter the Total from Line 7 in Item 29, Column (B)	

Description (A)	Book Value (B)
1. Family Education Center-Real Property	26,559,212
2. Inventory-Resale Items	688,762
3.	
4.	
5.	
6. Total from additional pages (if any)	
7. Total of Lines 1 through 6	2 7 2 4 7 9 7 4
Enter the Total from Line 7 in Item 31, Column (B)	

SCHEDULE 4 — OTHER LIABILITIES

Description (A)	Amount at End of Period (B)
1. Payroll Deductions	183,401
2.	
3.	
4.	
5.	
6. Total from additional pages (if any)	
7. Total of Lines 1 through 6	1 8 3 4 0 1
Enter the Total from Line 7 in Item 36, Column (D)	

SCHEDULE 5 — FIXED ASSETS

FILE NUMBER: 0 0 0 - 1 4 9

Description (A)	Cost or Other Basis (B)	Total Depreciation or Amount Expensed (C)	Book Value (D)	Fair Market Value (E)*
1. Land (give location):				
2. Totals from additional pages (if any)				
3. Buildings (give location): Black Lake Golf Course-Onaway, MI See Attached Schedule	6,997,100 49,737,712	81,998	6,915,102 49,737,712	6,915,102 49,737,712
4. Totals from additional pages (if any)				
5. Automobiles and Other Vehicles	724,218	580,342	143,876	143,876
6. Office Furniture and Equipment	26,215,173	16,895,474	9,319,699	9,319,699
7. Other Fixed Assets	393,614	131,529	262,085	262,085
8. Totals of Lines 1 through 7	84,067,817	17,689,343	6 6 3 7 8 4 7 4	66,378,474

*THIS FIGURE IS COST OR DEPRECIATED (BOOK) VALUE.

Enter the Total from Line 8, Column (D) in Item 30, Column (B)

SCHEDULE 6 — SALE OF INVESTMENTS AND FIXED ASSETS

Description (if land or buildings, give location) (A)	Cost (B)	Book Value (C)	Gross Sales Price (D)	Amount Received (E)
1. Sale of Stocks	1,393	1,393	55,657	55,657
2. Local Union 937 - Hartford, CT	110,000	110,000	50,000	50,000
3. Region 5 Office - Dallas, TX	244,394	244,394	150,000	150,000
4. Local Union 555 - Marion Cty, IN	30,000	30,000	50,000	50,000
5. Totals from additional pages (if any)				
6. Totals of Lines 1 through 5	385,787	385,787	305,657	305,657
		7. Less Reinvestments		
		8. Net Sales		3 0 5 6 5 7

Enter the Total from Line 8 in Item 49

SCHEDULE 7 — PURCHASE OF INVESTMENTS AND FIXED ASSETS

FILE NUMBER: 0 0 0 - 1 4 9

Description (if land or buildings, give location) (A)	Cost (B)	Book Value (C)	Cash Paid (D)
1. Purchase of Investment Securities	47,032,883	47,032,883	47,032,883
2. Purchase of Stocks	26,532	26,532	26,532
3. Improvements - Solidarity House	245,834	245,834	245,834
4. Construction Region 1A - Taylor, MI	2,761,479	2,761,479	2,761,479
5. Totals from additional pages (if any)	9,480,846	9,480,846	9,480,846
6. Totals of Lines 1 through 5	59,547,574	59,547,574	59,547,574
7. Less Reinvestments			
8. Net Purchases		5 9 5 4 7 5 7 4	
Enter the Total from Line 8 in			↑ Item 68

SCHEDULE 8 — LOANS PAYABLE

Source of Loans Payable at Any Time During the Reporting Period (A)	Loans Owed at Start of Period (B)	Loans Obtained During Period (C)	Repayment Made During Period		Loans Owed at End of Period (E)	
			Cash (D)(1)	Other Than Cash (D)(2)		
1. Local Union Loans	3,427,000		100,000		3,327,000	
2. Construction Loan Payable	1,133,287		226,666		906,621	
3.						
4.						
5. Totals from additional pages (if any)						
6. Totals of Lines 1 through 5	4 5 6 0 2 8 7		3 2 6 6 6 6		4 2 3 3 6 2 1	
Enter the Totals from Line 6 in		↑ Item 34 Column (C)	↑ Item 50	↑ Item 70	↑ Item 75 with Explanation	↑ Item 34 Column (D)

SCHEDULE 9 — ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

FILE NUMBER: 0 0 0 — 1 4 9

(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 (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Title <small>(Enter title of officer, such as PRESIDENT or TREASURER.)</small>	Status (C)*					
Last Name 1. ANDROS	First Name G E O R G E	1 0 1 6 4 2	7 1 3 9	1 5 9 4 1		1 2 4 7 2 2
Title R E G I O N A L D I R E C T	Status C					
Last Name 2. BANTOM	First Name G E R A L D	1 0 1 7 1 7	7 0 9 9	1 1 1 3 4		1 1 9 9 5 0
Title R E G I O N A L D I R E C T	Status C					
Last Name 3. BUNN	First Name M A R Y	1 1 1 6 3 5	7 1 5 9	1 1 2 9 6		1 3 0 0 9 0
Title V I C E P R E S I D E N T	Status C					
Last Name 4. BURKS	First Name R U B E N	1 1 5 4 6 3	7 1 5 9	1 3 3 0 2		1 3 5 9 2 4
Title S E C - T R E A S U R E R	Status C					
Last Name 5. DAVIS	First Name W A R R E N	1 0 1 7 9 2	7 1 3 9	8 9 6 4		1 1 7 8 9 5
Title R E G I O N A L D I R E C T	Status C					
Last Name 6. GETTELFINGERRONALD	First Name	1 1 1 4 8 5	7 1 5 9	8 1 2 5		1 2 6 7 6 9
Title V I C E P R E S I D E N T	Status C					
Last Name 7. GOODEN	First Name N A T H A N	1 1 1 6 3 5	7 1 1 9	2 1 3 6 3		1 4 0 1 1 7
Title V I C E P R E S I D E N T	Status C					
8. Totals from additional pages (if any)		1,264,329	85,448	170,637		1,520,414
9. Totals of Lines 1 through 8		2,019,698	135,421	260,762		2,415,881
				10. Less Deductions		1 1 3 5 5 5
Enter the Total from Line 11 in				11. Net Disbursements		1 2 8 0 3 2 6

*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 75 on page 1.)

SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES

FILE NUMBER: 0 0 0 — 1 4 9

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>		Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>						
(C) Name of Affiliated Organization <small>(if applicable)</small>						
Last Name	First Name					
1. A C E V E S	A N I T A	4 5 8 9 1	0	0		4 5 8 9 1
Position	T E C H A I D 1					
Name of Affiliated Organization						
2. A C E V E S	B E N J A M I	1 0 6 8 7 3	7 3 4 1	1 1 3 2 3		1 2 5 5 3 7
Position	S E R V I C I N G R E P					
Name of Affiliated Organization						
3. A D A M S	L S C O T T	8 2 2 0 2	7 1 9 9	9 2 9 0		9 8 6 9 1
Position	S E R V I C I N G R E P					
Name of Affiliated Organization						
4. A D A M S	R O N A L D	7 9 7 9 7	6 9 6 9	1 6 9 7 9		1 0 3 7 4 5
Position	O R G A N I Z E R					
Name of Affiliated Organization						
5. A E S C H B A C K E R	R O Y	8 2 5 0 2	7 1 1 9	1 0 1 2 7		9 9 7 4 8
Position	T R A I N I N G R E P					
Name of Affiliated Organization						
6. Totals from additional pages <small>(if any)</small>		87,322,611	5,543,857	7,244,155		100,110,623
7. Totals for all employees who, during the reporting period, received \$10,000 or less in total disbursements from your organization and any affiliates		838,366	5,780	26,752		870,898
8. Totals of Lines 1 through 7		88,558,242	5,578,265	7,318,626		101,455,133
				9. Less Deductions		4 2 8 7 6 3 9 2
Enter the Total from Line 10 in.....				Item 57 ⇒	10. Net Disbursements	
						5 8 5 7 8 7 4 1

SCHEDULE 11 — BENEFITS

FILE NUMBER: 0 0 0 — 1 4 9

Description (A)	To Whom Paid (B)	Amount (C)
1. Strike Benefits	Striking Members & TPA's	8,247,788
2. Cafeteria Subsidy	Cranks Catering	188,659
3. Health Program	Individuals	43,664
4. Insurance-Employees	Insurance Carriers	23,345,150
5. Total from additional pages (if any)		10,287,684
6. Total of Lines 1 through 5		4 2 1 1 2 9 4 5
Enter the Total from Line 6		↑ Item 63

SCHEDULE 12 — CONTRIBUTIONS, GIFTS & GRANTS

Description (A)	Amount (B)
1. Charitable Organizations	39,443
2. Labor Organizations	36,541
3. Educational Groups	20,300
4. Citizenship Groups	173,650
5. Conferences and Committees	767,550
6. Religious Organizations	2,500
7. Total from additional pages (if any)	21,298
8. Total of Lines 1 through 7	1 0 6 1 2 8 2
Enter the Total from Line 8 in ↑ Item 64	

SCHEDULE 13 — OFFICE & ADMINISTRATIVE EXPENSE

Description (A)	Amount (B)
1. Travel Expense	1,830,020
2. Alterations and Repairs	587,318
3. Cartage and Express	314,705
4. Conference Expense	725,140
5. Equipment Rental	539,730
6. Fees and Expenses	930,501
7. Total from additional pages (if any)	30,365,923
8. Total of Lines 1 through 7	3 5 2 9 3 3 3 7
Enter the Total from Line 8 in ↑ Item 60	

SCHEDULE 14 — OTHER RECEIPTS

Description (A)	Amount (B)
1. Escrows Received-Closed Locals	3,912,048
2. Strike Fund Donations	84,759
3. Expense Reimbursements	69,954
4. Honorariums	814
5. Physical Fitness Fees	5,360
6. Films	136
7. Retirees Council Income	55,704
8. Regional Fund-Fund Raisers and Registrations	2,519,102
9. Council Fund-Fund Raisers and Registrations	144,960
10. Salaries, Travel and Fringe Reimbursements	18,786,619
11. Reimbursements and Refunds:	
12. Education and Publicity Expense	216,110
13. Strike Benefits	281,590
14. Cartage and Express	10,680
15. Conference Expense	180,419
16. Total from additional pages (if any)	14,297,828
17. Total of Lines 1 through 16	4 0 5 6 6 0 8 3
↑ Enter the Total from Line 17 in Item 54	

SCHEDULE 15 — OTHER DISBURSEMENTS

Description (A)	Amount (B)
1. Escrow Disbursements-Closed Locals	2,967,559
2. Car Leasing	4,537
3. Family Education Center-Guest Expense	9,809
4. Interest-Loans Payable	272,723
5. Moving	181,413
6. Leagues and Tournaments	347,988
7. Local Union Subsidies	1,310,620
8. Local Union Rebates	33,869,792
9. Radio Station Expenses	886,583
10. Loss on Canadian Funds	70,352
11. Bank Adjustments	1,456
12. Public Review Board	511,189
13.	
14.	
15.	
16. Total from additional pages (if any)	
17. Total of Lines 1 through 16	4 0 4 3 4 0 2 1
↑ Enter the Total from Line 17 in Item 73	

ORGANIZATION NAME:
INTERNATIONAL UNION UNITED AUTOMOBILE AEROSPACE &
 ENDING DATE OF PERIOD COVERED:
 12/31/2000

FILE NUMBER: 0 0 0 - 1 4 9

PAGE 2 OF 26 ADDITIONAL PAGES

SCHEDULE 9 — ALL OFFICERS AND DISBURSEMENTS TO OFFICERS (continued)

(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 (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Title <small>(Enter title of officer, such as PRESIDENT or TREASURER.)</small>	Status (C)					
Last Name K I N G	First Name R O B E R T	1 1 1 6 3 5	7 1 3 9	9 1 3 3		1 2 7 9 0 7
Title V I C E P R E S I D E N T	Status C					
Last Name K O R M A N	First Name P A U L	1 0 1 7 1 7	7 1 1 9	1 6 8 0 0		1 2 5 6 3 6
Title R E G I O N A L D I R E C T	Status C					
Last Name M A H A F F E Y	First Name L L O Y D	1 0 1 7 9 2	7 0 9 9	1 0 3 7 4		1 1 9 2 6 5
Title R E G I O N A L D I R E C T	Status C					
Last Name O C H O C I N S K A	First Name G E R A L D I	1 0 1 7 1 7	7 1 1 9	1 7 0 2 1		1 2 5 8 5 7
Title R E G I O N A L D I R E C T	Status C					
Last Name R A P S O N	First Name C A L V I N	1 0 1 7 1 7	7 1 1 9	1 7 3 7 4		1 2 6 2 1 0
Title R E G I O N A L D I R E C T	Status C					
Last Name S H O E M A K E R	First Name R I C H A R D	1 1 1 7 1 0	7 1 1 9	1 0 1 9 4		1 2 9 0 2 3
Title V I C E P R E S I D E N T	Status C					
Last Name T E R R Y	First Name K E N N E T H	1 0 1 6 4 2	7 1 3 9	1 1 9 2 6		1 2 0 7 0 7
Title R E G I O N A L D I R E C T	Status C					
Last Name T H O M P S O N	First Name B O B B Y	1 0 1 7 1 7	7 1 1 9	1 5 9 2 3		1 2 4 7 5 9
Title R E G I O N A L D I R E C T	Status C					
Totals		8 3 3 6 4 7	5 6 9 7 2	0 8 7 4 5		9 9 9 3 6 4

ORGANIZATION NAME:
INTERNATIONAL UNION UNITED AUTOMOBILE AEROSPACE &
 ENDING DATE OF PERIOD COVERED
 12/31/2000

FILE NUMBER: 0 0 0 - 1 4 9

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SCHEDULE 9 — ALL OFFICERS AND DISBURSEMENTS TO OFFICERS (continued)

(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 (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Title <small>(Enter title of officer, such as PRESIDENT or TREASURER.)</small>	(C) Status					
Last Name T H U R M A N	First Name T E R R Y	1 0 1 6 4 2	7 1 1 9	9 8 1 9		1 1 8 5 8 0
Title R E G I O N A L D I R E C T	Status C					
Last Name W E L L S	First Name J A M E S	1 0 1 6 4 2	7 1 3 9	1 4 7 0 3		1 2 3 4 8 4
Title R E G I O N A L D I R E C T	Status C					
Last Name W H E E L E R	First Name P H I L I P	1 0 1 6 4 2	7 1 3 9	2 4 6 8 6		1 3 3 4 6 7
Title R E G I O N A L D I R E C T	Status C					
Last Name Y O K I C H	First Name S T E P H E N	1 2 5 7 5 6	7 0 7 9	1 2 6 8 4		1 4 5 5 1 9
Title P R E S I D E N T	Status C					
Last Name	First Name					
Title	Status					
Last Name	First Name					
Title	Status					
Last Name	First Name					
Title	Status					
Totals		4 3 0 6 8 2	2 8 4 7 6	6 1 8 9 2		5 2 1 0 5 0

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: A I L E S First Name: M I C H A E L Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 1 2 7 5	7 1 0 4	4 3 1 9		9 2 6 9 8
Last Name: A K E M O N First Name: D E A O N Position: S E C R E T A R Y I (M A J Name of Affiliated Organization:	4 6 0 7 2	0	3 3 7		4 6 4 0 9
Last Name: A L E X A N D E R First Name: J A N E Position: L E G A L S E C R E T A R Y Name of Affiliated Organization:	4 5 2 1 6	0	0		4 5 2 1 6
Last Name: A L F R E D First Name: C H A R L E S Position: S E R V I C I N G R E P Name of Affiliated Organization:	3 3 5 4 7	2 9 6 4	2 8 7 0		3 9 3 8 1
Last Name: A L L E N First Name: R A Y Position: T R A I N I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	5 6 9 1		9 5 1 4 7
Totals	288387	17247	13217		318851

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position (Enter employee's job title.)					
(C) Name of Affiliated Organization (if applicable)					
Last Name: ALLEN First Name: ROBERT Position: AUDITOR Name of Affiliated Organization:	8 1 2 9 8	4 2 6 2	2 9 5 3		8 8 5 1 3
Last Name: ALLEN First Name: WILLIAM Position: SERVICING REP Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	6 1 1 0		9 5 5 6 6
Last Name: ALLMAND First Name: PAUL Position: TRAINING REP Name of Affiliated Organization:	8 2 5 0 2	7 1 1 9	6 0 8 0		9 5 7 0 1
Last Name: ALPERT First Name: ROBERT Position: MISC I Name of Affiliated Organization:	1 0 7 5 7 3	7 1 7 9	9 4 8 5		1 2 4 2 3 7
Last Name: AMENO First Name: THOMAS Position: TRAINING REP Name of Affiliated Organization:	7 4 6 7 1	4 9 0 0	1 1 3 5 1		9 0 9 2 2
Totals	428321	30639	35979		494939

ORGANIZATION NAME International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary <small>(before taxes and other deductions)</small>	Allowances <small>(E)</small>	Disbursements <small>for Official Business</small> <small>(F)</small>	Other <small>Disbursements</small> <small>(G)</small>	Total <small>(H)</small>
(B) Position <small>(Enter employee's job title.)</small>	(D)	(E)	(F)	(G)	(H)
(C) Name of Affiliated Organization <small>(if applicable)</small>	(D)	(E)	(F)	(G)	(H)
Last Name: A M I S O N First Name: P A T R I C I Position: D A T A P R O C E S S I N G Name of Affiliated Organization:	4 8 8 7 8	0	0		4 8 8 7 8
Last Name: A N C L A M First Name: R O G E R Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	7 4 2 6		9 6 9 3 7
Last Name: A N D E R L E D E S First Name: R O B E R T Position: S Y S T E M S A N A L Y S T Name of Affiliated Organization:	8 5 5 3 3	7 1 3 9	3 6 2 8		9 6 3 0 0
Last Name: A N D E R S O N First Name: C H A R L E S Position: C I T I Z E N S H I P R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	1 0 3 4 2		9 9 8 5 3
Last Name: A N G U S First Name: C R A I G Position: H E A T I N G / A I R C O N D Name of Affiliated Organization:	6 7 2 1 8	0	0		6 7 2 1 8
Totals	366333	21457	21396		409186

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position (Enter employee's job title.)					
(C) Name of Affiliated Organization (if applicable)					
Last Name: A P P U G L I E S E First Name: M E L I S S A Position: C L E R K T Y P I S T Name of Affiliated Organization:	3 2 6 4 3	0	0		3 2 6 4 3
Last Name: A R G U E L L O First Name: R A Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 0 1 4 5	3 7 9 8	5 8 9 4		8 9 8 3 7
Last Name: A R M O U R First Name: D E B R A Position: B O O K K E E P E R A Name of Affiliated Organization:	4 6 6 8 3	0	0		4 6 6 8 3
Last Name: A R R I N G T O N First Name: R A N D Y Position: A S S I S T A N T D E P A R T Name of Affiliated Organization:	8 6 2 7 2	4 9 1 1	5 0 7 0		9 6 2 5 3
Last Name: A S H L E Y First Name: E R N E S T I Position: G E N E R A L A - M A I N Name of Affiliated Organization:	3 4 4 8 3	0	0		3 4 4 8 3
Totals	280226	8709	10964		299899

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: A S H T O N First Name: J O S E P H Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 4 7 7 7	7 1 7 9	1 0 6 3 0		1 0 2 5 8 6
Last Name: A T W O O D First Name: J A M E S Position: A D M I N I S T R A T I V E A Name of Affiliated Organization:	9 4 7 7 2	7 1 7 9	1 1 8 7 6		1 1 3 8 2 7
Last Name: A U D I E - F I G U E R A L I C E First Name: Position: D E P A R T M E N T H E A D Name of Affiliated Organization:	9 9 1 8 3	7 1 1 9	8 7 2 6		1 1 5 0 2 8
Last Name: A W E First Name: J E N N I E Position: S W I T C H B O A R D O P E R Name of Affiliated Organization:	4 4 0 3 1	0	0		4 4 0 3 1
Last Name: A Y R E S First Name: S T E V E N Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	3 6 3 8		9 3 2 0 4
Totals	405190	28616	34870		468676

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: B A C H M A N N First Name: D I A N E Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 5 8 9 5	0	0		4 5 8 9 5
Last Name: B A G G E T T First Name: C A R O L Position: I N T ' L O F F I C E R ' S Name of Affiliated Organization:	4 7 2 1 4	0	0		4 7 2 1 4
Last Name: B A I L E Y First Name: D E R E K Position: M A C H I N E O P E R A T O R Name of Affiliated Organization:	4 4 1 4 9	0	0		4 4 1 4 9
Last Name: B A I L E Y First Name: P A T R I C I Position: L E G A L S E C R E T A R Y Name of Affiliated Organization:	4 6 3 8 4	0	0		4 6 3 8 4
Last Name: B A K E R First Name: J A M E S Position: O R G A N I Z E R Name of Affiliated Organization:	8 5 5 3 3	7 1 5 9	9 8 3 9		1 0 2 5 3 1
Totals	269175	7159	9839		286173

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: B A K E R First Name: S O P H I E Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 6 6 1 4	0	0		4 6 6 1 4
Last Name: B A L D W I N First Name: B A R R Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 1 5 3 3	4 5 9 3	1 5 7 8		8 7 7 0 4
Last Name: B A L D W I N First Name: D A N I E L Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 5 0 2	7 1 3 9	7 9 9 4		9 7 6 3 5
Last Name: B A L D W I N First Name: T H E O D O R Position: O U T S I D E S E C U R I T Y Name of Affiliated Organization:	3 3 4 5 0	0	0		3 3 4 5 0
Last Name: B A N G H A R T First Name: L A R R Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	7 9 4 7		9 7 5 1 3
Totals	326526	18871	17519		362916

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES *(continued)*

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: B A R B A R A First Name: J O H N Position: A S S I S T A N T - M A J O R Name of Affiliated Organization:	9 0 0 0 7	7 1 3 9	7 7 9 1		1 0 4 9 3 7
Last Name: B A R B A R A First Name: S A N D R A Position: C L E R K T Y P I S T Name of Affiliated Organization:	3 6 7 1 2	0	0		3 6 7 1 2
Last Name: B A R B E E First Name: B O B B I E Position: P U B L I C R E L A T I O N S Name of Affiliated Organization:	8 2 5 0 2	7 0 9 9	2 6 8 8		9 2 2 8 9
Last Name: B A R B E R First Name: N O R M A Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 5 8 3 6	0	0		4 5 8 3 6
Last Name: B A R G A M I A N First Name: G E O R G I - Position: A T T O R N E Y Name of Affiliated Organization:	8 9 0 4 4	7 1 1 9	3 5 6 4		9 9 7 2 7
Totals	344101	21357	14043		379501

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: BARNETTE First Name: MICHAEL Position: SERVICING REP Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	1 7 4 4 6		1 0 7 0 1 2
Last Name: BARTOLOTTA First Name: PEGGIE Position: CLERK TYPIST Name of Affiliated Organization:	3 9 2 5 4	0	0		3 9 2 5 4
Last Name: BATES First Name: LYNN Position: INT'L OFFICER'S Name of Affiliated Organization:	4 6 9 4 7	0	2 5 5		4 7 2 0 2
Last Name: BATTAGLIA First Name: KATHLEE Position: STENOGRAPHER Name of Affiliated Organization:	4 4 1 8 2	0	0		4 4 1 8 2
Last Name: BAUDERS First Name: TAMMY Position: STENOGRAPHER Name of Affiliated Organization:	4 4 3 1 9	0	0		4 4 3 1 9
Totals	257129	7139	17701		281969

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name B A U G First Name R O N A L D Position T R A I N I N G R E P Name of Affiliated Organization	8 2 2 0 2	5 8 7 3	5 7 6 9		9 3 8 4 4
Last Name B A U M A N First Name W I L L I A M Position S E R V I C I N G R E P Name of Affiliated Organization	3 1 1 3 9	6 9 6	4 9 1		3 2 3 2 6
Last Name B A U M B A C H First Name A L L A N Position B O O K K E E P E R B I Name of Affiliated Organization	4 7 6 8 6	0	0		4 7 6 8 6
Last Name B A X T E R First Name M I C H A E L Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 4 2 7	7 1 3 9	6 8 9 9		9 6 4 6 5
Last Name B E A N First Name S C O T T Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 2 7 7	7 1 7 9	2 0 2 5 2		1 0 9 7 0 8
Totals	325731	20887	33411		380029

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: B E A R D S L E E First Name: J O H N Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 5 4 5 2	7 1 9 9	1 1 0 2 4		1 0 3 6 7 5
Last Name: B E A R D S L E Y First Name: J A M E S Position: A D M I N I S T R A T I V E A Name of Affiliated Organization:	9 4 6 2 2	7 1 5 9	1 1 7 3 2		1 1 3 5 1 3
Last Name: B E A R D S L E Y First Name: N A T H A N Position: S E R V I C I N G R E P Name of Affiliated Organization:	4 2 6 9 6	3 7 9 1	2 7 4 2		4 9 2 2 9
Last Name: B E A S L E Y First Name: S Y L V I A Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 6 0 6 3	0	0		4 6 0 6 3
Last Name: B E C K M A N First Name: S T E V E N Position: A S S I S T A N T - M A J O Name of Affiliated Organization:	8 9 7 8 2	7 1 7 9	2 7 2 8		9 9 6 8 9
Totals	358615	25328	28226		412169

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: B E C O T T E First Name: D O N N A Position: O R G A N I Z E R Name of Affiliated Organization:	8 2 2 7 2	7 1 7 9	1 0 5 4 5		9 9 9 9 6
Last Name: B E G L E Y First Name: E A R L Position: S E R V I C I N G R E P Name of Affiliated Organization:	5 2 5 1 7	1 8 5 6	1 0 9 8		5 5 4 7 1
Last Name: B E N N E T T First Name: C R I C H A Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	4 1 1 6		9 3 5 7 2
Last Name: B E N N Y First Name: R O S A L I N Position: B O C K K E E P E R B I Name of Affiliated Organization:	4 1 5 4 1	0	0		4 1 5 4 1
Last Name: B E R G M A N N First Name: A L F R E D Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	4 5 8 2		9 4 1 4 8
Totals	341034	23353	20341		384728

ORGANIZATION NAME: **International Union - UAW**
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: B E R N A T H First Name: G A R R Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 0 4	7 1 5 9	1 0 3 6 0		9 9 8 2 3
Last Name: B E R R Y First Name: F R A N C E S Position: S T E N O G R A P H E R Name of Affiliated Organization:	3 1 4 8 3	0	0		3 1 4 8 3
Last Name: B E S T First Name: C H A R L E S Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 5 0 2	7 1 7 9	1 3 9 2 4		1 0 3 6 0 5
Last Name: B E S T First Name: M I C H E L L Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 6 0 9 0	0	6 6 4		4 6 7 5 4
Last Name: B E T A N C O U R T First Name: M A R T A Position: C L E R K T Y P I S T Name of Affiliated Organization:	4 4 2 3 8	0	0		4 4 2 3 8
Totals	286617	14338	24948		325903

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position (Enter employee's job title.)					
(C) Name of Affiliated Organization (if applicable)					
Last Name: B E T T A G First Name: C A R O L Position: S W I T C H B O A R D O P E R Name of Affiliated Organization:	4 4 5 6 0	0	0		4 4 5 6 0
Last Name: B E V I S First Name: R O Y D O N Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 3 8 9 4	7 1 5 9	1 3 0 3 1		1 0 4 0 8 4
Last Name: B I E B E R First Name: K E N N E T H Position: O R G A N I Z E R Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	7 7 0 5		9 7 2 1 6
Last Name: B I E B E R First Name: M I C H A E L Position: A U D I T O R Name of Affiliated Organization:	8 2 3 5 2	7 1 9 9	9 6 0 1		9 9 1 5 2
Last Name: B I E B E R First Name: R O N A L D Position: C O O R D I N A T O R Name of Affiliated Organization:	8 6 4 2 2	7 1 5 9	1 0 3 4 6		1 0 3 9 2 7
Totals	379580	28676	40683		449939

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: B I E G E L First Name: L A U R I E Position: I N T ' L O F F I C E R ' S Name of Affiliated Organization:	4 5 2 7 5	0	2 1 8		4 5 4 9 3
Last Name: B I N N I N G T O N First Name: C A T H Y Position: S E C R E T A R Y I (M A J Name of Affiliated Organization:	4 6 1 9 3	0	1 9 2 1		4 8 1 1 4
Last Name: B I N Z First Name: J E F F R E Y Position: R E T I R E E R E P Name of Affiliated Organization:	3 5 0 6 9	3 1 0 5	3 4 6 2		4 1 6 3 6
Last Name: B I S C E G L I A First Name: F R A N K Position: O R G A N I Z E R Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	1 5 1 1 0		1 0 4 5 6 6
Last Name: B I S H O P First Name: D E B I Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 5 9	7 1 9 6		9 6 7 8 2
Totals	291241	17443	27907		336591

ORGANIZATION NAME: International Union - UAW
 ENDING DATE OF PERIOD COVERED: 12/31/00

FILE NUMBER: 000-149

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: B I S H O P First Name: W I L L I A M Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	6 7 5 2		9 6 2 0 8
Last Name: B L A C K First Name: M A R K Position: T R A I N I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	1 0 1 3 0		9 9 6 4 1
Last Name: B L A C K First Name: M A R Y Position: S T E N O G R A P H E R Name of Affiliated Organization:	2 3 0 0 7	0	0		2 3 0 0 7
Last Name: B L A C K W E L L First Name: J A C Q U I L Position: I N T ' L O F F I C E R ' S Name of Affiliated Organization:	5 0 8 6 7	0	0		5 0 8 6 7
Last Name: B L A I N E First Name: J A M E S Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	9 6 1 1		9 9 0 6 7
Totals	320780	21517	26493		368790

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

FILE NUMBER: 0 0 0 - 1 4 9

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name B L A K E First Name K I M Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 2 7 7	7 1 7 9	5 1 5 9		9 4 6 1 5
Last Name B L E D S O E First Name F E R N Position S E C R E T A R Y I (M A J Name of Affiliated Organization	4 5 9 2 3	0	2 5 2		4 6 1 7 5
Last Name B L U M First Name R O N A L D Position R E S E R A C H S P E C I A L Name of Affiliated Organization	8 2 7 2 7	7 0 5 9	2 9 6 0		9 2 7 4 6
Last Name B O B C First Name R I C H A R D Position A D M I N I S T R A T I V E A Name of Affiliated Organization	9 4 6 9 7	7 1 5 9	6 2 3 5		1 0 8 0 9 1
Last Name B O G G S First Name M O N I C A Position S T E N O G R A P H E R Name of Affiliated Organization	4 4 1 5 8	0	0		4 4 1 5 8
Totals	349782	21397	14606		385785

ORGANIZATION NAME: International Union - UAW
 ENDING DATE OF PERIOD COVERED: 12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: BOHLAND First Name: DIANE Position: CLERK TYPIST Name of Affiliated Organization:	4 3 8 4 2	0	0		4 3 8 4 2
Last Name: BOLDI First Name: LANA Position: SERVICING REP Name of Affiliated Organization:	8 2 5 0 2	7 1 1 9	1 2 6 1 6		1 0 2 2 3 7
Last Name: BOLLINGER First Name: MATTHEW Position: SERVICING REP Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	1 3 9 4 1		1 0 3 3 9 7
Last Name: BOLTJE First Name: TERRY Position: ORGANIZER Name of Affiliated Organization:	8 2 8 3 3	7 1 3 9	1 2 6 8 4		1 0 2 6 5 6
Last Name: BOMMARITO First Name: JERRY Position: HEATING / AIR COND Name of Affiliated Organization:	6 6 7 5 7	0	0		6 6 7 5 7
Totals	358211	21437	39241		418889

ORGANIZATION NAME:	International Union - UAW
ENDING DATE OF PERIOD COVERED	12/31/00

FILE NUMBER: 0 0 0 - 1 4 9

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name B O O N E First Name K E L L Y Position L A W C L E R K Name of Affiliated Organization	2 8 2 1 6	0	5 9 1 8		3 4 1 3 4
Last Name B O O N E First Name R O B E R T Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 3 5 2	7 1 5 9	8 8 3 2		9 8 3 4 3
Last Name B O R E N First Name M D A N N Y Position S E R V I C I N G R E P Name of Affiliated Organization	8 3 4 5 2	7 1 4 2	1 9 3 2 4		1 0 9 9 1 8
Last Name B O R I T Z K I First Name T H O M A S Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 3 5 2	7 1 7 9	7 7 5 2		9 7 2 8 3
Last Name B O R T Z First Name D A V I D Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 4 2 7	7 1 3 9	2 9 7 1 2		1 1 9 2 7 8
Totals	358799	28619	71538		458956

ORGANIZATION NAME:	International Union - UAW
ENDING DATE OF PERIOD COVERED:	12/31/00

FILE NUMBER: 0 0 0 - 1 4 9

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name B O S B O U S First Name J O S E P H Position S E C U R I T Y Name of Affiliated Organization	6 4 2 4 3	2 9 9 8	2 3 8 9		6 9 6 3 0
Last Name B O S W O R T H First Name D A V I D Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 2 7 7	7 1 7 9	9 8 1 7		9 9 2 7 3
Last Name B O U R D O First Name B E T H Position C L E R K T Y P I S T Name of Affiliated Organization	4 2 7 4 9	0	0		4 2 7 4 9
Last Name B O W E R S First Name R A C H E L Position C L E R K T Y P I S T Name of Affiliated Organization	3 3 8 3 5	0	0		3 3 8 3 5
Last Name B O W E R S First Name W I L L I A M Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 4 2 7	7 1 3 9	9 0 5 9		9 8 6 2 5
Totals	305531	17316	21265		344112

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary <small>(before taxes and other deductions)</small>	Allowances	Disbursements for Official Business	Other Disbursements	Total
(B) Position <small>(Enter employee's job title.)</small>	(D)	(E)	(F)	(G)	(H)
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: B O W L I N G First Name: D A R R E L L Position: S T R I K E I N S U R A N C E Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	1 0 7 8 3		1 0 0 3 4 9
Last Name: B O W L I N G First Name: W I L L I A M Position: S E R V I C I N G R E P Name of Affiliated Organization:	4 5 9 6 8	1 2 5 6	1 1 0 4		4 8 3 2 8
Last Name: B R A D E N First Name: M A R C I A Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 4 9 4 0	0	3 0 8		4 5 2 4 8
Last Name: B R A D F O R D First Name: L E O N Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 5 9	9 0 4 1		9 8 6 2 7
Last Name: B R A D S H A W First Name: B I L L Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	5 9 2 4		9 5 3 8 0
Totals	338039	22733	27160		387932

ORGANIZATION NAME: International Union - UAW
 ENDING DATE OF PERIOD COVERED: 12/31/00

FILE NUMBER: 000-149

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: B R A D S H A W First Name: C H E R Y L Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 0 2	7 2 1 9	9 2 5 8		9 8 6 7 9
Last Name: B R A D Y First Name: P A T R I C I Position: I N T ' L O F F I C E R ' S Name of Affiliated Organization:	5 8 3 3 7	0	3 4 0 9		6 1 7 4 6
Last Name: B R A M E L L First Name: M A R I L Y N Position: S E C R E T A R Y I (M A J Name of Affiliated Organization:	4 5 2 1 3	0	0		4 5 2 1 3
Last Name: B R E E D E N First Name: C A R R I E Position: S T E N O G R A P H E R Name of Affiliated Organization:	1 3 2 7 3	0	0		1 3 2 7 3
Last Name: B R E E D L O V E First Name: R O B E R T Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	8 5 3 2		9 7 9 8 8
Totals	281302	14398	21199		316899

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: B R E S S L E R First Name: T I M O T H Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	1 2 6 2 8		1 0 2 1 9 4
Last Name: B R I D G E W A T E R First Name: R E B E C C A Position: T E C H A I D I Name of Affiliated Organization:	4 5 0 8 5	0	0		4 5 0 8 5
Last Name: B R I M M First Name: G L O R I A Position: E D U C A T I O N R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 3 9	9 5 8 1		9 9 0 7 2
Last Name: B R O M A R O F F First Name: J E A N Position: S E C R E T A R Y I (M A J Name of Affiliated Organization:	4 7 5 2 3	0	0		4 7 5 2 3
Last Name: B R O O K S First Name: D A N I E L Position: A S S I S T A N T M I N O R Name of Affiliated Organization:	8 4 6 3 7	7 1 3 9	1 2 6 1 8		1 0 4 3 9 4
Totals	342324	21417	34827		398268

ORGANIZATION NAME: International Union - UAW
 ENDING DATE OF PERIOD COVERED: 12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: B R O O K S First Name: D E N I S E Position: T E C H A I D I Name of Affiliated Organization:	3 2 8 2 7	0	0		3 2 8 2 7
Last Name: B R O W D E R First Name: C A T H E R I Position: A S S I S T A N T - Y A J O Name of Affiliated Organization:	8 9 0 4 4	7 1 7 9	1 6 7 1 7		1 1 2 9 4 0
Last Name: B R O W N First Name: J E R O M E Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	1 7 0 6 2		1 0 6 5 7 3
Last Name: B R O W N First Name: L E R O Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 0 2	7 1 9 9	9 3 2 5		9 8 7 2 6
Last Name: B R O W N First Name: M I C H A E L Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	1 5 8 0 9		1 0 5 3 2 0
Totals	368777	28696	58913		456386

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary <small>(before taxes and other deductions)</small>	Allowances	Disbursements for Official Business	Other Disbursements	Total
(B) Position <small>(Enter employee's job title.)</small>	(D)	(E)	(F)	(G)	(H)
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: B R O W N First Name: R U B Y Position: A C T U A R I A L C L E R K Name of Affiliated Organization:	3 9 7 6 9	0	0		3 9 7 6 9
Last Name: B R O W N I N G First Name: C H A R L E S Position: S E R V I C I N G R E P Name of Affiliated Organization:	3 5 0 6 9	3 0 8 5	2 6 4 9		4 0 8 0 3
Last Name: B R U G L I O First Name: M Y R A Position: B O O K K E E P E R B I Name of Affiliated Organization:	4 6 7 7 9	0	0		4 6 7 7 9
Last Name: B R U M M I T T First Name: B O B B Y Position: A S S I S T A N T - R E G I Name of Affiliated Organization:	9 2 1 9 9	7 1 1 9	1 7 0 8 8		1 1 6 4 0 6
Last Name: B R U T M A N First Name: S A R A H Position: G E N E R A L A - M A I N Name of Affiliated Organization:	4 3 7 0 8	0	0		4 3 7 0 8
Totals	257524	10204	19737		287465

ORGANIZATION NAME: International Union - UAW
 ENDING DATE OF PERIOD COVERED: 12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: BRYAN First Name: DENNIS Position: ASSISTANT MINOR Name of Affiliated Organization:	8 4 4 8 7	7 0 9 1	5 5 3 0		9 7 1 0 8
Last Name: BRYMER First Name: JAMES Position: ORGANIZER Name of Affiliated Organization:	8 2 6 4 7	7 1 3 1	1 6 4 2 1		1 0 6 1 9 9
Last Name: BRYNER First Name: GARY Position: ADMINISTRATIVE A Name of Affiliated Organization:	9 4 9 2 2	7 0 9 9	6 0 7 2		1 0 8 0 9 3
Last Name: BRYNER First Name: SHELLY Position: SECRETARY I (MAJ) Name of Affiliated Organization:	5 0 5 5 4	0	1 7 5 4		5 2 3 0 8
Last Name: BUCCI First Name: KRIS Position: TECH AID I Name of Affiliated Organization:	4 5 3 1 2	0	0		4 5 3 1 2
Totals	357922	21321	29777		409020

ORGANIZATION NAME:	International Union - UAW
ENDING DATE OF PERIOD COVERED:	12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: B U C H N E R First Name: J O Y C E Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 5 7 0 3	0	0		4 5 7 0 3
Last Name: B U D N I C K First Name: B E T T Y L Position: A D M I N I S T R A T I V E S Name of Affiliated Organization:	4 1 7 3 5	0	0		4 1 7 3 5
Last Name: B U L L O C K First Name: T H E R E S A Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 6 2	7 1 7 9	1 0 0 7 8		9 9 5 1 9
Last Name: B U N C H First Name: L I N W O O D Position: D E P A R T M E N T H E A D Name of Affiliated Organization:	8 2 6 1 2	3 6 9 0	7 8 0 7		9 4 1 0 9
Last Name: B U R D E N First Name: W I L L A R D Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	4 6 1 5		9 4 1 8 1
Totals	334739	18008	22500		375247

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position (Enter employee's job title.)					
(C) Name of Affiliated Organization (if applicable)					
Last Name: B U R G E S S First Name: B E N N I E Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 5 9 6 4	7 1 1 9	1 7 0 3 4		1 1 0 1 1 7
Last Name: B U R G E S S First Name: D O N Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 5 0 2	7 1 1 9	1 0 8 5 2		1 0 0 4 7 3
Last Name: B U R N E R First Name: M A R S H A Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 5 4 7 1	0	0		4 5 4 7 1
Last Name: B U R T C H First Name: D A V I D Position: D E P A R T M E N T H E A D Name of Affiliated Organization:	8 9 9 3 2	7 1 3 9	9 5 1 9		1 0 6 5 9 0
Last Name: B U S H First Name: C A R O L Y N Position: C L E R K T Y P I S T Name of Affiliated Organization:	1 6 5 9 6	0	0		1 6 5 9 6
Totals	320465	21377	37405		379247

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: B U Z Z Y First Name: D E B O R A H Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 9 9	4 2 1 3		9 3 6 8 9
Last Name: B Y D L O S First Name: B E V E R L Y Position: A D M I N I S T R A T I V E S Name of Affiliated Organization:	4 6 6 2 5	0	0		4 6 6 2 5
Last Name: B Y E R S First Name: J O H N Position: A S S I S T A N T M I N O R Name of Affiliated Organization:	8 6 4 2 2	7 1 5 9	1 4 8 1 0		1 0 8 3 9 1
Last Name: C A B R E R O S First Name: P H I L L I P Position: S E R V I C I N G R E P Name of Affiliated Organization:	5 6 2 3 6	1 8 5 6	4 6 1 3		6 2 7 0 5
Last Name: C A B R E R O S First Name: R E B E C C A Position: T R A I N I N G R E P Name of Affiliated Organization:	5 6 5 9 1	0	1 3 1 2		5 7 9 0 3
Totals	328151	16214	24948		369313

ORGANIZATION NAME: International Union - UAW
 ENDING DATE OF PERIOD COVERED: 12/31/00

SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: C A C C A M O First Name: E S T E L L A Position: C I T I Z E N S H I P R E P Name of Affiliated Organization:	7 2 3 7 9	6 2 9 2	9 4 9 0		8 8 1 6 1
Last Name: C A L H O U N First Name: L O I S Position: K E Y P U N C H O P E R A T O R Name of Affiliated Organization:	4 4 1 7 7	0	0		4 4 1 7 7
Last Name: C A L V O First Name: J O S E P H Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	6 6 2 9		9 6 1 4 0
Last Name: C A M E R O N First Name: C L A U D E T Position: B O C K K E E P E R A Name of Affiliated Organization:	4 6 6 4 6	0	0		4 6 6 4 6
Last Name: C A M P B E L L First Name: B U D D Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	4 5 7 4 8	4 0 7 3	2 4 6 2		5 2 2 8 3
Totals	291302	17524	18581		327407

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: C A M P B E L L First Name: E S T H E R Position: A S S I S T A N T M I N O R Name of Affiliated Organization:	8 6 4 9 7	7 1 3 9	7 5 2 6		1 0 1 1 6 2
Last Name: C A M P B E L L First Name: F R A N C I S Position: A S S I S T A N T - M A J O R Name of Affiliated Organization:	8 9 5 4 5	7 1 5 9	9 8 7 2		1 0 6 5 7 6
Last Name: C A M P B E L L First Name: L A U R A Position: A T T O R N E Y Name of Affiliated Organization:	1 0 1 7 1 7	7 1 1 9	3 8 7 6		1 1 2 7 1 2
Last Name: C A N N O N First Name: M I C H A E L Position: R E S E R A C H S P E C I A L Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	9 6 4 4		9 9 1 0 0
Last Name: C A P S H A W First Name: W I L L I A M Position: A D M I N I S T R A T I V E A Name of Affiliated Organization:	9 4 5 3 4	7 1 5 9	4 8 0 7		1 0 6 5 0 0
Totals	454570	35755	35725		526050

ORGANIZATION NAME:	International Union - UAW
ENDING DATE OF PERIOD COVERED:	12/31/00

FILE NUMBER: 0 0 0 - 1 4 9

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name C A R D A M O N E First Name L A U R A Position B C O K K E E P E R 3 I Name of Affiliated Organization	2 9 6 8 1	0	0		2 9 6 8 1
Last Name C A R D I N A L First Name R I C H A R D Position S E R V I C I N G R E P Name of Affiliated Organization	9 1 8 9 9	6 7 6 6	9 5 4 2		1 0 8 2 0 7
Last Name C A R E Y First Name T H O M A S Position A T T O R N E Y Name of Affiliated Organization	1 0 1 4 1 7	7 1 9 9	4 1 7 9		1 1 2 7 9 5
Last Name C A R L O First Name K I M B E R L Position S T E N O G R A P H E R Name of Affiliated Organization	4 3 2 1 8	0	0		4 3 2 1 8
Last Name C A R N E S First Name A L B E R T Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 4 2 7	7 1 3 9	6 7 1 5		9 6 2 8 1
Totals	348642	21104	20436		390182

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

FILE NUMBER: 0 0 0 - 1 4 9

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: C A R P E N T E R First Name: D A N I E L Position: S E C U R I T Y Name of Affiliated Organization:	6 3 4 9 3	2 4 5 1	1 1 6 8		6 7 1 1 2
Last Name: C A R P E N T E R First Name: D I A N A Position: T E C H A I D I Name of Affiliated Organization:	4 2 2 4 0	0	0		4 2 2 4 0
Last Name: C A R P E N T E R First Name: J A M E S Position: D E P A R T M E N T H E A D Name of Affiliated Organization:	9 3 7 5 9	7 1 5 9	7 7 9 7		1 0 8 7 1 5
Last Name: C A R P E N T E R First Name: M A R Y Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 7 4 0 4	0	5 4		4 7 4 5 8
Last Name: C A R R I G A N First Name: R E N E E Position: A D M I N I S T R A T I V E S Name of Affiliated Organization:	3 6 4 5 4	0	3 2 1		3 6 7 7 5
Totals	283350	9610	9340		302300

ORGANIZATION NAME	International Union - UAW
ENDING DATE OF PERIOD COVERED:	12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name C A R T A G E N A First Name C A R M E N Position S T E N O G R A P H E R Name of Affiliated Organization	4 5 4 5 4	0	0		4 5 4 5 4
Last Name C A R T E R First Name J O S E P H Position S E R V I C I N G R E P Name of Affiliated Organization	7 6 8 4 1	6 6 9 8	6 8 2 2		9 0 3 6 1
Last Name C A R U S O N E First Name G L O R I A Position S T E N O G R A P H E R Name of Affiliated Organization	4 5 5 2 8	0	6 9		4 5 5 9 7
Last Name C A S S E L First Name H A R O L D Position R E T I R E E R E P Name of Affiliated Organization	8 2 2 0 2	7 1 7 9	7 3 0 5		9 6 6 8 6
Last Name C A S S E Y First Name M A R I E A Position A D M I N I S T R A T I V E S Name of Affiliated Organization	4 6 2 5 6	0	3 5 8		4 6 6 1 4
Totals	296281	13877	14554		324712

ORGANIZATION NAME International Union - UAW
ENDING DATE OF PERIOD COVERED 12/31/00

FILE NUMBER: 0 0 0 - 1 4 9

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name C A S T E E L First Name G A R Y Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 2 7 7	7 1 7 9	1 2 0 9 2		1 0 1 5 4 8
Last Name C A S T L E First Name C H A R L E S Position T R A I N I N G R E P Name of Affiliated Organization	8 2 3 5 2	7 1 5 9	9 0 1 8		9 8 5 2 9
Last Name C A T A L F I O First Name M A R I A Position T E C H N I C I A N Name of Affiliated Organization	4 6 7 3 4	0	1 5 6		4 6 8 9 0
Last Name C A T A N Z A R O First Name J A S P E R Position C O O R D I N A T O R Name of Affiliated Organization	8 6 5 7 2	7 1 1 9	4 7 8 6		9 8 4 7 7
Last Name C A U D L E First Name L O T T I E Position S T E N O G R A P H E R Name of Affiliated Organization	4 4 5 8 6	0	0		4 4 5 8 6
Totals	342521	21457	26052		390030

ORGANIZATION NAME: International Union - UAW
ENDING DATE OF PERIOD COVERED: 12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: CAVANAUGH First Name: MICHAEL Position: DEPARTMENT HEAD Name of Affiliated Organization:	8 6 3 4 7	7 1 7 9	1 1 5 0 4		1 0 5 0 3 0
Last Name: CECIL First Name: JERRY Position: SERVICING REP Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	6 4 1 6		9 5 8 7 2
Last Name: CERRA First Name: LAWRENCE Position: SERVICING REP Name of Affiliated Organization:	8 2 5 0 2	7 1 1 9	1 1 8 3 1		1 0 1 4 5 2
Last Name: CHAMBERS First Name: FLORENCE Position: ASSISTANT MINOR Name of Affiliated Organization:	8 4 9 4 2	7 1 5 9	8 6 6 7		1 0 0 7 6 8
Last Name: CHAPEL First Name: JULIAND Position: CLERK TYPIST Name of Affiliated Organization:	4 6 1 1 3	0	8 4		4 6 1 9 7
Totals	382181	28636	38502		449319

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

FILE NUMBER: 000-149

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: C H A P P O First Name: D E B O R A H Position: I N T ' L O F F I C E R ' S Name of Affiliated Organization:	5 5 1 4 9	0	1 7 1		5 5 3 2 0
Last Name: C H A T T E R T O N First Name: D R E W Position: S T R I K E I N S U R A N C E Name of Affiliated Organization:	6 1 0 8 7	2 4 6 0	5 8 7 5		6 9 4 2 2
Last Name: C H A V E Z First Name: D I A N A Position: I N T ' L O F F I C E R ' S Name of Affiliated Organization:	5 3 9 0 0	0	3 6 6		5 4 2 6 6
Last Name: C H E S N U T T First Name: G A R Y Position: E D U C A T I O N R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	5 9 3 4		9 5 3 9 0
Last Name: C H I L D S First Name: K A R E N Position: C L E R K T Y P I S T Name of Affiliated Organization:	3 9 9 3 8	0	2 4 5		4 0 1 8 3
Totals	292351	9639	12591		314581

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: C H I N N First Name: R O N A L D Position: O R G A N I Z E R Name of Affiliated Organization:	8 1 9 9 0	7 1 7 9	1 4 1 3 7		1 0 3 3 0 6
Last Name: C H O T K O W S K I First Name: J E R O M E Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 3 6 0 2	7 1 3 9	9 3 7 0		1 0 0 1 1 1
Last Name: C H R I S P E N First Name: J A M E S Position: M U L T I L I T H O P E R A T Name of Affiliated Organization:	4 6 8 9 2	0	0		4 6 8 9 2
Last Name: C H R I S T E N S E N First Name: J O H N Position: I N T E R N A T I O N A L A F Name of Affiliated Organization:	8 2 2 0 2	6 7 6 8	1 1 5 8 4		1 0 0 5 5 4
Last Name: C H U R C H First Name: R A Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	4 2 9 6 7	0	0		4 2 9 6 7
Totals	337653	21086	35091		393830

ORGANIZATION NAME:	International Union - UAW
ENDING DATE OF PERIOD COVERED	12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: C I O T T I First Name: J A M E S Position: T R A I N I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	5 2 0 2		9 4 7 6 8
Last Name: C I R K S First Name: V E R O N I C Position: S T E N O G R A P H E R Name of Affiliated Organization:	3 0 9 7 7	0	0		3 0 9 7 7
Last Name: C L A F F E Y First Name: P A T R I C I Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 5 7 7 0	0	0		4 5 7 7 0
Last Name: C L A M P I T T First Name: P A T R I C K Position: M U L T I L I T H O P E R A T Name of Affiliated Organization:	4 6 2 8 4	0	0		4 6 2 8 4
Last Name: C L A R K First Name: J O H N Position: A S S I S T A N T - M A J O Name of Affiliated Organization:	8 9 6 5 9	7 1 3 9	1 6 3 3 5		1 1 3 1 3 3
Totals	295117	14278	21537		330932

ORGANIZATION NAME: International Union - UAW
 ENDING DATE OF PERIOD COVERED: 12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary <small>(before taxes and other deductions)</small>	Allowances <small>(E)</small>	Disbursements for Official Business <small>(F)</small>	Other Disbursements <small>(G)</small>	Total <small>(H)</small>
(B) Position <small>(Enter employee's job title.)</small>	(D)	(E)	(F)	(G)	(H)
(C) Name of Affiliated Organization <small>(if applicable)</small>	(D)	(E)	(F)	(G)	(H)
Last Name: C L A R K First Name: P A T R I C I Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 5 9	1 9 4 9 4		1 0 9 0 8 0
Last Name: C L I C K First Name: D O R R I S Position: S E C R E T A R Y I (M A J Name of Affiliated Organization:	4 6 5 4 6	0	4 3 5		4 6 9 8 1
Last Name: C L I F T O N First Name: J E R R Y Position: T R A I N I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	9 9 0 4		9 9 4 1 5
Last Name: C L I N G A N First Name: J A M E S Position: S E R V I C I N G R E P Name of Affiliated Organization:	4 1 1 9 8	3 6 5 0	7 6 7 1		5 2 5 1 9
Last Name: C C A K L E Y First Name: J A M E S Position: D E P A R T M E N T H E A D Name of Affiliated Organization:	8 6 4 9 7	7 1 3 9	1 2 4 3 6		1 0 6 0 7 2
Totals	339020	25107	49940		414067

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: C O D E L U P P I First Name: G E O R G E Position: T I M E S T U D Y S P E C I Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	9 0 2 6		9 8 4 8 2
Last Name: C O D Y First Name: K A T H L E E Position: S T E N O G R A P H E R Name of Affiliated Organization:	5 0 4 7 9	0	0		5 0 4 7 9
Last Name: C O L B E R T First Name: D E W E Y Position: A S S I S T A N T - R E G I Name of Affiliated Organization:	9 2 2 7 4	7 1 3 9	1 7 6 5 4		1 1 7 0 6 7
Last Name: C O L E First Name: M A R S H A Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	5 3 8 6	8 3 7 3		9 6 0 3 6
Last Name: C O L E M A N First Name: C A R O L Y N Position: I N T ' L O F F I C E R ' S Name of Affiliated Organization:	7 0 1 1 2	0	6 9 6 0		7 7 0 7 2
Totals	377419	19704	42013		439136

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position (Enter employee's job title.)					
(C) Name of Affiliated Organization (if applicable)					
Last Name: C O L E M A N First Name: N O R M A N Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	4 5 3 8		9 4 1 0 4
Last Name: C O L L I N G S First Name: J O H N Position: A C T U A R Y Name of Affiliated Organization:	9 8 9 0 7	7 1 1 9	9 8 1 6		1 1 5 8 4 2
Last Name: C O L L I N S First Name: E A R L E N E Position: S E R V I C I N G R E P Name of Affiliated Organization:	6 4 8 4 7	0	1 3 1 2		6 6 1 5 9
Last Name: C O L O M B O First Name: L I S A Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 3 5 1 6	0	0		4 3 5 1 6
Last Name: C O L V I L L E First Name: E D G A R Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	5 4 7 2	7 9 0 7		9 5 6 5 6
Totals	371974	19730	23573		415277

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: C O M A I First Name: A N D R E W Position: H E A L T H & S A F E T Y Name of Affiliated Organization:	8 5 1 5 9	7 0 3 8	2 8 2 3		9 5 0 2 0
Last Name: C O M B S First Name: M A R Y Position: S E C R E T A R Y I (M A J Name of Affiliated Organization:	4 5 9 2 0	0	0		4 5 9 2 0
Last Name: C O M B S First Name: M A R Y Position: B O A R D S E C R E T A R Y Name of Affiliated Organization:	4 7 2 6 5	0	0		4 7 2 6 5
Last Name: C O N N O R First Name: L A W R E N C Position: R E T I R E E R E P Name of Affiliated Organization:	8 2 5 0 2	7 1 1 9	1 4 2 2 5		1 0 3 8 4 6
Last Name: C O N W A Y First Name: J E S S E Position: L E G I S L A T I V E R E P Name of Affiliated Organization:	5 2 9 1 9	1 7 7 9	5 9 6 1		6 0 6 5 9
Totals	313765	15936	23009		352710

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: C O R A C I First Name: B O N N I E Position: I N T ' L O F F I C E R ' S Name of Affiliated Organization:	4 6 3 8 4	0	0		4 6 3 8 4
Last Name: C O R A C I First Name: V I T O Position: A S S I S T A N T M I N O R Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	4 3 6 3		9 3 8 1 9
Last Name: C O R E Y First Name: W I L L I A M Position: A S S I S T A N T - M A J O Name of Affiliated Organization:	8 9 0 0 5	7 1 3 9	5 7 5 9		1 0 1 9 0 3
Last Name: C G T T O N First Name: G R E G O R Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	5 2 2 3		9 4 6 7 9
Last Name: C G X First Name: G A R Y Position: T R A I N I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	7 1 6 1		9 6 7 2 7
Totals	382370	28636	22506		433512

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

FILE NUMBER: 000-149

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: C O X First Name: H A R O L D Position: A S S I S T A N T M I N O R Name of Affiliated Organization:	8 2 8 1 0	7 1 7 9	1 8 5 8 3		1 0 8 5 7 2
Last Name: C O Y First Name: C H A R L E S Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	8 5 9 7		9 8 1 6 3
Last Name: C R A I G First Name: P A T T Y Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 4 4 0 7	0	5 4 3		4 4 9 5 0
Last Name: C R A N K First Name: P A U L A Position: G E N E R A L A - M A I N Name of Affiliated Organization:	3 2 9 0 5	0	0		3 2 9 0 5
Last Name: C R A W F O R D First Name: M A R K Position: O U T S I D E S E C U R I T Y Name of Affiliated Organization:	3 1 8 2 0	0	0		3 1 8 2 0
Totals	274369	14318	27723		316410

ORGANIZATION NAME:	International Union - UAW
ENDING DATE OF PERIOD COVERED:	12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name C R E N S H A W First Name D E L O R E S Position B O O K K E E P E R B I Name of Affiliated Organization	4 6 7 6 3	0	0		4 6 7 6 3
Last Name C R U M P First Name D O U G L A S Position B O I L E R R O O M M A N A Name of Affiliated Organization	5 4 8 9 2	0	4 6 1		5 5 3 5 3
Last Name C U D D Y First Name P E G G Y Position S T E N O G R A P H E R Name of Affiliated Organization	4 5 0 1 6	0	0		4 5 0 1 6
Last Name C U L V E R First Name J O E Position O U T S I D E S E C U R I T Y Name of Affiliated Organization	3 9 2 9 0	0	0		3 9 2 9 0
Last Name C U N N I N G H A M First Name B E T T Y E Position B O A R D S E C R E T A R Y Name of Affiliated Organization	5 0 0 0 5	0	1 7 4 1		5 1 7 4 6
Totals	235966	0	2202		238168

ORGANIZATION NAME.	International Union - UAW
ENDING DATE OF PERIOD COVERED.	12/31/00

FILE NUMBER: 000-149

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: C U R L E Y First Name: J A M E S Position: A S S I S T A N T M I N O R Name of Affiliated Organization:	5 3 2 4 3	4 2 1 5	8 8 9 7		6 6 3 5 5
Last Name: C U R R Y First Name: R O Y Position: T R A I N I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	7 4 0 3		9 6 9 6 9
Last Name: C U R S O N First Name: D A V I D Position: A D M I N I S T R A T I V E A Name of Affiliated Organization:	1 0 1 9 4 4	7 1 1 9	8 1 0 7		1 1 7 1 7 0
Last Name: C U S E N Z A First Name: J O S E P H Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	6 5 4 3		9 5 9 9 9
Last Name: C U T W A Y First Name: P A U L Position: T R A I N I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	1 2 4 9 1		1 0 1 9 4 7
Totals	402168	32831	43441		478440

ORGANIZATION NAME: International Union - UAW
 ENDING DATE OF PERIOD COVERED: 12/31/00

FILE NUMBER: 0 0 0 - 1 4 9

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: C Y B U L S K I First Name: J A N I C E Position: S E C R E T A R Y I (M A J Name of Affiliated Organization:	4 6 0 9 7	0	0		4 6 0 9 7
Last Name: C Z A P E First Name: B R Y A N Position: S E R V I C I N G R E P Name of Affiliated Organization:	4 2 6 9 6	3 7 9 1	3 2 9 1		4 9 7 7 8
Last Name: C Z E I Z L E R First Name: S H E L L E Y Position: T R A I N I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 3 9	7 6 0 0		9 7 0 9 1
Last Name: C Z E R N E S K I First Name: S T E P H E N Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	1 4 7 8 0		1 0 4 2 9 1
Last Name: D A I G N E A U First Name: M I C H A E L Position: C A R P E N T E R Name of Affiliated Organization:	5 9 1 7 2	0	0		5 9 1 7 2
Totals	312669	18089	25671		356429

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: J A K U R A S First Name: G E O R G E Position: S E R V I C I N G R E P Name of Affiliated Organization:	7 0 9 3 9	6 1 5 6	1 5 0 8 9		9 2 1 8 4
Last Name: D A N F O R D First Name: W A R R E N Position: C I T I Z E N S H I P R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	1 4 9 6 6		1 0 4 4 2 2
Last Name: D A N I E L First Name: D W A Y N E Position: S E C U R I T Y Name of Affiliated Organization:	6 1 8 0 9	2 9 9 8	2 7 9 0		6 7 5 9 7
Last Name: D A N I E L L O First Name: M I C H A E L Position: O R G A N I Z E R Name of Affiliated Organization:	8 2 1 2 7	7 2 1 9	7 7 7 9		9 7 1 2 5
Last Name: D A N J I N First Name: J A N E Position: L I B R A R I A N Name of Affiliated Organization:	4 8 9 2 7	0	2 2 9 9		5 1 2 2 6
Totals	346079	23552	42923		412554

ORGANIZATION NAME:	International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: D A N N E N H O W E R First Name: R O N A L D Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	1 7 8 5 7		1 0 7 3 1 3
Last Name: D A N T A First Name: P H Y L L I S Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 5 0 7 5	0	0		4 5 0 7 5
Last Name: D A T I N I First Name: C H R I S T O Position: I N T E R N Name of Affiliated Organization:	1 0 8 2 0	0	0		1 0 8 2 0
Last Name: D A U G H E R T Y First Name: J U L I A Position: O R G A N I Z E R Name of Affiliated Organization:	6 9 4 6 1	6 0 2 1	2 6 1 4 6		1 0 1 6 2 8
Last Name: D A V E N P O R T First Name: M A R J O R I Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 1 2 9 9	0	0		4 1 2 9 9
Totals	248932	13200	44003		306135

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: DAVIS First Name: JAMES Position: ADMINISTRATIVE A Name of Affiliated Organization:	9 4 7 7 2	7 1 3 9	1 0 2 7 0		1 1 2 1 8 1
Last Name: DAVIS First Name: LAVERNE Position: STENOGRAPHER Name of Affiliated Organization:	4 5 2 2 5	0	0		4 5 2 2 5
Last Name: DAVIS First Name: PATRICK Position: OUTSIDE SECURITY Name of Affiliated Organization:	3 7 1 9 3	0	0		3 7 1 9 3
Last Name: DAVIS First Name: WILLIE Position: SERVICING REP Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	1 5 9 3 4		1 0 5 3 9 0
Last Name: DAVIS - MCKINN First Name: JUANITA Position: SERVICING REP Name of Affiliated Organization:	5 1 8 0 7	4 6 3 8	4 2 8 6		6 0 7 3 0
Totals	311274	18956	30490		360720

ORGANIZATION NAME:	International Union - UAW
ENDING DATE OF PERIOD COVERED:	12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary <small>(before taxes and other deductions)</small>	Allowances <small>(E)</small>	Disbursements for Official Business <small>(F)</small>	Other Disbursements <small>(G)</small>	Total <small>(H)</small>																								
(B) Position <small>(Enter employee's job title.)</small>	(D)	(E)	(F)	(G)	(H)																								
(C) Name of Affiliated Organization <small>(if applicable)</small>	(D)	(E)	(F)	(G)	(H)																								
<table border="0"> <tr> <td style="width: 30%;">Last Name</td> <td style="width: 30%;">First Name</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>D A V I S O N</td> <td>M A U R I C E</td> <td>8 1 2 7 1</td> <td>7 1 0 4</td> <td>1 9 2 0 4</td> <td>1 0 7 5 7 9</td> </tr> <tr> <td>Position</td> <td>S E R V I C I N G R E P</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Name of Affiliated Organization</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	Last Name	First Name					D A V I S O N	M A U R I C E	8 1 2 7 1	7 1 0 4	1 9 2 0 4	1 0 7 5 7 9	Position	S E R V I C I N G R E P					Name of Affiliated Organization										
Last Name	First Name																												
D A V I S O N	M A U R I C E	8 1 2 7 1	7 1 0 4	1 9 2 0 4	1 0 7 5 7 9																								
Position	S E R V I C I N G R E P																												
Name of Affiliated Organization																													
<table border="0"> <tr> <td style="width: 30%;">Last Name</td> <td style="width: 30%;">First Name</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>D E F R A N C E S C O</td> <td>A N T H O N Y</td> <td>8 2 1 8 3</td> <td>7 1 9 9</td> <td>7 5 2 1</td> <td>9 6 9 0 3</td> </tr> <tr> <td>Position</td> <td>S E R V I C I N G R E P</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Name of Affiliated Organization</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	Last Name	First Name					D E F R A N C E S C O	A N T H O N Y	8 2 1 8 3	7 1 9 9	7 5 2 1	9 6 9 0 3	Position	S E R V I C I N G R E P					Name of Affiliated Organization										
Last Name	First Name																												
D E F R A N C E S C O	A N T H O N Y	8 2 1 8 3	7 1 9 9	7 5 2 1	9 6 9 0 3																								
Position	S E R V I C I N G R E P																												
Name of Affiliated Organization																													
<table border="0"> <tr> <td style="width: 30%;">Last Name</td> <td style="width: 30%;">First Name</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>D E J E S U S</td> <td>T O N Y</td> <td>3 6 7 2 4</td> <td>1 2 3 6</td> <td>2 0 1 5</td> <td>3 9 9 7 5</td> </tr> <tr> <td>Position</td> <td>S E R V I C I N G R E P</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Name of Affiliated Organization</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	Last Name	First Name					D E J E S U S	T O N Y	3 6 7 2 4	1 2 3 6	2 0 1 5	3 9 9 7 5	Position	S E R V I C I N G R E P					Name of Affiliated Organization										
Last Name	First Name																												
D E J E S U S	T O N Y	3 6 7 2 4	1 2 3 6	2 0 1 5	3 9 9 7 5																								
Position	S E R V I C I N G R E P																												
Name of Affiliated Organization																													
<table border="0"> <tr> <td style="width: 30%;">Last Name</td> <td style="width: 30%;">First Name</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>D E L A G A R Z A</td> <td>T E R R Y</td> <td>8 2 4 2 7</td> <td>7 1 3 9</td> <td>4 8 9 7</td> <td>9 4 4 6 3</td> </tr> <tr> <td>Position</td> <td>S E R V I C I N G R E P</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Name of Affiliated Organization</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	Last Name	First Name					D E L A G A R Z A	T E R R Y	8 2 4 2 7	7 1 3 9	4 8 9 7	9 4 4 6 3	Position	S E R V I C I N G R E P					Name of Affiliated Organization										
Last Name	First Name																												
D E L A G A R Z A	T E R R Y	8 2 4 2 7	7 1 3 9	4 8 9 7	9 4 4 6 3																								
Position	S E R V I C I N G R E P																												
Name of Affiliated Organization																													
<table border="0"> <tr> <td style="width: 30%;">Last Name</td> <td style="width: 30%;">First Name</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>D E L U C A</td> <td>T I N A</td> <td>4 4 0 5 1</td> <td>0</td> <td>0</td> <td>4 4 0 5 1</td> </tr> <tr> <td>Position</td> <td>S T E N O G R A P H E R</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Name of Affiliated Organization</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	Last Name	First Name					D E L U C A	T I N A	4 4 0 5 1	0	0	4 4 0 5 1	Position	S T E N O G R A P H E R					Name of Affiliated Organization										
Last Name	First Name																												
D E L U C A	T I N A	4 4 0 5 1	0	0	4 4 0 5 1																								
Position	S T E N O G R A P H E R																												
Name of Affiliated Organization																													
Totals		32656	22678	33637	382971																								

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: D E N A P O L I First Name: B R E N D A Position: D A T A P R O C E S S I N G Name of Affiliated Organization:	4 6 7 1 5	0	0		4 6 7 1 5
Last Name: D E N A P O L I First Name: P H I L L I P Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	7 8 3 1		9 7 3 9 7
Last Name: D E P A R G L I S First Name: D E B O R A H Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 5 1 6 7	0	0		4 5 1 6 7
Last Name: D E R U S H First Name: S H E R R Y Position: C L E R K T Y P I S T Name of Affiliated Organization:	3 9 4 9 1	0	2 2 4		3 9 7 1 5
Last Name: D E P I F A N I O First Name: F R A N K Position: T R A I N I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 7 9	7 5 1 5		9 7 0 4 6
Totals	296152	14318	15570		326040

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position (Enter employee's job title.)					
(C) Name of Affiliated Organization (if applicable)					
Last Name D E S M O N D First Name J O S E P H Position A S S I S T A N T D E P A R T Name of Affiliated Organization	8 6 5 7 2	7 1 9 9	3 1 1 5		9 5 8 8 6
Last Name D E T T O R E First Name D A W N Position M I S C 2 Name of Affiliated Organization	2 0 5 9 2	0	0		2 0 5 9 2
Last Name D I C K E R S O N First Name C A R L Position A S S I S T A N T M I N O R Name of Affiliated Organization	8 6 4 9 7	7 1 1 9	8 4 0 6		1 0 2 0 2 2
Last Name D I C K E R S O N First Name H O W A R D Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 2 7 7	7 1 7 9	7 9 3 4		9 7 3 9 0
Last Name D I E G E L First Name F R A N C E S Position C O M M U N I C A T I O N S T Name of Affiliated Organization	4 7 0 1 5	0	0		4 7 0 1 5
Totals	322953	21497	19455		363905

ORGANIZATION NAME:	International Union - UAW
ENDING DATE OF PERIOD COVERED:	12/31/00

FILE NUMBER: 000-149

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: DIEGEL First Name: LISA Position: INT'L OFFICER'S Name of Affiliated Organization:	43591	0	3844		47435
Last Name: DIFFIN First Name: RICHARD Position: SERVICING REP Name of Affiliated Organization:	51807	4638	5610		62055
Last Name: DILLINGHAM First Name: GARY Position: SECURITY Name of Affiliated Organization:	61959	2998	1327		66284
Last Name: DILLINGHAM First Name: MELANIE Position: BOOKKEEPER BI Name of Affiliated Organization:	43503	0	0		43503
Last Name: DITTES First Name: TERRENC Position: SERVICING REP Name of Affiliated Organization:	81990	7179	12888		102057
Totals	282850	14815	23669		321334

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position (Enter employee's job title.)					
(C) Name of Affiliated Organization (if applicable)					
Last Name: D I X O N First Name: P A T R I C I Position: S E C R E T A R Y I I (M I Name of Affiliated Organization:	4 5 0 1 2	0	0		4 5 0 1 2
Last Name: D O D S O N First Name: S H I R L E Y Position: B O A R D S E C R E T A R Y Name of Affiliated Organization:	4 7 3 6 4	0	3 5 5		4 7 7 1 9
Last Name: D O N A H U E First Name: J A M E S Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 5 0 2	7 1 1 9	8 6 4 4		9 8 2 6 5
Last Name: D O N O V A N First Name: K E V I N Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	1 0 5 3 3		9 9 9 8 9
Last Name: D O O L E Y First Name: P E T E R Position: H E A L T H & S A F E T Y Name of Affiliated Organization:	8 2 6 5 2	7 0 7 9	1 2 4 3 1		1 0 2 1 6 2
Totals	339807	21377	31963		393147

ORGANIZATION NAME: International Union - UAW

FILE NUMBER: 000-149

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name D O O L E Y First Name T I M O T H Y Position L E A D E R - M A I N T E N Name of Affiliated Organization	4 5 2 3 9	0	0		4 5 2 3 9
Last Name D O U G L A S First Name D O N N Y Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 5 7 7	7 0 9 9	1 1 0 9 4		1 0 0 7 7 0
Last Name D O W E L L First Name C A R L Position S E R V I C I N G R E P Name of Affiliated Organization	7 5 8 5 2	6 6 0 1	6 7 1 6		8 9 1 6 9
Last Name D O Y L E First Name P E T E R Position S E C U R I T Y Name of Affiliated Organization	4 9 1 7 9	8 4 8	3 2 8		5 0 3 5 5
Last Name D R I N G First Name B O N N I E Position B O A R D S E C R E T A R Y Name of Affiliated Organization	4 9 0 0 8	0	3 2 7 3		5 2 2 8 1
Totals	301855	14548	21411		337814

ORGANIZATION NAME: International Union - UAW
 ENDING DATE OF PERIOD COVERED: 12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position (Enter employee's job title.)					
(C) Name of Affiliated Organization (if applicable)					
Last Name: DRUDI First Name: GREGORY Position: SERVICING REP Name of Affiliated Organization:	33547	2964	2604		39115
Last Name: DRUGACH First Name: MICHAEL Position: SERVICING REP Name of Affiliated Organization:	82202	7199	6413		95814
Last Name: DUERKOP First Name: CATHY Position: STENOGRAPHER Name of Affiliated Organization:	46496	0	0		46496
Last Name: DUFFEY First Name: LISA Position: CLERK TYPIST Name of Affiliated Organization:	44422	0	0		44422
Last Name: DUFFY First Name: KOLLEEN Position: PHOTO LAYOUT TYP Name of Affiliated Organization:	46399	0	0		46399
Totals	253066	10163	9017		272246

ORGANIZATION NAME	International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name D U N C A N First Name J A M E S Position S E R V I C I N G R E P Name of Affiliated Organization	8 5 6 7 7	7 1 1 9	1 8 1 5 7		1 1 0 9 5 3
Last Name D U N M O R E First Name T I M O T H Y Position T R A I N I N G R E P Name of Affiliated Organization	8 2 4 2 7	7 1 3 9	3 7 1 2		9 3 2 7 8
Last Name D U N N First Name A N D R E W Position S Y S T E M S A N A L Y S T Name of Affiliated Organization	8 2 4 2 7	7 1 3 9	6 7 7 5		9 6 3 4 1
Last Name D U N N First Name D A V I D Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 2 7 7	7 1 7 9	8 9 5 7		9 8 4 1 3
Last Name D U N N First Name L I S A Position S T E N O G R A P H E R Name of Affiliated Organization	4 5 7 0 1	0	0		4 5 7 0 1
Totals	378509	28576	37601		444686

ORGANIZATION NAME:	International Union - UAW
ENDING DATE OF PERIOD COVERED:	12/31/00

FILE NUMBER: 000-149

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: D U N N I N G First Name: L O N N Y Position: A U D I T O R Name of Affiliated Organization:	1 9 8 3 0	1 6 9 4	3 9 1 3		2 5 4 3 7
Last Name: E A S O N First Name: C A R R O L L Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	1 5 4 9 8		1 0 5 0 0 9
Last Name: E B E R L E First Name: G E O R G E Position: G E N E R A L A - M A I N Name of Affiliated Organization:	6 5 7 9 5	0	0		6 5 7 9 5
Last Name: E B E R L E First Name: R U T H Position: C I T I Z E N S H I P R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	6 5 1 5		9 5 9 7 2
Last Name: E C K B E R G First Name: G L E N Position: M I S C 2 Name of Affiliated Organization:	3 6 1 1 5	0	0		3 6 1 1 5
Totals	286369	16032	25927		328328

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

FILE NUMBER: 0 0 0 - 1 4 9

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: E C K B E R G First Name: S U S A N Position: M I S C 2 Name of Affiliated Organization:	2 4 0 2 8	0	0		2 4 0 2 8
Last Name: E C K L E R First Name: E L S O N Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	8 5 6 5		9 8 0 7 6
Last Name: E D I N G First Name: R A N D Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 9 9	5 0 7 8		9 4 5 5 4
Last Name: E L L W O O D First Name: C A R O L Position: B O O K K E E P E R B I Name of Affiliated Organization:	4 6 8 3 2	0	0		4 6 8 3 2
Last Name: E L L W O O D First Name: D O N A L D Position: H E A T I N G / A I R C O N D Name of Affiliated Organization:	5 8 9 7 6	0	0		5 8 9 7 6
Totals	294465	14358	13643		322466

ORGANIZATION NAME:	International Union - UAW
ENDING DATE OF PERIOD COVERED:	12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary <small>(before taxes and other deductions)</small>	Allowances <small>(E)</small>	Disbursements for Official Business <small>(F)</small>	Other Disbursements <small>(G)</small>	Total <small>(H)</small>
(B) Position <small>(Enter employee's job title.)</small>	(D)	(E)	(F)	(G)	(H)
(C) Name of Affiliated Organization <small>(if applicable)</small>	(D)	(E)	(F)	(G)	(H)
Last Name: E M B R Y First Name: J E R R Y Position: T I M E S T U D Y S P E C I Name of Affiliated Organization:	8 2 5 7 7	7 0 9 9	8 8 0 6		9 8 4 8 2
Last Name: E M E R S O N First Name: H O Y T Position: S E R V I C I N G R E P Name of Affiliated Organization:	5 6 1 3 4	1 8 5 6	1 6 4 3		5 9 6 3 3
Last Name: E M E R S O N First Name: J A M E S L Position: O U T S I D E S E C U R I T Y Name of Affiliated Organization:	3 8 1 5 4	0	0		3 8 1 5 4
Last Name: E M E R Y First Name: E A R N E S T Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	6 4 6 4		9 6 0 3 0
Last Name: E N G E L First Name: B E T S E Y Position: A T T O R N E Y Name of Affiliated Organization:	1 0 1 4 9 2	7 1 5 9	7 8 3 8		1 1 6 4 8 9
Totals	360784	23253	24751		408788

ORGANIZATION NAME:	International Union - UAW
ENDING DATE OF PERIOD COVERED:	12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name E N G L A N D First Name H E L E N Position S T E N O G R A P H E R Name of Affiliated Organization	4 5 6 2 6	0	7 0 2		4 6 3 2 8
Last Name E N G L A N D First Name J A M E S Position O R G A N I Z E R Name of Affiliated Organization	8 2 0 9 5	7 1 7 9	2 8 3 5 8		1 1 7 6 3 2
Last Name E N G R A M First Name V E R N E L L Position I N T ' L O F F I C E R ' S Name of Affiliated Organization	4 7 6 3 9	0	2 3 3		4 7 8 7 2
Last Name E S T R A D A First Name C Y N T H I A Position O R G A N I Z E R Name of Affiliated Organization	8 1 2 7 5	7 1 0 4	1 0 5 8 6		9 8 9 6 5
Last Name E V A N S First Name J O S E P H Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 2 7 7	7 1 7 9	9 0 7 6		9 8 5 3 2
Totals	338912	21462	48955		409329

ORGANIZATION NAME: International Union - UAW
 ENDING DATE OF PERIOD COVERED: 12/31/00

FILE NUMBER: 000-149

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: E V A N S First Name: R O B E R T Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	7 5 5 3		9 7 0 0 9
Last Name: E V A N S First Name: S A U N D R A Position: I N T ' L O F F I C E R ' S Name of Affiliated Organization:	4 8 8 7 3	0	2 2 4 2		5 1 1 1 5
Last Name: E V O L A First Name: C H E R Y L Position: B O O K K E E P E R A Name of Affiliated Organization:	4 8 5 6 7	0	0		4 8 5 6 7
Last Name: E W I N G First Name: L I N D A Position: R E S E R A C H S P E C I A L Name of Affiliated Organization:	8 4 4 2 7	7 1 3 9	6 4 3 5		9 8 0 0 1
Last Name: F A L C O N E First Name: N A N C Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	4 4 2 2 2	3 9 3 2	3 3 2 1		5 1 4 7 5
Totals	308366	18250	19551		346167

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: F A L C O N E First Name: N E I L Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	1 0 4 5 1		9 9 9 0 7
Last Name: F A N C H E R First Name: L E S T E R Position: A S S I S T A N T - M A J O Name of Affiliated Organization:	8 9 7 0 7	7 1 9 9	9 3 7 3		1 0 6 2 7 9
Last Name: F A R L E Y First Name: R O B E R T Position: C O O R D I N A T O R Name of Affiliated Organization:	8 9 8 5 3	7 1 3 9	1 0 7 7 8		1 0 7 7 7 0
Last Name: F A S C I A First Name: D A V I D Position: S E R V I C I N G R E P Name of Affiliated Organization:	3 0 5 0 4	2 6 8 4	2 7 2 2		3 5 9 1 0
Last Name: F A V A Z Z A First Name: T H O M A S Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 5 9	9 2 5 3		9 8 8 3 9
Totals	374768	31360	42577		448705

ORGANIZATION NAME	International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name F A Y First Name S A R A H Position M I S C I Name of Affiliated Organization	3 6 4 0 0	7 1 9 9	0		4 3 5 9 9
Last Name F E A T H E R S T O N First Name S T E V E Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 3 5 2	7 1 5 9	1 7 5 6 8		1 0 7 0 7 9
Last Name F E D A K First Name G R E G O R Y Position A S S I S T A N T M I N O R Name of Affiliated Organization	8 6 4 2 2	7 1 5 9	7 2 3 4		1 0 0 8 1 5
Last Name F E D E W A First Name J O H N Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 3 5 2	7 1 7 9	8 8 7 6		9 8 4 0 7
Last Name F E L T O N First Name D A V I D Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 2 0 2	7 1 9 9	6 8 1 2		9 6 2 1 3
Totals	369728	35895	40490		446113

ORGANIZATION NAME.	International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name F E R N A N D E Z First Name A N T H O N Y Position R E T I R E E R E P Name of Affiliated Organization	7 6 6 1 8	3 6 9 0	1 8 6 5 9		9 8 9 6 7
Last Name F E R R E L L First Name M A R K Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 2 7 7	7 1 9 9	6 1 7 7		9 5 6 5 3
Last Name F I E L D E R First Name M A R K Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 5 7 7	7 0 9 9	4 5 7 7		9 4 2 5 3
Last Name F I E L D S - J A C O B First Name W E N D Y Position A D M I N I S T R A T I V E A Name of Affiliated Organization	9 4 6 2 2	7 1 7 9	1 5 1 3 9		1 1 6 9 4 0
Last Name F I J A L K O W S K I First Name H E N R Y Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 3 5 2	7 1 5 9	1 1 3 8 8		1 0 0 8 9 9
Totals	418446	32326	55940		506712

ORGANIZATION NAME: International Union - UAW
 ENDING DATE OF PERIOD COVERED: 12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position (Enter employee's job title.)					
(C) Name of Affiliated Organization (if applicable)					
Last Name: FINLEY First Name: SABRINA Position: GENERAL A - MAIN Name of Affiliated Organization:	19908	0	0		19908
Last Name: FISCHER First Name: LYDIA Position: RESERACH SPECIAL Name of Affiliated Organization:	110961	7146	4040		122147
Last Name: FISHER First Name: JERRY Position: SERVICING REP Name of Affiliated Organization:	88953	7119	12861		108943
Last Name: FISHER First Name: SUSAN Position: INT'L OFFICER'S Name of Affiliated Organization:	52022	0	0		52022
Last Name: FLEMING First Name: TED Position: SERVICING REP Name of Affiliated Organization:	82277	7179	3984		93440
Totals	354131	2444	20885		396460

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name F L O R E N C E First Name S A M M I E Position T R A I N I N G R E P Name of Affiliated Organization	8 9 2 1 6	7 3 0 1	4 7 9 3		1 0 1 3 1 0
Last Name F L O R E S First Name M I C H A E L Position R E T I R E E R E P Name of Affiliated Organization	8 2 5 0 2	7 1 1 9	1 8 1 4 4		1 0 7 7 6 5
Last Name F L O R E Z First Name R U D Y Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 6 5 2	7 0 7 9	1 7 9 1 0		1 0 7 6 4 1
Last Name F L O W E R S First Name N O N A J E Position S T E N O G R A P H E R Name of Affiliated Organization	1 5 2 8 2	0	0		1 5 2 8 2
Last Name F L O Y D First Name E R V E N A Position B O O K K E E P E R C Name of Affiliated Organization	4 6 1 1 7	0	0		4 6 1 1 7
Totals	315769	21499	40847		378115

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name F L O Y D First Name K E N N E T H Position T R A I N I N G R E P Name of Affiliated Organization	8 2 3 5 2	7 1 9 9	5 1 6 2		9 4 7 1 3
Last Name F L O Y D First Name S A L L Y Position C L E R K T Y P I S T Name of Affiliated Organization	4 4 0 1 6	0	0		4 4 0 1 6
Last Name F L O Y D First Name W I L L I A M Position A U D I T O R Name of Affiliated Organization	8 2 5 7 7	7 0 9 9	2 3 7 0 1		1 1 3 3 7 7
Last Name F L U K E First Name L A R R Y Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 2 7 7	7 1 7 9	1 6 5 8 8		1 0 6 0 4 4
Last Name F L Y N N First Name P H Y L L I S Position C L E R K T Y P I S T Name of Affiliated Organization	4 5 5 7 1	0	0		4 5 5 7 1
Totals	336793	21477	45451		403721

ORGANIZATION NAME:	International Union - UAW
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FILE NUMBER: 000-149

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: F O L E Y First Name: T I M O T H Y Position: A D M I N I S T R A T I V E A Name of Affiliated Organization:	8 9 7 7 0	3 6 9 0	6 0 6 7		9 9 5 2 7
Last Name: F C O T E - W A L K E R First Name: L A V E R N E Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 7 7 2 8	0	1 6 4 2		4 9 3 7 0
Last Name: F O R D First Name: F L O Y D Position: T R A I N I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	9 7 5 4		9 9 2 1 0
Last Name: F O R D - W A T S O N First Name: K A T H A R I Position: B O O K K E E P E R B I Name of Affiliated Organization:	4 5 5 6 3	0	0		4 5 5 6 3
Last Name: F O R R E S T First Name: J E F F R E Y Position: S E C U R I T Y Name of Affiliated Organization:	6 1 8 8 4	2 9 9 8	1 3 1 2		6 6 1 9 4
Totals	327222	13867	18775		359864

ORGANIZATION NAME	International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name F O R T E First Name A N T H O N Y Position C I T I Z E N S H I P R E P Name of Affiliated Organization	8 2 2 7 7	7 1 7 9	1 1 8 9 3		1 0 1 3 4 9
Last Name F O S T E R First Name L A W R E N C Position S E R V I C I N G R E P Name of Affiliated Organization	8 1 2 7 5	7 1 0 4	1 8 6 5 1		1 0 7 0 3 0
Last Name F O S T E R First Name R O G E R Position G E N E R A L A - M A I N Name of Affiliated Organization	4 6 5 2 0	0	1 4 3		4 6 6 6 3
Last Name F O W L E R First Name C H R I S T I Position S E C R E T A R Y I (M A J Name of Affiliated Organization	4 4 8 3 9	0	3 0 7		4 5 1 4 6
Last Name F O W L E R First Name J A M E S Position S E C U R I T Y Name of Affiliated Organization	6 1 8 8 4	2 9 9 8	1 3 1 2		6 6 1 9 4
Totals	316795	17281	32306		366382

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: F O X First Name: D E N I S E Position: A D M I N I S T R A T I V E S Name of Affiliated Organization:	4 6 3 2 8	0	0		4 6 3 2 8
Last Name: F O Y First Name: E D W A R D Position: A S S I S T A N T - R E G I Name of Affiliated Organization:	9 2 3 4 9	7 1 1 9	1 5 7 6 8		1 1 5 2 3 6
Last Name: F R A S E R First Name: J E A N N E Position: I N T ' L O F F I C E R ' S Name of Affiliated Organization:	4 7 7 7 0	0	0		4 7 7 7 0
Last Name: F R A S U R E First Name: E A R L Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	4 1 6 2		9 3 6 1 8
Last Name: F R A Z E R First Name: E L D O N Position: A S S I S T A N T - M A J O Name of Affiliated Organization:	9 0 0 0 7	6 7 7 1	4 6 2 2		1 0 1 4 0 0
Totals	358731	21069	24552		404352

ORGANIZATION NAME:	International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name F R E E M A N First Name B I L L Y Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 3 5 2	7 1 3 9	5 4 2 8		9 4 9 1 9
Last Name F R E E M A N First Name M A R Y Position A U D I T O R Name of Affiliated Organization	8 2 0 0 9	7 1 7 9	1 0 4 9 7		9 9 6 8 5
Last Name F R Y E First Name T H O M A S Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 5 7 7	7 1 3 9	5 9 9 5		9 5 7 1 1
Last Name F U N K E First Name M I C H A E L Position P U B L I C R E L A T I O N S Name of Affiliated Organization	9 0 7 7 4	7 3 2 1	2 6 7 5		1 0 0 7 7 0
Last Name G A F A First Name J O S E P H Position C O O R D I N A T O R Name of Affiliated Organization	8 6 4 9 7	7 1 3 9	5 9 5 4		9 9 5 9 0
Totals	424209	35917	30549		490675

ORGANIZATION NAME:	International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: GALINDEZ First Name: MARIA Position: BOARD SECRETARY Name of Affiliated Organization:	4 7 1 5 5	0	1 3 4 4		4 8 4 9 9
Last Name: GALLO First Name: MARIA Position: BOARD SECRETARY Name of Affiliated Organization:	4 6 4 8 2	0	0		4 6 4 8 2
Last Name: GARCIA First Name: MICHAEL Position: SERVICING REP Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	7 3 7 8		9 6 8 8 9
Last Name: GARCIA - MCDONEDWARD First Name: Position: SYSTEMS ANALYST Name of Affiliated Organization:	8 2 5 0 2	7 1 1 9	3 9 5 6		9 3 5 7 7
Last Name: GARDNER First Name: VENUS Position: KEYPUNCH OPERATOR Name of Affiliated Organization:	2 0 0 0 5	0	0		2 0 0 0 5
Totals	278496	14278	12678		305452

ORGANIZATION NAME:	International Union - UAW
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FILE NUMBER: 0 0 0 - 1 4 9

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name G A R D N E R First Name V I C T O R I Position S T E N O G R A P H E R Name of Affiliated Organization	4 4 1 0 0	0	0		4 4 1 0 0
Last Name G A R M O N First Name F L O R R I N Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 2 7 7	7 1 4 5	5 5 2 9		9 4 9 5 1
Last Name G A R N E R First Name P H Y L L I S Position C L E R K T Y P I S T Name of Affiliated Organization	4 1 3 9 4	0	0		4 1 3 9 4
Last Name G A R V I N First Name R E G I N A Position B O O K K E E P E R B I Name of Affiliated Organization	4 4 5 9 6	0	0		4 4 5 9 6
Last Name G A R V I N First Name R O B E R T Position A S S I S T A N T - M A J O R Name of Affiliated Organization	5 3 7 9 1	8 4 7	3 9 2		5 5 0 3 0
Totals	266158	7992	5921		280071

ORGANIZATION NAME	International Union - UAW
ENDING DATE OF PERIOD COVERED:	12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: G A V E T T I First Name: A L B E R T Position: S E R V I C I N G R E P Name of Affiliated Organization:	5 9 3 9 3	5 3 4 4	5 4 8 0		7 0 2 1 7
Last Name: G A Y N E Y First Name: C H A R L E S Position: D E P A R T M E N T H E A D Name of Affiliated Organization:	1 0 1 4 1 1	7 1 5 9	6 5 0 4		1 1 5 0 7 4
Last Name: G E E First Name: Y I N G Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	1 0 3 0 2		9 9 8 6 8
Last Name: G E I G E R First Name: M I C H A E L Position: S E R V I C I N G R E P Name of Affiliated Organization:	2 8 9 8 2	2 5 4 1	1 2 4 8		3 2 7 7 1
Last Name: G E I S First Name: C Y N T H I A Position: B O O K K E E P E R B I Name of Affiliated Organization:	4 6 0 3 4	0	1 0 0		4 6 1 3 4
Totals	318247	22183	23634		364064

ORGANIZATION NAME:	International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name G E I S First Name S T A N L E Y Position A D M I N I S T R A T I V E A Name of Affiliated Organization	9 4 9 2 2	7 0 9 9	6 1 0 0		1 0 8 1 2 1
Last Name G E N T I L E First Name F A Y Position S E C R E T A R Y I (M A J Name of Affiliated Organization	4 6 1 0 9	0	8 6		4 6 1 9 5
Last Name G E R A S I M O V I C H First Name J O S E P H Position S T O C K R O O M C L E R K Name of Affiliated Organization	4 6 8 4 4	0	0		4 6 8 4 4
Last Name G E R O M I N First Name K I M B E R L Position R E S E R A C H S P E C I A L Name of Affiliated Organization	8 2 2 7 7	5 7 3 4	2 6 3 3		9 0 6 4 4
Last Name G I B S O N First Name C L A U D E T Position I N T ' L O F F I C E R ' S Name of Affiliated Organization	5 2 3 0 8	0	1 2 2 3		5 3 5 3 1
Totals	322460	12833	10042		345335

ORGANIZATION NAME	International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: G I B S C N First Name: R A Y M O N D Position: T R A I N I N G R E P Name of Affiliated Organization:	2 6 4 8 0	6 9 6	6 2 4		2 7 8 0 0
Last Name: G I L L I A M First Name: P H I L L I P Position: A T T O R N E Y Name of Affiliated Organization:	9 5 3 0 2	7 1 9 9	1 9 6 0 1		1 2 2 1 0 2
Last Name: G I N G E R I C H First Name: D A N I E L Position: T R A I N I N G R E P Name of Affiliated Organization:	8 2 3 5 2	6 4 3 7	5 8 4 7		9 4 6 3 6
Last Name: G L E N N First Name: D E C O R I S Position: A S S I S T A N T D E P A R T Name of Affiliated Organization:	8 6 4 9 7	7 1 7 9	1 3 6 5 4		1 0 7 3 3 0
Last Name: G O D D A R D First Name: S U S A N Position: S E R V I C I N G R E P Name of Affiliated Organization:	6 7 9 8 8	5 8 8 5	4 5 6 7		7 8 4 4 0
Totals	358619	27396	44293		430308

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: G O D F R E Y First Name: G E R A R D Position: M I S C 1 Name of Affiliated Organization:	1 6 8 3 0	0	0		1 6 8 3 0
Last Name: G O D F R E Y First Name: T H E R E S A Position: C L E R K T Y P I S T Name of Affiliated Organization:	4 2 7 0 1	0	5 9 6 6		4 8 6 6 7
Last Name: G O D L E Y First Name: C Y N T H I A Position: G E N E R A L A - M A I N Name of Affiliated Organization:	1 0 6 1 3	0	0		1 0 6 1 3
Last Name: G O L D B E T T E R First Name: C O R A Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 2 5 9	7 3 0 2		9 6 8 8 8
Last Name: G O M E Z First Name: R O D O L F O Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	1 3 7 1 8		1 0 3 2 8 4
Totals	234998	14298	26986		276282

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: G O N T K O First Name: L A R R Y Position: T R A I N I N G R E P Name of Affiliated Organization:	3 0 8 4 6	2 4 0 0	3 0 2 9		3 6 2 7 5
Last Name: G O N Z A L E Z First Name: D O N N A Position: T E C H A I D I Name of Affiliated Organization:	4 6 3 2 0	0	0		4 6 3 2 0
Last Name: G O N Z A L E Z First Name: H E N R Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	5 5 4 0 7	2 3 6 0	4 4 9 0		6 2 2 5 7
Last Name: G O O D I N First Name: H O W A R D Position: G E N E R A L A - M A I N Name of Affiliated Organization:	4 5 7 0 9	0	1 8 6		4 5 8 9 5
Last Name: G O R M L E Y First Name: P A T R I C K Position: G E N E R A L A - M A I N Name of Affiliated Organization:	4 8 0 3 0	0	0		4 8 0 3 0
Totals	226312	4760	7705		238777

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name G C U L D I N G First Name S U S A N Position A D M I N I S T R A T I V E A Name of Affiliated Organization	9 0 4 6 0	7 1 1 9	3 3 0 7		1 0 0 8 8 6
Last Name G R A C E Y First Name M I C H A E L Position D E P A R T M E N T H E A D Name of Affiliated Organization	9 3 3 7 0	7 1 3 9	7 8 7 1		1 0 8 3 8 0
Last Name G R A F First Name D E N N I S Position A C T U A R Y Name of Affiliated Organization	9 8 8 3 2	7 1 3 9	6 2 4 4		1 1 2 2 1 5
Last Name G R A N D E R S O N First Name B A R B A R A Position T E C H A I D I Name of Affiliated Organization	4 4 7 2 2	0	8 3		4 4 8 0 5
Last Name G R A Y First Name D O L O R E S Position L E G A L S E C R E T A R Y Name of Affiliated Organization	4 6 8 5 6	0	0		4 6 8 5 6
Totals	374240	21397	17505		413142

ORGANIZATION NAME: **International Union - UAW**
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: G R A Y First Name: J E R R Y Position: E D U C A T I O N R E P Name of Affiliated Organization:	8 2 2 0 2	7 1 9 9	1 2 7 8 4		1 0 2 1 8 5
Last Name: G R A Y E R First Name: E V E L Y N Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 8 0 8 2	0	1 5 2 3		4 9 6 0 5
Last Name: G R E E N First Name: A N G E L A Position: I N T E R N Name of Affiliated Organization:	2 2 3 7 5	0	9 1 0		2 3 2 8 5
Last Name: G R E E N First Name: M O S E S Position: T R A I N I N G R E P Name of Affiliated Organization:	8 2 5 0 2	7 1 1 9	1 0 2 3 1		9 9 8 5 2
Last Name: G R E E N First Name: T I L M A N Position: O R G A N I Z E R Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	3 6 6 9		9 3 2 3 5
Totals	317588	21457	29117		368162

ORGANIZATION NAME	International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position (Enter employee's job title.)					
(C) Name of Affiliated Organization (if applicable)					
Last Name GREEN First Name YESMAYN Position STENOGRAPHER Name of Affiliated Organization	4 7 8 9 9	0	0		4 7 8 9 9
Last Name GREENE First Name VICKI Position STENOGRAPHER Name of Affiliated Organization	4 5 8 9 4	0	0		4 5 8 9 4
Last Name GREENFIELD First Name RICHARD Position SERVICING REP Name of Affiliated Organization	8 2 2 7 7	7 1 7 9	6 1 7 6		9 5 6 3 2
Last Name GREENHILL First Name THORNTON Position CIVIL RIGHTS REP Name of Affiliated Organization	8 2 4 2 7	7 1 3 9	6 2 1 9		9 5 7 8 5
Last Name GREENLEY First Name DARWIN Position COORDINATOR Name of Affiliated Organization	8 6 4 2 2	7 1 5 9	5 3 6 8		9 8 9 4 9
Totals	344919	21477	17763		384159

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: G R E E R First Name: D A R R Y L Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 5 5 8 3	4 2 7 5	8 0 8 5		9 7 9 4 3
Last Name: G R E G O R Y First Name: D A V I D Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 2 9	7 1 7 9	5 6 7 9		9 5 0 8 7
Last Name: G R E G W A Y First Name: L O R I Position: C L E R K T Y P I S T Name of Affiliated Organization:	4 0 6 5 9	0	0		4 0 6 5 9
Last Name: G R I F F I N First Name: C H A R L E N Position: B O O K K E E P E R A Name of Affiliated Organization:	4 8 7 7 4	0	0		4 8 7 7 4
Last Name: G R I F F I N First Name: J A M E S Position: R E T I R E E R E P Name of Affiliated Organization:	1 1 8 5 2 5	7 3 2 1	4 0 6 0 2		1 6 6 4 4 8
Totals	375770	18775	54366		448911

ORGANIZATION NAME: International Union - UAW
 ENDING DATE OF PERIOD COVERED: 12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position (Enter employee's job title.)					
(C) Name of Affiliated Organization (if applicable)					
Last Name: G R I F F I N First Name: R O G E R Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 2 1 9	1 9 3 2 7		1 0 8 8 2 3
Last Name: G R I M E S First Name: J O H N Position: O R G A N I Z E R Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	4 2 9 5		9 3 8 6 1
Last Name: G R I M E S First Name: M I C H A E L Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 5 6 3 0	7 1 3 9	8 4 3 1		1 0 1 2 0 0
Last Name: G R O S S First Name: C H A R L I E Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	7 2 6 9		9 6 7 2 5
Last Name: G R O S S First Name: F R A N K Position: T R A I N I N G R E P Name of Affiliated Organization:	8 2 7 2 7	7 0 5 9	5 6 9 2		9 5 4 7 8
Totals	415338	35735	45014		496087

ORGANIZATION NAME: **International Union - UAW**
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: G U I N A N First Name: J O H N Position: A D M I N I S T R A T I V E A Name of Affiliated Organization:	9 4 7 7 2	7 1 5 9	1 8 8 7 1		1 2 0 8 0 2
Last Name: G U L L I O N First Name: G E R A L D I Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 5 0 5 9	0	0		4 5 0 5 9
Last Name: G U S T A F S O N First Name: H E L E N D Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 6 4 7 2	0	0		4 6 4 7 2
Last Name: H A A S First Name: S T E V E N Position: A C T U A R Y Name of Affiliated Organization:	1 0 0 1 5 7	6 7 6 6	6 0 4 8		1 1 2 9 7 1
Last Name: H A A S I S First Name: M A R K Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	2 0 2 7 5		1 0 9 7 8 6
Totals	368812	21084	45194		435090

ORGANIZATION NAME: International Union - UAW
ENDING DATE OF PERIOD COVERED: 12/31/00

SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position (Enter employee's job title.)					
(C) Name of Affiliated Organization (if applicable)					
Last Name: H A G E R M A N First Name: G E R A L D Position: A U D I T O R Name of Affiliated Organization:	8 5 6 1 7	7 1 1 9	1 3 2 3 9		1 0 5 9 7 5
Last Name: H A K E M A N First Name: C I N D Y Position: S E C R E T A R Y I I (M I Name of Affiliated Organization:	4 6 0 5 2	0	0		4 6 0 5 2
Last Name: H A L K I E W I C Z First Name: J O S E P H I Position: A D M I N I S T R A T I V E S Name of Affiliated Organization:	4 5 7 6 2	0	0		4 5 7 6 2
Last Name: H A L L First Name: M A R G A R E Position: M A C H I N E O P E R A T O R Name of Affiliated Organization:	4 4 8 0 7	0	0		4 4 8 0 7
Last Name: H A L L First Name: M I C H A E L Position: S E R V I C I N G R E P Name of Affiliated Organization:	5 4 8 4 1	4 9 2 0	5 8 7 9		6 5 6 4 0
Totals	277079	12039	19118		308236

ORGANIZATION NAME **International Union - UAW**
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: H A L L First Name: M I L D R E D Position: S E C R E T A R Y I (M A J Name of Affiliated Organization:	4 5 3 3 4	0	0		4 5 3 3 4
Last Name: H A L L First Name: R I C H A R D Position: T R A I N I N G R E P Name of Affiliated Organization:	6 3 5 0 4	3 0 8 5	5 2 6 5		7 1 8 5 4
Last Name: H A L L First Name: Y V O N N E Position: L E G A L S E C R E T A R Y Name of Affiliated Organization:	4 5 8 8 3	0	0		4 5 8 8 3
Last Name: H A L L - C O U N T S First Name: J O Y C E Position: T R A I N I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	2 4 0 5		9 1 9 1 6
Last Name: H A L L I B U R T O N First Name: L E S L I E Position: T R A I N I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	8 2 0 3		9 7 6 5 9
Totals	319350	17423	15873		352646

ORGANIZATION NAME:	International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: H A M B L I N First Name: R I C H A R D Position: I N T E R N Name of Affiliated Organization:	1 3 3 2 7	0	0		1 3 3 2 7
Last Name: H A M I L T O N First Name: C H R I S T O Position: T R A I N I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 0 6 8	3 3 4 1		9 2 8 3 6
Last Name: H A M I L T O N First Name: D O R A Position: A U D I T O R Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	2 0 7 7 7		1 1 0 2 3 3
Last Name: H A M M E R First Name: F R A N K Position: S E R V I C I N G R E P Name of Affiliated Organization:	3 5 0 6 9	3 1 0 5	2 7 2 7		4 0 9 0 1
Last Name: H A M M O N D First Name: J O H N Position: P U B L I C R E L A T I O N S Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	7 7 9 6		9 7 3 0 7
Totals	295452	24511	34641		354604

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>		Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>	(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name H A M M O N D S	First Name W I L L I A M	2 4 3 0 0	1 2 3 6	1 5 7 1		2 7 1 0 7
Position T R A I N I N G	REP					
Name of Affiliated Organization						
Last Name H A M M O N S	First Name R O B E R T	5 9 3 7 8	2 4 4 0	2 6 5 1		6 4 4 6 9
Position S E R V I C I N G	REP					
Name of Affiliated Organization						
Last Name H A M P T O N	First Name C L A R A	4 4 0 9 0	0	0		4 4 0 9 0
Position S T E N O G R A P H E R						
Name of Affiliated Organization						
Last Name H A N D	First Name M I C H A E L	1 3 7 6 6	0	0		1 3 7 6 6
Position I N T E R N						
Name of Affiliated Organization						
Last Name H A R D E N	First Name J U D Y	8 4 7 1 5	7 1 7 9	9 8 4 1		1 0 1 7 3 5
Position A S S I S T A N T	M I N O R					
Name of Affiliated Organization						
Totals		226249	10855	14063		251167

ORGANIZATION NAME:	International Union - UAW
ENDING DATE OF PERIOD COVERED:	12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary <small>(before taxes and other deductions)</small>	Allowances <small>(E)</small>	Disbursements for Official Business <small>(F)</small>	Other Disbursements <small>(G)</small>	Total <small>(H)</small>
(B) Position <small>(Enter employee's job title.)</small>	(D)	(E)	(F)	(G)	(H)
(C) Name of Affiliated Organization <small>(if applicable)</small>	(D)	(E)	(F)	(G)	(H)
Last Name: H A R K I N S First Name: T I N A Position: C L E R K T Y P I S T Name of Affiliated Organization:	2 5 9 2 9	0	0		2 5 9 2 9
Last Name: H A R M O N First Name: J O A N Position: S E C R E T A R Y I I (M I Name of Affiliated Organization:	4 8 0 8 1	0	7 1 2		4 8 7 9 3
Last Name: H A R P E R First Name: C O N N Y E Position: A T T O R N E Y Name of Affiliated Organization:	1 0 1 4 9 2	7 1 7 9	4 0 0 7		1 1 2 6 7 8
Last Name: H A R R E L L First Name: S Y N N O M O Position: B E N E F I T R E P Name of Affiliated Organization:	6 3 8 7 8	7 1 7 9	3 6 5 7		7 4 7 1 4
Last Name: H A R R I N G T O N First Name: M I C H A E L Position: M I S C 1 Name of Affiliated Organization:	6 1 5 4 1	0	7 2 6 1		6 8 8 0 2
Totals	300921	14358	15637		330916

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: H A R R I S First Name: D E N I S E Position: B O O K K E E P E R Name of Affiliated Organization: B I	4 7 0 9 4	0	0		4 7 0 9 4
Last Name: H A R R I S First Name: D O N A L D Position: A S S I S T A N T Name of Affiliated Organization: M I N O R	8 4 5 6 3	7 1 5 9	7 0 7 2		9 8 7 9 4
Last Name: H A R R I S First Name: J A M E S Position: A S S I S T A N T Name of Affiliated Organization: M I N O R	8 6 5 7 2	7 1 5 9	6 5 5 4		1 0 0 2 8 5
Last Name: H A R R I S O N First Name: B E T T Y Position: O R G A N I Z E R Name of Affiliated Organization:	4 6 5 2 6	- 9 6 9	0		4 5 5 5 7
Last Name: H A R R I S O N First Name: L Y N N E T T Position: C L E R K Name of Affiliated Organization: T Y P I S T	3 3 2 6 0	0	0		3 3 2 6 0
Totals	298015	13349	13626		324990

ORGANIZATION NAME: **International Union - UAW**

ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name H A R T M A N First Name E L M E R Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 3 5 2	7 1 5 9	4 1 1 9		9 3 6 3 0
Last Name H A R V E L L First Name G A R Y Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 2 7 7	7 1 7 9	6 4 5 8		9 5 9 1 4
Last Name H A S E N J A G E R First Name J O S E P H Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 2 7 7	7 1 7 9	4 2 7 0		9 3 7 2 6
Last Name H A S E R First Name D E B O R A H Position A U D I T O R Name of Affiliated Organization	8 2 5 7 7	7 0 5 9	1 4 3 2 6		1 0 3 9 6 2
Last Name H A W K I N S First Name R U B Y Position T R A I N I N G R E P Name of Affiliated Organization	8 2 4 2 7	6 2 5 9	4 8 1 8		9 3 5 0 4
Totals	411910	34835	33991		480736

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: H A W O R T H First Name: R O D E R I C Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	9 0 7 8		9 8 5 8 9
Last Name: H A Y E S First Name: W I L L I A M Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	9 7 2 2		9 9 2 3 3
Last Name: H E A D First Name: N A T H A N I Position: C I V I L R I G H T S R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 1 9	3 0 2 1 5		1 1 9 7 6 1
Last Name: H E A T H First Name: S T E L L A Position: K E Y P U N C H C O O R D I N Name of Affiliated Organization:	4 5 9 5 8	0	0		4 5 9 5 8
Last Name: H E C K E R First Name: J A M E S Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 6 5 7 2	7 1 1 9	1 5 1 5 7		1 0 8 8 4 8
Totals	379661	28556	64172		472389

ORGANIZATION NAME: International Union - UAW
 ENDING DATE OF PERIOD COVERED: 12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position (Enter employee's job title.)					
(C) Name of Affiliated Organization (if applicable)					
Last Name: H E I D E L B E R G E R First Name: J U D Y Position: B O A R D S E C R E T A R Y Name of Affiliated Organization:	4 6 7 4 5	0	0		4 6 7 4 5
Last Name: H E L M S First Name: W E N D E L L Position: S E R V I C I N G R E P Name of Affiliated Organization:	6 9 4 6 1	6 0 2 1	1 5 7 3 0		9 1 2 1 2
Last Name: H E N D R I X First Name: R O N A L D Position: O R G A N I Z E R Name of Affiliated Organization:	6 9 4 6 1	6 0 2 1	1 3 0 7 7		8 8 5 5 9
Last Name: H E N N I N G E R First Name: C H R I S T I Position: C L E R K T Y P I S T Name of Affiliated Organization:	3 5 5 4 1	0	0		3 5 5 4 1
Last Name: H E R N A N D E Z First Name: J O E Position: O R G A N I Z E R Name of Affiliated Organization:	1 8 3 0 4	1 5 5 3	6 9 8		2 0 5 5 5
Totals	239512	13595	29505		282612

ORGANIZATION NAME:	International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: H E R N A N D E Z First Name: J O E Position: D E P A R T M E N T H E A D Name of Affiliated Organization:	6 1 1 5 6	1 8 5 6	7 9 0 3		7 0 9 1 5
Last Name: H E R N A N D E Z First Name: R Y A N Position: O U T S I D E S E C U R I T Y Name of Affiliated Organization:	3 1 5 5 6	0	0		3 1 5 5 6
Last Name: H E S S First Name: C H A R L E S Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	6 5 6 1	9 1 5 3		9 7 9 9 1
Last Name: H E S S First Name: L A U R A Position: A C T U A R Y Name of Affiliated Organization:	9 2 1 9 9	7 1 4 2	1 2 7 4 7		1 1 2 0 8 8
Last Name: H I L L First Name: C H A R L I E Position: A S S I S T A N T - M A J O R Name of Affiliated Organization:	8 5 3 6 4	4 2 5 5	7 1 1 8		9 6 7 3 7
Totals	352552	19814	36921		409287

ORGANIZATION NAME:	International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary <small>(before taxes and other deductions)</small>	Allowances <small>(E)</small>	Disbursements for Official Business <small>(F)</small>	Other Disbursements <small>(G)</small>	Total <small>(H)</small>								
(B) Position <small>(Enter employee's job title.)</small>	(D)	(E)	(F)	(G)	(H)								
(C) Name of Affiliated Organization <small>(if applicable)</small>	(D)	(E)	(F)	(G)	(H)								
<table border="0"> <tr> <td>Last Name</td> <td>First Name</td> </tr> <tr> <td>H I L L</td> <td>K E N N E T H</td> </tr> <tr> <td>Position</td> <td>S E R V I C I N G R E P</td> </tr> <tr> <td>Name of Affiliated Organization</td> <td></td> </tr> </table>	Last Name	First Name	H I L L	K E N N E T H	Position	S E R V I C I N G R E P	Name of Affiliated Organization		8 2 4 2 7	7 1 3 9	4 7 5 2		9 4 3 1 8
Last Name	First Name												
H I L L	K E N N E T H												
Position	S E R V I C I N G R E P												
Name of Affiliated Organization													
<table border="0"> <tr> <td>Last Name</td> <td>First Name</td> </tr> <tr> <td>H I L L</td> <td>L A D O N</td> </tr> <tr> <td>Position</td> <td>I N T ' L O F F I C E R ' S</td> </tr> <tr> <td>Name of Affiliated Organization</td> <td></td> </tr> </table>	Last Name	First Name	H I L L	L A D O N	Position	I N T ' L O F F I C E R ' S	Name of Affiliated Organization		5 1 3 9 7	0	0		5 1 3 9 7
Last Name	First Name												
H I L L	L A D O N												
Position	I N T ' L O F F I C E R ' S												
Name of Affiliated Organization													
<table border="0"> <tr> <td>Last Name</td> <td>First Name</td> </tr> <tr> <td>H I L L</td> <td>T H O M A S</td> </tr> <tr> <td>Position</td> <td>S E R V I C I N G R E P</td> </tr> <tr> <td>Name of Affiliated Organization</td> <td></td> </tr> </table>	Last Name	First Name	H I L L	T H O M A S	Position	S E R V I C I N G R E P	Name of Affiliated Organization		8 2 1 2 4	7 1 7 9	1 3 3 7 8		1 0 2 6 8 1
Last Name	First Name												
H I L L	T H O M A S												
Position	S E R V I C I N G R E P												
Name of Affiliated Organization													
<table border="0"> <tr> <td>Last Name</td> <td>First Name</td> </tr> <tr> <td>H I R S C H L A N D</td> <td>D A V I D</td> </tr> <tr> <td>Position</td> <td>A C T U A R Y</td> </tr> <tr> <td>Name of Affiliated Organization</td> <td></td> </tr> </table>	Last Name	First Name	H I R S C H L A N D	D A V I D	Position	A C T U A R Y	Name of Affiliated Organization		9 9 5 2 0	7 1 1 9	7 7 4 6		1 1 4 3 8 5
Last Name	First Name												
H I R S C H L A N D	D A V I D												
Position	A C T U A R Y												
Name of Affiliated Organization													
<table border="0"> <tr> <td>Last Name</td> <td>First Name</td> </tr> <tr> <td>H I R S C H L A N D</td> <td>M E R Y L</td> </tr> <tr> <td>Position</td> <td>A D M I N S T R A T I V E A C</td> </tr> <tr> <td>Name of Affiliated Organization</td> <td></td> </tr> </table>	Last Name	First Name	H I R S C H L A N D	M E R Y L	Position	A D M I N S T R A T I V E A C	Name of Affiliated Organization		8 6 4 2 2	7 8 3 2	3 1 9 4		9 7 4 4 8
Last Name	First Name												
H I R S C H L A N D	M E R Y L												
Position	A D M I N S T R A T I V E A C												
Name of Affiliated Organization													
Totals	401890	29269	29070		460229								

ORGANIZATION NAME	International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name H O F F M A N First Name R I C H A R D Position M I S C 1 Name of Affiliated Organization	6 4 3 2 6	0	1 7 5 7		6 6 0 8 3
Last Name H O L I E F I E L D First Name G E N E R A L Position A S S I S T A N T - M A J O Name of Affiliated Organization	8 9 7 8 2	7 1 7 9	1 3 6 9 3		1 1 0 6 5 4
Last Name H O L L A N D First Name K E N N E T H Position O R G A N I Z E R Name of Affiliated Organization	8 2 2 7 7	7 1 7 9	1 3 7 2 0		1 0 3 1 7 6
Last Name H O N E Y C U T T First Name L Y N N E Position A D M I N I S T R A T I V E S Name of Affiliated Organization	4 8 4 1 3	0	0		4 8 4 1 3
Last Name H O N I G M A N N First Name L I N D A Position S T E N O G R A P H E R Name of Affiliated Organization	4 3 9 9 0	0	0		4 3 9 9 0
Totals	328788	14358	29170		372316

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position (Enter employee's job title.)					
(C) Name of Affiliated Organization (if applicable)					
Last Name: H O R N First Name: R O N A L D Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 5 0 2	7 1 3 9	7 4 7 8		9 7 1 1 9
Last Name: F O R N E First Name: J O H N Position: D E P A R T M E N T H E A D Name of Affiliated Organization:	9 0 0 0 7	7 1 1 9	7 4 6 3		1 0 4 5 8 9
Last Name: H O S K I N S First Name: C H A R L E S Position: A D M I N I S T R A T I V E A Name of Affiliated Organization:	9 8 3 9 1	7 1 5 9	6 4 1 9		1 1 1 9 6 9
Last Name: H O T T M A N N First Name: R I C H A R D Position: A S S I S T A N T M I N O R Name of Affiliated Organization:	1 1 4 1 8 2	7 1 1 9	2 0 9 3		1 2 3 3 9 4
Last Name: H O U S E R First Name: D E B R A Position: I N T ' L O F F I C E R ' S Name of Affiliated Organization:	4 7 8 4 3	0	4 1 8		4 8 2 6 1
Totals	432925	28536	23871		485332

ORGANIZATION NAME: **International Union - UAW**
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: H O W A R D First Name: B R E N D A Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 3 9	8 9 6 7		9 8 4 5 8
Last Name: H O W E First Name: F R A N C I S Position: D E P A R T M E N T H E A D Name of Affiliated Organization:	6 7 5 4 0	3 0 4 5	2 7 9 7		7 3 3 8 2
Last Name: H O W E First Name: J A M E S Position: D E P A R T M E N T H E A D Name of Affiliated Organization:	9 0 0 0 7	7 1 1 9	1 4 0 3 9		1 1 1 1 6 5
Last Name: H O W E L L First Name: K E L L I Position: C L E R K T Y P I S T Name of Affiliated Organization:	4 3 8 4 1	0	0		4 3 8 4 1
Last Name: H O W E L L First Name: M A R T I N Position: A U D I T O R Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	6 4 5 0		9 5 9 0 6
Totals	366017	24482	32253		422752

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position (Enter employee's job title.)					
(C) Name of Affiliated Organization (if applicable)					
Last Name: H R O V A T I N First Name: D I A N A Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	1 0 1 5 3		9 9 7 1 9
Last Name: H U G First Name: F R E D Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 5 0 2	7 1 1 9	5 8 0 7		9 5 4 2 8
Last Name: H U G H E S First Name: R O N A L D Position: A S S I S T A N T - M A J O Name of Affiliated Organization:	8 9 7 8 2	7 1 7 9	5 4 9 5		1 0 2 4 5 6
Last Name: H U N G E R F O R D First Name: W A Y N E Position: S E R V I C I N G R E P Name of Affiliated Organization:	5 6 0 9 1	4 9 2 0	6 0 9 4		6 7 1 0 5
Last Name: H U N T E R First Name: D O N A L D Position: A S S I S T A N T M I N O R Name of Affiliated Organization:	8 3 5 7 2	7 1 7 9	4 9 1 6		9 5 6 6 7
Totals	394374	33536	32465		460375

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name H U N T E R First Name J O H N Position S E R V I C I N G R E P Name of Affiliated Organization	4 7 6 4 8	1 8 5 6	8 2 2 7		5 7 7 3 1
Last Name H Y A T T First Name N O R M A Position S T E N O G R A P H E R Name of Affiliated Organization	4 6 6 4 7	0	9 9 6		4 7 6 4 3
Last Name H Y D E First Name D I A N E Position T R A I N I N G R E P Name of Affiliated Organization	8 2 3 5 2	7 1 1 9	2 5 6 4		9 2 0 3 5
Last Name I D E First Name L I N D A Position C L E R K T Y P I S T Name of Affiliated Organization	3 9 3 9 3	0	0		3 9 3 9 3
Last Name I N N E S First Name S U S A N Position G E N E R A L A - M A I N Name of Affiliated Organization	2 9 2 9 8	0	0		2 9 2 9 8
Totals	245338	8975	11787		266100

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name I S A First Name M O H A M M E Position T R A I N I N G R E P Name of Affiliated Organization	8 2 5 0 2	7 1 1 9	7 7 0 9		9 7 3 3 0
Last Name I S A A C First Name S A M U E L Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 3 5 2	7 0 5 9	4 9 7 5		9 4 3 8 6
Last Name I S A A C S O N First Name R I C H A R D Position A S S I S T A N T - M A J O Name of Affiliated Organization	8 9 8 7 1	7 1 5 9	1 0 5 2 8		1 0 7 5 5 8
Last Name J A C K S O N First Name D O N Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 4 2 7	7 1 7 9	9 1 5 5		9 8 7 6 1
Last Name J A C K S O N First Name M A T H E W Position S E R V I C I N G R E P Name of Affiliated Organization	3 2 0 2 6	2 8 2 3	1 6 3 4		3 6 4 8 3
Totals	369178	31339	34001		434518

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: J A C K S O N First Name: Y V O N N E Position: I N T ' L O F F I C E R ' S Name of Affiliated Organization:	6 1 6 5 9	0	3 8 5 0		6 5 5 0 9
Last Name: J A C O B S First Name: W E N D E L L Position: S E R V I C I N G R E P Name of Affiliated Organization:	3 3 5 4 7	2 9 6 4	7 3 9 1		4 3 9 0 2
Last Name: J A H A First Name: B A H A T I Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	7 4 3 6		9 6 8 9 2
Last Name: J A N K O W S K I First Name: R O B E R T A Position: B O A R D S E C R E T A R Y Name of Affiliated Organization:	4 6 4 8 1	0	0		4 6 4 8 1
Last Name: J E F F R E Y First Name: M A X R O B Position: A S S I G N M E N T Name of Affiliated Organization:	8 5 6 3 0	7 1 7 9	5 6 3 7		9 8 4 4 6
Totals	309594	17322	24314		351230

ORGANIZATION NAME: International Union - UAW
 ENDING DATE OF PERIOD COVERED: 12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: J E N K I N S First Name: M A R V A Position: I N T ' L O F F I C E R ' S Name of Affiliated Organization:	1 2 5 2 3	0	0		1 2 5 2 3
Last Name: J E N K I N S First Name: T A M M Y Position: G E N E R A L A - M A I N Name of Affiliated Organization:	4 1 2 7 6	0	0		4 1 2 7 6
Last Name: J E N S E N First Name: J A M E S Position: C O O R D I N A T O R Name of Affiliated Organization:	8 6 3 4 7	7 1 7 9	8 0 8 8		1 0 1 6 1 4
Last Name: J E V O N S First Name: J E A N Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 6 6 5 1	0	3 9 3		4 7 0 4 4
Last Name: J E W E L L First Name: N O R W O O D Position: S E R V I C I N G R E P Name of Affiliated Organization:	5 4 8 4 1	4 9 2 0	1 7 3 0 2		7 7 0 6 3
Totals	241638	12099	25783		279520

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: J I V I D E N First Name: D O N A L D Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	5 9 6 4		9 5 4 2 0
Last Name: J O H N First Name: J E N N I F E Position: P U B L I C R E L A T I O N S Name of Affiliated Organization:	8 2 5 0 2	7 1 1 9	4 9 5 3		9 4 5 7 4
Last Name: J O H N S O N First Name: B R I A N Position: S E R V I C I N G R E P Name of Affiliated Organization:	7 3 8 9 0	6 4 2 7	5 3 5 5		8 5 6 7 2
Last Name: J C H N S O N First Name: C Y N T H I A Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	5 4 4 5		9 4 9 5 6
Last Name: J O H N S O N First Name: D O N A L D Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 6 4 1	3 6 9 7		9 3 7 6 5
Totals	403448	35525	25414		464387

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name J O H N S O N First Name H O M E R Position O U T S I D E S E C U R I T Y Name of Affiliated Organization	3 1 0 9 9	0	0		3 1 0 9 9
Last Name J O H N S O N First Name L E R O Y Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 2 7 7	7 1 5 9	1 0 8 4 6		1 0 0 2 8 2
Last Name J O H N S O N First Name P H Y L L I S Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 2 7 7	7 1 7 9	9 1 0 3		9 8 5 5 9
Last Name J O H N S O N First Name S Y L V I A Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 1 3 8	7 1 7 9	8 2 9 2		9 7 6 0 9
Last Name J O L L Y First Name L A R R Y Position A S S I S T A N T M I N O R Name of Affiliated Organization	7 6 8 5 2	1 5 3 1	2 9 2 7		8 1 3 1 0
Totals	354643	23048	31168		408859

ORGANIZATION NAME	International Union - UAW
ENDING DATE OF PERIOD COVERED	12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: JONES First Name: ALFREDA Position: OUTSIDE SECURITY Name of Affiliated Organization:	30720	0	0		30720
Last Name: JONES First Name: BEVERLY Position: ADMINISTRATIVE S Name of Affiliated Organization:	49481	0	101		49582
Last Name: JONES First Name: COLLEEN Position: STENOGRAPHER Name of Affiliated Organization:	44844	0	0		44844
Last Name: JONES First Name: DENNIS Position: SERVICING REP Name of Affiliated Organization:	82352	7159	12698		102209
Last Name: JONES First Name: DOROTHY Position: ADMINISTRATIVE A Name of Affiliated Organization:	94847	7119	10282		112248
Totals	302244	14278	23081		339603

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary <small>(before taxes and other deductions)</small>	Allowances	Disbursements for Official Business	Other Disbursements	Total
(B) Position <small>(Enter employee's job title.)</small>	(D)	(E)	(F)	(G)	(H)
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: J O N E S First Name: E V E L Y N Position: B O A R D S E C R E T A R Y Name of Affiliated Organization:	4 9 0 4 6	0	2 0 8 4		5 1 1 3 0
Last Name: J O N E S First Name: G A R Y Position: A D M I N I S T R A T I V E A Name of Affiliated Organization:	1 0 1 6 4 2	7 1 3 9	1 1 8 2 8		1 2 0 6 0 9
Last Name: J O N E S First Name: R A L P H Position: A T T O R N E Y Name of Affiliated Organization:	1 0 1 7 1 7	7 1 1 9	6 5 2 0		1 1 5 3 5 6
Last Name: J O N E S First Name: R I C H A R D Position: A S S I S T A N T M I N O R Name of Affiliated Organization:	5 7 1 5 8	2 4 6 0	3 0 0 6		6 2 6 2 4
Last Name: J O N E S First Name: S T E P H E N Position: A S S I S T A N T M I N O R Name of Affiliated Organization:	8 6 4 9 7	7 1 5 9	1 1 3 4 3		1 0 4 9 9 9
Totals	396060	23877	34781		454718

ORGANIZATION NAME	International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name J O R D A N First Name K E N Position O R G A N I Z E R Name of Affiliated Organization	8 2 2 7 7	7 1 7 9	3 4 3 2 3		1 2 3 7 7 9
Last Name J O Y C E First Name F R A N K Position P U B L I C R E L A T I O N S Name of Affiliated Organization	9 4 0 7 2	7 1 3 9	6 5 6 9		1 0 7 7 8 0
Last Name J U A R B E First Name F E R N A N D Position O R G A N I Z E R Name of Affiliated Organization	8 2 5 5 2	7 1 5 9	7 7 6 9		9 7 4 8 0
Last Name J U R A C E K First Name J A M E S Position O R G A N I Z E R Name of Affiliated Organization	8 2 3 4 7	7 1 5 9	1 3 3 7 8		1 0 2 8 8 4
Last Name K A M P F First Name G E O R G I A Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 2 7 7	7 1 7 9	9 2 5 4		9 8 7 1 0
Totals	423525	35815	71293		530633

ORGANIZATION NAME:	International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name K A R A S First Name R I C H A R D Position D E P A R T M E N T H E A D Name of Affiliated Organization	9 4 7 7 2	7 1 3 9	9 4 2 6		1 1 1 3 3 7
Last Name K A U F M A N N First Name M A R K Position L A W C L E R K Name of Affiliated Organization	2 8 2 1 6	0	7 9 9 2		3 6 2 0 8
Last Name K E A T I N G First Name P A U L E T T Position S T E N O G R A P H E R Name of Affiliated Organization	4 6 3 4 6	0	0		4 6 3 4 6
Last Name K E E First Name J A M E S E L Position S T R I K E I N S U R A N C E Name of Affiliated Organization	8 2 2 7 7	7 1 7 9	2 1 5 6 7		1 1 1 0 2 3
Last Name K E E L I N G First Name P H I L L I P Position S E R V I C I N G R E P Name of Affiliated Organization	5 4 1 6 6	4 2 1 5	3 2 0 6		6 1 5 8 7
Totals	305777	18533	42191		366501

ORGANIZATION NAME: **International Union - UAW**
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: K E L L E Y First Name: R O B E R T Position: E D U C A T I O N R E P Name of Affiliated Organization:	6 2 2 8 4	4 7 3 9	1 3 8 2		6 8 4 0 5
Last Name: K E L L Y First Name: M A R K Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	9 2 5 4		9 8 7 6 5
Last Name: K E L S O N First Name: J U D I T H Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 5 3 4 1	0	0		4 5 3 4 1
Last Name: K E M P First Name: S T E P H E N Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 5 8	7 1 9 9	5 3 8 8		9 4 8 4 5
Last Name: K E N D Z I O R S K I First Name: D O U G L A S Position: O R G A N I Z E R Name of Affiliated Organization:	7 1 8 2 1	7 1 3 9	4 7 2 1		8 3 6 8 1
Totals	344056	26236	20745		391037

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position (Enter employee's job title.)					
(C) Name of Affiliated Organization (if applicable)					
Last Name: K E R S O N First Name: R O G E R Position: A S S I S T A N T - M A J O Name of Affiliated Organization:	8 9 8 5 7	7 1 5 9	5 2 7 7		1 0 2 2 9 3
Last Name: K E S S L E R First Name: S H A R O N Position: O R G A N I Z E R Name of Affiliated Organization:	8 2 2 0 2	7 1 9 9	2 6 9 9 6		1 1 6 3 9 7
Last Name: K E T O L A First Name: D I A N A Position: O R G A N I Z E R Name of Affiliated Organization:	8 2 3 5 2	7 1 7 9	9 3 5 5		9 8 8 8 6
Last Name: K E Y S First Name: D E N N I S Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 7 9	8 2 4 6		9 7 7 7 7
Last Name: K I L G O R E First Name: C H A D R I C Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 6 9 2 7	7 1 7 9	4 1 2 6		9 8 2 3 2
Totals	423690	35895	54000		513585

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: K I M B E L First Name: G A R Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	7 8 3 1 9	6 8 3 3	5 3 8 5		9 0 5 3 7
Last Name: K I N A R D First Name: D E N N I S Position: S E R V I C I N G R E P Name of Affiliated Organization:	4 8 7 7 3	4 3 5 6	6 1 2 3		5 9 2 5 2
Last Name: K I N G First Name: E A R N E S T Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	4 6 9 9	3 4 2 0		9 0 4 7 1
Last Name: K I N G First Name: J A M E S Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	1 1 0 4 3		1 0 0 4 9 9
Last Name: K I N G First Name: R O Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 5 0 2	7 1 3 9	6 0 5 1		9 5 6 9 2
Totals	374223	30206	32022		436451

ORGANIZATION NAME:	International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name K I N G First Name V I R D E L L Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 2 7 7	7 1 7 9	9 5 1 4		9 8 9 7 0
Last Name K I N K A D E First Name W I L L I A M Position A D M I N I S T R A T I V E A Name of Affiliated Organization	9 4 8 4 7	6 8 6 1	4 4 0 0		1 0 6 1 0 8
Last Name K I N N E Y First Name A R C H I E Position T R A I N I N G R E P Name of Affiliated Organization	8 2 3 5 2	7 1 5 9	5 9 0 0		9 5 4 1 1
Last Name K I R I A K I First Name J O S E P H Position S E R V I C I N G R E P Name of Affiliated Organization	6 9 5 7 3	5 2 6 3	1 2 9 9 5		8 7 8 3 1
Last Name K I R K S E Y First Name W I L L I A M Position S E R V I C I N G R E P Name of Affiliated Organization	7 8 3 1 9	6 8 3 3	6 8 7 3		9 2 0 2 5
Totals	407368	33295	39682		480345

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary <small>(before taxes and other deductions)</small>	Allowances	Disbursements for Official Business	Other Disbursements	Total
(B) Position <small>(Enter employee's job title.)</small>	(D)	(E)	(F)	(G)	(H)
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: K I S S A N E First Name: J A M E S Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 5 0 2	7 1 1 9	3 9 0 9		9 3 5 3 0
Last Name: K L E A First Name: L E O N Position: A S S I S T A N T - M A J O Name of Affiliated Organization:	8 5 3 6 8	7 1 7 9	9 4 6 6		1 0 2 0 1 3
Last Name: K L E B I C K First Name: S U S A N Position: S W I T C H B O A R D O P E R Name of Affiliated Organization:	4 4 8 6 6	0	6 3		4 4 9 2 9
Last Name: K L E I N First Name: G A R Y Position: O R G A N I Z E R Name of Affiliated Organization:	8 2 3 5 2	7 1 7 9	9 1 1 6		9 8 6 4 7
Last Name: K L E P S E R First Name: C Y N T H I A Position: B O A R D S E C R E T A R Y Name of Affiliated Organization:	5 1 3 5 0	0	8 7 6		5 2 2 2 6
Totals	346438	21477	23430		391345

ORGANIZATION NAME:	International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: K L I N G F U S First Name: G E O R G E Position: O R G A N I Z E R Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	1 6 2 4 2		1 0 5 7 5 3
Last Name: K N I S T E R First Name: B A R B A R A Position: I N T ' L O F F I C E R ' S Name of Affiliated Organization:	5 2 5 1 9	0	1 8 0		5 2 6 9 9
Last Name: K N O X First Name: A N N Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 5 9	7 4 5 6		9 7 0 4 2
Last Name: K O B B First Name: C A R O L E Position: B O A R D S E C R E T A R Y Name of Affiliated Organization:	5 5 3 5 1	0	7 1 7		5 6 0 6 8
Last Name: K O E P C K E First Name: D A V I D Position: T R A I N I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	7 1 5 2		9 6 6 0 8
Totals	354926	21497	31747		408170

ORGANIZATION NAME **International Union - UAW**
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: K O L O S Z A R First Name: D O R I S Position: G E N E R A L A - M A I N Name of Affiliated Organization:	2 4 0 0 6	0	0		2 4 0 0 6
Last Name: K O M E R - E B B I N G First Name: T R A C Y Position: S E C R E T A R Y I (M A J Name of Affiliated Organization:	4 3 3 2 3	0	0		4 3 3 2 3
Last Name: K O N K O L First Name: P A U L Position: S E R V I C I N G R E P Name of Affiliated Organization:	3 6 4 4 5	1 8 5 6	1 9 7 2		4 0 2 7 3
Last Name: K O P P L I N First Name: J A Y Position: O R G A N I Z E R Name of Affiliated Organization:	8 5 5 2 7	7 1 7 9	8 6 8 7		1 0 1 3 9 3
Last Name: K O R O L E N K O First Name: P E T E R Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	1 1 9 8 0		1 0 1 4 3 6
Totals	271578	16214	22639		310431

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position (Enter employee's job title.)					
(C) Name of Affiliated Organization (if applicable)					
Last Name: K O S C I E C H A First Name: E R I K A Position: I N T E R N Name of Affiliated Organization:	1 2 7 6 0	0	6 3 2		1 3 3 9 2
Last Name: K O S C I N S K I First Name: D A V I D Position: S E R V I C I N G R E P Name of Affiliated Organization:	3 5 0 6 9	3 1 0 5	1 1 6 7 5		4 9 8 4 9
Last Name: K O Z L O First Name: D E N I S E Position: P H O T O L A Y O U T T Y P Name of Affiliated Organization:	1 4 1 9 3	0	0		1 4 1 9 3
Last Name: K O Z L O W S K I First Name: D E L P H I N Position: B O O K K E E P E R A Name of Affiliated Organization:	4 7 0 5 1	0	0		4 7 0 5 1
Last Name: K R A G H First Name: N A N C Y Position: S E C R E T A R Y I (M A J Name of Affiliated Organization:	4 4 8 4 2	0	5 8		4 4 9 0 0
Totals	153915	3105	12365		169385

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: K R A M E R First Name: M A R I L Y N Position: T E C H A I D I Name of Affiliated Organization:	4 8 6 6 5	0	1 5 3		4 8 8 1 8
Last Name: K R E L L First Name: P A U L Position: A D M I N I S T R A T I V E A Name of Affiliated Organization:	9 0 5 0 4	7 1 9 9	3 1 2 1		1 0 0 8 2 4
Last Name: K R E M M First Name: V I C K I Position: A D M I N I S T R A T I V E A Name of Affiliated Organization:	1 0 6 2 5 1	7 3 0 1	5 6 5 1		1 1 9 2 0 3
Last Name: K R C H N First Name: C H E R Y L Position: B O O K K E E P E R B I Name of Affiliated Organization:	4 4 8 9 6	0	0		4 4 8 9 6
Last Name: K U B I K First Name: S T A N L E Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	1 5 8 9 5		1 0 5 4 0 6
Totals	372668	21659	24820		419147

ORGANIZATION NAME: International Union - UAW
 ENDING DATE OF PERIOD COVERED: 12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: K U M A S I - N A K U R F A N I N A First Name: Position: S E C R E T A R Y I (M A J Name of Affiliated Organization:	4 6 3 9 3	0	5 4 4		4 6 9 3 7
Last Name: K U S H N E R First Name: J U L I E Position: E D U C A T I O N R E P Name of Affiliated Organization:	8 6 8 0 2	7 1 5 9	1 9 6 1 6		1 1 3 5 7 7
Last Name: K U Z N I C K I First Name: J A N I C E Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 4 7 3 3	0	0		4 4 7 3 3
Last Name: L A C H A N C E First Name: D A V I D Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 1 9 5 2	7 1 7 9	6 5 2 8		9 5 6 5 9
Last Name: L A C O U R First Name: M I C H A E L Position: S Y S T E M S A N A L Y S T Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	4 7 6 8		9 4 3 3 4
Totals	342307	21477	31456		395240

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

FILE NUMBER: 0 0 0 - 1 4 9

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: L A C O U R First Name: M I C H A E L Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	1 5 1 4 8		1 0 4 6 5 9
Last Name: L A R I C C I A First Name: E M M A Position: M I S C 1 Name of Affiliated Organization:	2 4 9 6 0	0	0		2 4 9 6 0
Last Name: L A R I C C I A First Name: R O B E R T Position: M I S C 1 Name of Affiliated Organization:	7 1 3 6 2	0	4 1 7 6		7 5 5 3 8
Last Name: L A V A L L E Y First Name: T E D Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	6 4 8 7		9 6 0 5 3
Last Name: L A C E Y First Name: J A C Q U E L Position: B O O K K E E P E R B I Name of Affiliated Organization:	4 1 9 8 5	0	0		4 1 9 8 5
Totals	303086	14298	25811		343195

ORGANIZATION NAME:	International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: L A C K First Name: D A N I E L Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 1	1 1 0 1 6		1 0 0 4 6 4
Last Name: L A D D First Name: T O M Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	1 4 6 9 3		1 0 4 2 0 4
Last Name: L A F A T A First Name: J A N I C E Position: S E C R E T A R Y I (M A J Name of Affiliated Organization:	4 5 1 5 9	0	0		4 5 1 5 9
Last Name: L A G E First Name: M I C H E L L Position: I N T ' L O F F I C E R ' S Name of Affiliated Organization:	4 2 0 6 9	0	0		4 2 0 6 9
Last Name: L A K E First Name: J A M E S Position: C I V I L R I G H T S R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 7 9	8 5 9 7		9 8 1 2 8
Totals	334209	21509	34306		390024

ORGANIZATION NAME:	International Union - UAW
ENDING DATE OF PERIOD COVERED	12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: L A N E First Name: L Y N N E Position: O R G A N I Z E R Name of Affiliated Organization:	2 1 3 2 7	1 8 3 5	2 1 6 9		2 5 3 3 1
Last Name: L A N G First Name: P A M E L A Position: K E Y P U N C H O P E R A T O R Name of Affiliated Organization:	3 6 7 4 1	0	0		3 6 7 4 1
Last Name: L A N G A N First Name: L I S A Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 6 2 6 9	0	1 0		4 6 2 7 9
Last Name: L A N G E First Name: J O N A T H A Position: L E A D E R - M A I N T E N A N C E Name of Affiliated Organization:	5 3 9 8 4	0	0		5 3 9 8 4
Last Name: L A P E R L E First Name: J O H N Position: S E R V I C I N G R E P Name of Affiliated Organization:	1 0 3 8 3 3	7 3 2 1	2 1 1 1 0		1 3 2 2 6 4
Totals	262154	9156	23289		294599

ORGANIZATION NAME	International Union - UAW
ENDING DATE OF PERIOD COVERED	12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name L A R D E First Name L E A T H A Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 3 5 2	6 0 2 0	5 6 7 5		9 4 0 4 7
Last Name L A S H First Name L I N D A Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 2 7 7	7 1 5 9	8 7 1 5		9 8 1 5 1
Last Name L A S H B R O O K First Name R O L A N D Position A S S I S T A N T - M A J O Name of Affiliated Organization	9 3 4 6 9	6 2 5 9	5 0 2 7		1 0 4 7 5 5
Last Name L A T H E M First Name S A M U E L Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 2 5 8	7 1 7 9	8 2 3 5		9 7 6 7 3
Last Name L A U B E R T First Name K E N N E T H Position S K I L L E D T R A D E S R Name of Affiliated Organization	8 2 2 7 7	7 1 7 9	1 5 2 8 7		1 0 4 7 4 3
Totals	422633	33796	42940		499369

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: L A U T E N S C H L E G First Name: B E T T Y Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 4 4 5 7	0	2 0 4		4 4 6 6 1
Last Name: L A Y First Name: D A V I D Position: A S S I S T A N T D E P A R T Name of Affiliated Organization:	8 6 4 9 7	7 1 3 9	9 3 8 4		1 0 3 0 2 0
Last Name: L A Z A R O W I T Z First Name: G E R A L D Position: R E S E R A C H S P E C I A L Name of Affiliated Organization:	9 6 1 5 5	7 1 1 9	5 6 7 9		1 0 8 9 5 3
Last Name: L E A C H First Name: E D W A R D Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	6 9 5 7		9 6 5 2 3
Last Name: L E B E A U First Name: D A L E Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 0 9 6	3 2 3 4		9 2 6 0 7
Totals	391813	28493	25458		445764

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position (Enter employee's job title.)					
(C) Name of Affiliated Organization (if applicable)					
Last Name: L E E First Name: M I C H A E L Position: G R A N T Name of Affiliated Organization:	8 7 2 0 4	7 1 7 9	1 3 1 1 5		1 0 7 4 9 8
Last Name: L E G G First Name: J O H N Position: O R G A N I Z E R Name of Affiliated Organization:	5 9 4 6 1	6 0 2 1	8 4 0 4		8 3 8 8 6
Last Name: L E G R E E First Name: M A R Y Position: S E C R E T A R Y I (M A J Name of Affiliated Organization:	5 6 7 1 4	0	1 7 3		5 6 8 8 7
Last Name: L E H R First Name: R A Y E Position: O U T S I D E S E C U R I T Y Name of Affiliated Organization:	3 2 5 8 3	0	0		3 2 5 8 3
Last Name: L E I S I N G E R First Name: P A M E L A Position: C O N S E R V A T I O N R E P Name of Affiliated Organization:	8 2 5 0 2	7 1 1 9	1 0 1 8 6		9 9 8 0 7
Totals	328464	20319	31878		380661

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

FILE NUMBER: 000-149

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: L E N T Z First Name: R A N D Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	8 7 6 2		9 8 2 7 3
Last Name: L E O N First Name: J O E L Y N Position: B O A R D S E C R E T A R Y Name of Affiliated Organization:	4 6 1 3 4	0	0		4 6 1 3 4
Last Name: L E S L E Y First Name: H E L E N Position: A S S I S T A N T - M A J O Name of Affiliated Organization:	8 8 3 5 1	7 1 5 9	3 5 4 0		9 9 0 5 0
Last Name: L E S T E R First Name: B R E N D A Position: A D M I N I S T R A T I V E S Name of Affiliated Organization:	4 6 9 3 9	0	0		4 6 9 3 9
Last Name: L E T K O W S K I First Name: M I C H A E L Position: S E R V I C I N G R E P Name of Affiliated Organization:	6 9 4 3 2	6 1 5 6	4 5 9 1		8 0 1 7 9
Totals	333208	20474	16893		370575

ORGANIZATION NAME: International Union - UAW
 ENDING DATE OF PERIOD COVERED: 12/31/00

SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position (Enter employee's job title.)					
(C) Name of Affiliated Organization (if applicable)					
Last Name: L E T T R E First Name: R O B E R T Position: O R G A N I Z E R Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	8 4 8 2		9 7 9 3 8
Last Name: L E V E N S O N First Name: H E L E N Position: T E C H N I C I A N Name of Affiliated Organization:	2 5 2 0 0	0	7 4 7		2 5 9 4 7
Last Name: L E V I N S O N First Name: M E N A H E M Position: S Y S T E M S A N A L Y S T Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	2 9 7 6		9 2 5 4 2
Last Name: L E W I S First Name: A L V A Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 0 4 2	6 2 4 8		9 5 5 6 7
Last Name: L E W I S First Name: D E R E K Position: G E N E R A L A - M A I N Name of Affiliated Organization:	4 3 5 1 2	0	0		4 3 5 1 2
Totals	31593	21360	18453		35506

ORGANIZATION NAME:	International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: L E W I S First Name: L A R R Y Position: C I T I Z E N S H I P R E P Name of Affiliated Organization:	8 2 5 7 7	7 0 9 9	1 1 1 6 4		1 0 0 8 4 0
Last Name: L E W I S First Name: L I N D A Position: C O N S E R V A T I O N R E P Name of Affiliated Organization:	8 2 5 0 2	7 1 3 9	9 3 2 8		9 8 9 6 9
Last Name: L E C A R I First Name: P A M E L A Position: C L E R K T Y P I S T Name of Affiliated Organization:	1 9 8 9 1	0	0		1 9 8 9 1
Last Name: L I N D E M A N First Name: V I N C E N T Position: O R G A N I Z E R Name of Affiliated Organization:	8 2 2 0 2	7 1 9 9	8 7 8 0		9 8 1 8 1
Last Name: L L O Y D First Name: A L V I N Position: C I T I Z E N S H I P R E P Name of Affiliated Organization:	8 2 1 2 7	7 2 1 9	1 7 8 3 5		1 0 7 1 8 1
Totals	349299	28656	47107		425062

ORGANIZATION NAME	International Union - UAW
ENDING DATE OF PERIOD COVERED	12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: L O G A N First Name: K A R L A Position: S E R V I C I N G R E P Name of Affiliated Organization:	7 8 3 1 9	6 8 3 3	6 3 1 4		9 1 4 6 6
Last Name: L O N G First Name: M I C K E Y Position: T R A I N I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	7 7 7 3		9 7 3 3 9
Last Name: L O N G First Name: R I C H A R D Position: A D M I N I S T R A T I V E A Name of Affiliated Organization:	9 4 6 9 7	7 1 7 9	1 5 1 0 2		1 1 6 9 7 8
Last Name: L O N G First Name: T H O M A S Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 3 3 9 6	7 1 1 9	8 5 5 8		9 9 0 7 3
Last Name: L O N G First Name: T O N Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	1 1 1 9 2		1 0 0 7 5 8
Totals	421266	35409	48939		505614

ORGANIZATION NAME:	International Union - UAW
ENDING DATE OF PERIOD COVERED:	12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: L O P I C C O L O First Name: A L I C E Position: S E C R E T A R Y I (M A J Name of Affiliated Organization:	5 1 6 6 8	0	8 3 8		5 2 5 0 6
Last Name: L O R T Z First Name: K E N N E T H Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 3 5 2 7	7 1 7 9	5 7 0 8		9 6 4 1 4
Last Name: L Y O N S First Name: R I C H A R D Position: A S S I S T A N T - M A J O Name of Affiliated Organization:	8 9 8 5 7	7 1 5 9	6 1 4 5		1 0 3 1 6 1
Last Name: M A C B R I D E First Name: J A M E S Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	2 9 7 1		9 2 5 3 7
Last Name: M A D O R E First Name: L R O B E R Position: A S S I S T A N T - R E G I Name of Affiliated Organization:	9 2 3 4 9	7 1 1 9	2 8 9 0 9		1 2 8 3 7 7
Totals	399828	28596	44571		472995

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position (Enter employee's job title.)					
(C) Name of Affiliated Organization (if applicable)					
Last Name: M A H A N First Name: L A R R Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	6 0 9 0 5	2 4 6 0	2 1 3 5		6 5 5 0 0
Last Name: M A H N First Name: T A N Y A Position: O R G A N I Z E R Name of Affiliated Organization:	5 7 8 7 6	5 2 0 3	4 4 6 1		6 7 5 4 0
Last Name: M A L L O N First Name: K A R O L Position: A D M I N I S T R A T I V E S Name of Affiliated Organization:	4 7 5 2 2	0	0		4 7 5 2 2
Last Name: M A L L O R Y First Name: R I C K I E Position: O U T S I D E S E C U R I T Y Name of Affiliated Organization:	2 9 5 6 1	0	0		2 9 5 6 1
Last Name: M A N I A N First Name: E L I Z A B E Position: S T E N O G R A P H E R Name of Affiliated Organization:	5 3 9 6 5	0	3 3 1		5 4 2 9 6
Totals	249829	7663	6927		264419

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: M A N I A N First Name: S T E V E N Position: G E N E R A L A - M A I N Name of Affiliated Organization:	3 4 2 5 6	0	0		3 4 2 5 6
Last Name: M A N N First Name: D A V I D Position: O R G A N I Z E R Name of Affiliated Organization:	8 2 2 0 2	7 1 9 9	2 0 7 3 3		1 1 0 1 3 4
Last Name: M A N T Y L A First Name: K A R L Position: P U B L I C R E L A T I O N S Name of Affiliated Organization:	1 5 7 4	0	1 0 1 3 6		1 1 7 1 0
Last Name: M A N Z O First Name: P A T R I C I Position: O R G A N I Z E R Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	1 0 0 6 9		9 9 6 3 5
Last Name: M A R I N O First Name: B A X T E R Position: O R G A N I Z E R Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	1 1 6 4 7		1 0 1 2 1 3
Totals	282886	21477	52585		356948

ORGANIZATION NAME: International Union - UAW
 ENDING DATE OF PERIOD COVERED: 12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position (Enter employee's job title.)					
(C) Name of Affiliated Organization (if applicable)					
Last Name: M A R K E L L First Name: B R A D Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	8 3 1 8		9 7 7 7 4
Last Name: M A R K E Y First Name: J A N E T Position: B O O K K E E P E R B I Name of Affiliated Organization:	4 6 5 4 6	0	0		4 6 5 4 6
Last Name: M A R L A T T First Name: R O B E R T Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	7 0 5 0		9 6 6 1 6
Last Name: M A R O L L A First Name: N A N C Y Position: C L E R K T Y P I S T Name of Affiliated Organization:	4 5 5 3 9	0	0		4 5 5 3 9
Last Name: M A R S H A L L First Name: B R A D L E Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	4 8 9 1 2	0	5 4 7		4 9 4 5 9
Totals	305701	14318	15915		335934

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: M A R S H A L L First Name: C H A R L I E Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 2 1 9	1 3 4 9 5		1 0 2 9 9 1
Last Name: M A R S H A L L First Name: D O N A L D Position: S E R V I C I N G R E P Name of Affiliated Organization:	7 0 9 3 4	6 1 5 6	5 2 2 6		8 2 3 1 6
Last Name: M A R T I N First Name: F R A N K Position: A U D I T O R Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	1 0 6 2 3		1 0 0 1 3 4
Last Name: M A R T I N First Name: M A R K Position: S E C U R I T Y Name of Affiliated Organization:	6 2 1 8 4	2 9 9 8	1 3 1 2		6 6 4 9 4
Last Name: M A R T I N First Name: M I C H E L E Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 0 2	7 1 9 9	1 1 8 4 1		1 0 1 2 4 2
Totals	379949	30731	42497		453177

ORGANIZATION NAME: International Union - UAW
 ENDING DATE OF PERIOD COVERED: 12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position (Enter employee's job title.)					
(C) Name of Affiliated Organization (if applicable)					
Last Name: M A R T I N First Name: R I C H A R D Position: S E R V I C I N G R E P Name of Affiliated Organization:	7 8 3 1 9	7 0 2 7	9 0 8 9		9 4 4 3 5
Last Name: M A R T I N E Z First Name: B A L T A Z A Position: O R G A N I Z E R Name of Affiliated Organization:	8 2 3 5 2	6 5 8 1	1 0 1 7 8		9 9 1 1 1
Last Name: M A R T I N E Z First Name: M Y R I A M Position: C L E R K T Y P I S T Name of Affiliated Organization:	4 3 4 1 6	0	0		4 3 4 1 6
Last Name: M A R T I N E Z D E First Name: R A Q U E L Position: C L E R K T Y P I S T Name of Affiliated Organization:	4 3 9 0 1	0	0		4 3 9 0 1
Last Name: M A R T I N - Z I M M E First Name: C A R O L Y N Position: C L E R K T Y P I S T Name of Affiliated Organization:	4 4 9 1 9	0	0		4 4 9 1 9
Totals	292907	13608	19267		325782

ORGANIZATION NAME: **International Union - UAW**
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: M A S O N First Name: G A R R Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 9 7 7 8	7 1 5 9	5 1 2 0		1 0 2 0 5 7
Last Name: M A S O N First Name: R O N A L D Position: O R G A N I Z E R Name of Affiliated Organization:	9 5 8 9 6	7 0 9 9	4 0 8 3		1 0 7 0 7 8
Last Name: M A S S A R O N First Name: P A U L Position: A D M I N I S T R A T I V E A Name of Affiliated Organization:	3 1 3 1 3	0	4 2 2 8		3 5 5 4 1
Last Name: M A S S E N B U R G First Name: M A R Y A N Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 6 5 2	7 0 7 9	2 3 3 4		9 2 0 6 5
Last Name: M A S T R O P I E T R O First Name: D A N I E L Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 0 2	7 1 7 9	8 8 5 1		9 8 2 3 2
Totals	381841	28516	24616		434973

ORGANIZATION NAME:	International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name M A T H E N E Y First Name P E G G Y Position A U D I T O R Name of Affiliated Organization	8 2 4 2 7	7 1 3 9	1 2 2 9 1		1 0 1 8 5 7
Last Name M A T H I S First Name M I C H A E L Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 2 7 7	7 1 7 9	1 2 5 0 7		1 0 1 9 6 3
Last Name M A T L A S First Name M I C H A E L Position U T I L I T Y R E P A I R M A Name of Affiliated Organization	4 6 9 0 1	0	0		4 6 9 0 1
Last Name M A Y S First Name E A R L I E Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 5 7 7	7 0 1 9	1 3 8 3 2		1 0 3 4 2 8
Last Name M C A F E E First Name F A N N I E Position T R A I N I N G R E P Name of Affiliated Organization	8 2 2 7 7	7 1 7 9	7 2 4 9		9 6 7 0 5
Totals	376459	28516	45879		450854

ORGANIZATION NAME: **International Union - UAW**
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: M C A L L I S T E R First Name: D A V I D Position: A D M I N I S T R A T I V E A Name of Affiliated Organization:	9 4 6 9 7	7 1 5 9	9 7 3 6		1 1 1 5 9 2
Last Name: M C A T T E E First Name: B R U C E Position: C I T I Z E N S H I P R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	1 0 9 0 7		1 0 0 3 6 3
Last Name: M C C A R T Y First Name: P A T R I C K Position: D E P A R T M E N T H E A D Name of Affiliated Organization:	8 9 7 8 2	7 1 7 9	1 2 9 5 7		1 0 9 9 1 8
Last Name: M C C L A I N First Name: T I M O T H Y Position: H E A L T H & S A F E T Y Name of Affiliated Organization:	8 3 5 2 7	7 1 7 9	1 2 7 6 3		1 0 3 4 6 9
Last Name: M C D E R M O T T First Name: D O N N A Position: C L E R K T Y P I S T Name of Affiliated Organization:	4 5 3 1 1	0	0		4 5 3 1 1
Totals	395594	28696	46363		470653

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name M C D O W E L L First Name S A M U E L Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 4 2 7	7 1 3 9	2 4 0 2 5		1 1 3 5 9 1
Last Name M C K E N N A - D E C A U D R E Y First Name A U D R E Y Position T E C H A I D I Name of Affiliated Organization	4 4 3 6 0	0	3 8 7		4 4 7 4 7
Last Name M C K I D D Y First Name R I C K E Y Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 3 5 2	7 1 7 9	1 2 6 5 7		1 0 2 1 8 8
Last Name M C K I N N O N First Name B E R N A R D Position O F F I C E M A N A G E R Name of Affiliated Organization	5 2 5 2 4	5 6 5	1 2 0 2		5 4 2 9 1
Last Name M C N A M A R A First Name M I C H A E L Position A U D I T O R Name of Affiliated Organization	8 1 8 8 5	7 1 7 9	5 2 0 7		9 4 2 7 1
Totals	343548	22062	43478		409088

ORGANIZATION NAME: **International Union - UAW**
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: M C N I S H First Name: J E R R Y Position: A S S I S T A N T - R E G I Name of Affiliated Organization:	9 2 4 2 4	7 0 7 9	6 4 4 4		1 0 5 9 4 7
Last Name: M C N U L T Y First Name: E D W A R D Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	1 7 3 6 0		1 0 6 8 1 6
Last Name: M C C A L E B B First Name: E L A I N A Position: M U L T I L I T H O P E R A T Name of Affiliated Organization:	4 4 8 9 0	0	0		4 4 8 9 0
Last Name: M C C A L L U M First Name: K A R L Position: H E A T I N G / A I R C O N D Name of Affiliated Organization:	7 0 2 7 0	0	0		7 0 2 7 0
Last Name: M C C A R T H Y First Name: K A R E N Position: A D M I N I S T R A T I V E S Name of Affiliated Organization:	4 6 6 5 1	0	0		4 6 6 5 1
Totals	336512	14258	23804		374574

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name M C C O Y First Name S E L E N E Position A S S I S T A N T - M A J O Name of Affiliated Organization	8 9 8 5 7	7 1 3 9	8 0 2 6		1 0 5 0 2 2
Last Name M C C O Y First Name T E R R Y Position S E C U R I T Y Name of Affiliated Organization	5 8 9 5 4	1 4 4 9	1 3 2 7		6 1 7 3 0
Last Name M C D O N A L D First Name S U Z A N N E Position S T E N O G R A P H E R Name of Affiliated Organization	4 5 9 2 5	0	2 2 5		4 6 1 5 0
Last Name M C G H E E First Name F R E D A Position S T E N O G R A P H E R Name of Affiliated Organization	2 7 5 6 1	0	0		2 7 5 6 1
Last Name M C G H E E First Name R E G I N A L Position P U B L I C R E L A T I O N S Name of Affiliated Organization	8 2 2 0 2	7 1 9 9	8 2 8 6		9 7 6 8 7
Totals	304499	15787	17864		338150

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: M C G O W A N First Name: E D W A R D Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	2 3 6 3		9 1 8 1 9
Last Name: M C H U G H First Name: R O B E R T Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 9 9	1 3 1 1 0		1 0 2 5 8 6
Last Name: M C K A Y First Name: J U D Y Position: S W I T C H B O A R D O P E R Name of Affiliated Organization:	4 4 1 7 0	0	0		4 4 1 7 0
Last Name: M C L A R E N First Name: D A V I D Position: M U L T I L I T H O P E R A T Name of Affiliated Organization:	4 5 2 6 7	0	0		4 5 2 6 7
Last Name: M C L I M A N S First Name: J E R R Y Position: T R A I N I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	7 1 6 8		9 6 6 7 9
Totals	336343	21537	22641		380521

ORGANIZATION NAME: **International Union - UAW**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: M C R E E First Name: R E B E C C A Position: O U T S I D E S E C U R I T Y Name of Affiliated Organization:	1 8 8 4 2	0	0		1 8 8 4 2
Last Name: M C W I L L I A M S First Name: C H E R Y L Position: G E N E R A L A - M A I N Name of Affiliated Organization:	4 5 4 2 5	0	0		4 5 4 2 5
Last Name: M E A D O W S First Name: S H A R O N Position: A C T U A R Y Name of Affiliated Organization:	8 9 8 3 3	7 1 7 9	6 3 7 8		1 0 3 3 9 0
Last Name: M E A N Y First Name: W I L L I A M Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 1 5 6 1	7 1 9 9	5 6 0 7		9 4 3 6 7
Last Name: M E D L E Y First Name: B I L L Position: T R A I N I N G R E P Name of Affiliated Organization:	8 2 2 0 2	7 1 9 9	6 2 0 7		9 5 6 0 8
Totals	317863	21577	18192		357632

ORGANIZATION NAME:	International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: M E I N I N G E R First Name: J U D I T H Position: C L E R K T Y P I S T Name of Affiliated Organization:	4 3 1 8 2	0	0		4 3 1 8 2
Last Name: M E L A R A First Name: J O S E Position: E D U C A T I O N R E P Name of Affiliated Organization:	1 0 6 7 8	8 4 7	1 0 9		1 1 6 3 4
Last Name: M E N C H A C A First Name: S A L O M O N Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 1 3 4 1	5 4 4 5	5 0 6 4		9 1 8 5 0
Last Name: M E S S E R First Name: J O H N Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	5 1 3 6		9 4 5 9 2
Last Name: M E T H N E R First Name: R O B E R T Position: S T O C K R O O M C L E R K Name of Affiliated Organization:	4 4 1 6 0	0	0		4 4 1 6 0
Totals	261638	13471	10309		285418

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position (Enter employee's job title.)					
(C) Name of Affiliated Organization (if applicable)					
Last Name: MILLER First Name: ADAM Position: BENEFIT REP Name of Affiliated Organization:	7 4 7 5 6	7 1 7 9	4 1 7 9		8 6 1 1 4
Last Name: MILLER First Name: JOHN Position: TRAINING REP Name of Affiliated Organization:	8 1 0 0 3	4 5 4 5	8 0 6 2		9 3 6 1 0
Last Name: MILLER First Name: KAREN Position: MISC 1 Name of Affiliated Organization:	1 0 1 7 4	0	0		1 0 1 7 4
Last Name: MILLER First Name: LYNDA Position: BOOKKEEPER BI Name of Affiliated Organization:	4 4 2 8 6	0	0		4 4 2 8 6
Last Name: MILLER First Name: MICHAEL Position: SERVICING REP Name of Affiliated Organization:	8 1 5 3 9	7 2 1 9	1 3 1 2		9 0 0 7 0
Totals	291758	18943	13553		324254

ORGANIZATION NAME: **International Union - UAW**
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: M I L L E R First Name: T A M M I E Position: S W I T C H B O A R D O P E R Name of Affiliated Organization:	5 1 7 5 3	0	1 7 1 5		5 3 4 6 8
Last Name: M I L L E R First Name: V E L M A Position: T E C H A I D I Name of Affiliated Organization:	4 5 3 9 3	0	1 5		4 5 4 0 8
Last Name: M I L L S First Name: D O R E T H A Position: G E N E R A L A - M A I N Name of Affiliated Organization:	3 7 1 5 6	0	0		3 7 1 5 6
Last Name: M I N N I S First Name: A R T H U R Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 5 0 2	7 1 1 9	1 5 1 7 2		1 0 4 7 9 3
Last Name: M I N O R First Name: W I L L I A M Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	6 4 0 4		9 5 9 1 5
Totals	299156	14278	23306		336740

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position (Enter employee's job title.)					
(C) Name of Affiliated Organization (if applicable)					
Last Name: M I R E R First Name: F R A N K L I Position: H E A L T H & S A F E T Y Name of Affiliated Organization:	1 0 0 5 5 3	7 1 5 9	7 3 1 4		1 1 5 0 2 6
Last Name: M I S Z E W S K I First Name: R O B E R T Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	7 7 5 3		9 7 2 0 9
Last Name: M I T C H E L L First Name: B R I A N Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	1 6 1 0 1		1 0 5 6 1 2
Last Name: M I T C H E L L First Name: D E B O R A H Position: T E C H A I D I Name of Affiliated Organization:	4 4 8 8 7	0	0		4 4 8 8 7
Last Name: M I T C H E L L First Name: L I N D A Position: A U D I T O R Name of Affiliated Organization:	1 9 8 3 0	1 6 9 4	4 5 7 8		2 6 1 0 2
Totals	329899	23191	35746		388836

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: MITCHELL First Name: MAURICE Position: SERVICING REP Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	8 4 9 9		9 7 9 5 5
Last Name: MITCHELL First Name: PAUL Position: ASSISTANT MINOR Name of Affiliated Organization:	8 4 1 8 1	7 1 3 6	1 1 1 2 5		1 0 2 4 4 2
Last Name: MITCHELL First Name: PAULINE Position: CLERK TYPIST Name of Affiliated Organization:	4 3 4 5 4	0	0		4 3 4 5 4
Last Name: MITCHELL First Name: SUSANNE Position: SERVICING REP Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	6 5 3 8		9 6 0 4 9
Last Name: MOCNIK First Name: PATRICI Position: INT'L OFFICER'S Name of Affiliated Organization:	4 9 5 8 6	0	5 3 9 5		5 4 9 8 1
Totals	341850	21474	31557		394881

ORGANIZATION NAME: International Union - UAW
 ENDING DATE OF PERIOD COVERED: 12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position (Enter employee's job title.)					
(C) Name of Affiliated Organization (if applicable)					
Last Name: M O F F A T T First Name: L A R R Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	1 6 1 4 1		1 0 5 5 9 7
Last Name: M O F F E T T First Name: C E C E L I A Position: L E G A L S E C R E T A R Y Name of Affiliated Organization:	4 3 8 1 0	0	0		4 3 8 1 0
Last Name: M O L L First Name: C L A Y T O N Position: T R A I N I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 9 9	7 5 6 5		9 7 0 4 1
Last Name: M O N A G H A N First Name: F R A N C I S Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	6 5 5 6		9 6 0 6 7
Last Name: M O N A T First Name: R O N A L D Position: A U D I T O R Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	9 2 8 0		9 8 8 4 6
Totals	373143	28676	39542		441361

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

FILE NUMBER: 0 0 0 - 1 4 9

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: M O N C Z K A First Name: R I C H A R D Position: A D M I N I S T R A T I V E A Name of Affiliated Organization:	9 4 8 4 7	7 1 5 9	2 3 0 5 0		1 2 5 0 5 6
Last Name: M O N K First Name: R O D N E Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	7 8 3 1 9	6 8 3 3	8 8 7 6		9 4 0 2 8
Last Name: M O N K E V I C H First Name: N I C H O L A Position: L E A D E R M A C H I N E R Name of Affiliated Organization:	5 6 2 9 6	0	0		5 6 2 9 6
Last Name: M O N R O E First Name: J U D I T H Position: M U L T I L I T H O P E R A T Name of Affiliated Organization:	4 5 5 0 6	0	0		4 5 5 0 6
Last Name: M O N T A N I First Name: S C O T T Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 9 9	1 5 0 6 3		1 0 4 5 3 9
Totals	357245	21191	46989		425425

ORGANIZATION NAME: International Union - UAW

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position (Enter employee's job title.)					
(C) Name of Affiliated Organization (if applicable)					
Last Name: M O O R E First Name: C E C I L Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 9 9	5 0 5 8		9 4 5 3 4
Last Name: M O O R E First Name: D E R R I C K Position: O R G A N I Z E R Name of Affiliated Organization:	6 9 4 6 1	6 0 2 1	8 8 5 9		8 4 3 4 1
Last Name: M O O R E First Name: J A M E S Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	2 1 2 7 4		1 1 0 7 3 0
Last Name: M G R A N First Name: M I L T O N Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 0 2	7 1 7 9	1 3 3 0 8		1 0 2 6 8 9
Last Name: M O R G A N First Name: A V E R O N Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 6 6 9 6	0	0		4 6 6 9 6
Totals	362913	27578	48499		438990

ORGANIZATION NAME:	International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: M O R G A N First Name: A R T H U R Position: S E R V I C I N G R E P Name of Affiliated Organization:	3 2 0 2 5	1 8 5 6	2 4 9 1		3 6 3 7 2
Last Name: M O R O S K I First Name: C H R I S T I Position: P U B L I C R E L A T I O N S Name of Affiliated Organization:	8 1 8 8 5	7 1 7 9	4 1 8 6		9 3 2 5 0
Last Name: M O R R I S First Name: J O H N Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 5 6 0 2	7 1 5 9	1 1 5 0 3		1 0 4 2 6 4
Last Name: M O R T O N First Name: S T E P H E N Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	5 8 8 1		9 5 3 9 2
Last Name: M O S H I M E R First Name: G W E N D O L Position: B O O K K E E P E R B I Name of Affiliated Organization:	2 0 0 6 2	0	0		2 0 0 6 2
Totals	301926	23353	24061		349340

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: M O S S First Name: K I M Position: T E C H A I D I Name of Affiliated Organization:	5 1 8 7 1	0	8		5 1 8 7 9
Last Name: M O T L E Y First Name: D A R R E L L Position: T R A I N I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	8 7 7 3		9 8 3 3 9
Last Name: M U E L L E R First Name: K U R T Position: G E N E R A L A - M A I N Name of Affiliated Organization:	5 2 4 8 5	0	3 8		5 2 5 2 3
Last Name: M U R D O C H First Name: P A T R I C I Position: L E A D E R - M A I N T E N Name of Affiliated Organization:	3 8 8 0 7	0	0		3 8 8 0 7
Last Name: M U R D Y First Name: C A R L E N A Position: E D U C A T I O N R E P Name of Affiliated Organization:	8 3 8 7 0	7 1 5 9	4 4 6 4		9 5 4 9 3
Totals	309460	14298	13283		337041

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: M U R P H Y First Name: J U D I T H Position: A S S I S T A N T - M A J O Name of Affiliated Organization:	8 9 9 3 2	7 1 3 9	1 0 3 7 6		1 0 7 4 4 7
Last Name: M U R R A Y First Name: B R I A N Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	1 7 1 6 8		1 0 6 6 2 4
Last Name: M U R R A Y First Name: R O N A L D Position: S E R V I C I N G R E P Name of Affiliated Organization:	7 5 0 9 7	5 4 8 5	1 0 8 0 6		9 1 3 8 8
Last Name: M U R T First Name: D A V I D Position: M A I N T E N A N C E M A N A Name of Affiliated Organization:	7 5 3 4 7	6 2 1 9	3 9 6 9		8 5 5 3 5
Last Name: M U S E First Name: R O B E R T Position: S E R V I C I N G R E P Name of Affiliated Organization:	4 2 7 6 6	1 8 5 6	3 2 6 1		4 7 8 8 3
Totals	365419	27878	45580		438877

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: M U S I C K First Name: F R A N K L I Position: D I R E C T O R O F S P E C Name of Affiliated Organization:	1 0 1 7 1 7	7 1 7 9	5 5 0 6		1 1 4 4 0 2
Last Name: M U S I C K First Name: K R I S T Y Position: B O O K K E E P E R B I Name of Affiliated Organization:	2 9 5 6 4	0	0		2 9 5 6 4
Last Name: M U S I L L I First Name: S H A R O N Position: I N T ' L O F F I C E R ' S Name of Affiliated Organization:	4 6 9 1 1	0	1 9 1 3		4 8 8 2 4
Last Name: M U T C H L E R First Name: T H O M A S Position: A S S I S T A N T M I N O R Name of Affiliated Organization:	8 7 6 7 2	7 1 3 9	5 5 3 9		1 0 0 3 5 0
Last Name: M U Z Z I C A T O First Name: A R T H U R Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	6 4 7 5		9 6 0 4 1
Totals	348291	21457	19433		389181

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: N A E S S First Name: M A R K Position: A C T U A R Y Name of Affiliated Organization:	8 9 4 3 9	7 0 9 9	2 5 9 0		9 9 1 2 8
Last Name: N A P I E R First Name: S A M U E L Position: I N T E R N Name of Affiliated Organization:	1 9 4 4 6	0	0		1 9 4 4 6
Last Name: N A S S A R First Name: C H A R L E S Position: O R G A N I Z E R Name of Affiliated Organization:	8 2 2 1 3	7 1 5 9	2 4 4 6 5		1 1 3 8 3 7
Last Name: N A U G L E First Name: R O B E R T Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	1 3 7 6 6		1 0 3 2 2 2
Last Name: N E A L First Name: C H R I S T I Position: S T E N O G R A P H E R Name of Affiliated Organization:	1 9 4 7 1	0	0		1 9 4 7 1
Totals	292846	21437	40821		355104

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position (Enter employee's job title.)					
(C) Name of Affiliated Organization (if applicable)					
Last Name N E A L First Name W I L B E R T Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 3 5 2	7 1 5 9	9 1 7 1		9 8 6 8 2
Last Name N E A L First Name W I L L I A M Position C O O R D I N A T O R Name of Affiliated Organization	8 6 5 7 2	7 1 1 9	4 7 8 3		9 8 4 7 4
Last Name N E C E First Name R O B E R T Position O R G A N I Z E R Name of Affiliated Organization	8 4 7 5 2	7 1 5 9	3 7 4 7		9 5 6 5 8
Last Name N E I L First Name D A V I D Position C I T I Z E N S H I P R E P Name of Affiliated Organization	8 2 5 0 2	7 1 1 9	2 0 6 0 5		1 1 0 2 2 6
Last Name N E L S O N First Name D E L B E R T Position T R A I N I N G R E P Name of Affiliated Organization	8 2 4 2 7	7 1 1 9	6 4 1 9		9 5 9 6 5
Totals	418605	35675	44725		499005

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: N E U M A N N First Name: M A R G A R E Position: C O M M U N I C A T I O N S T Name of Affiliated Organization:	1 2 5 7 1	0	0		1 2 5 7 1
Last Name: N E W T O N First Name: D O N A L D Position: T R A I N I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	4 6 3 3		9 4 1 4 4
Last Name: N I C H O L S O N First Name: M I C H A E L Position: A T T O R N E Y Name of Affiliated Organization:	1 0 1 4 9 2	7 1 7 9	7 7 0 4		1 1 6 3 7 5
Last Name: N O R E L L O First Name: L U C I L L E Position: B O O K K E E P E R A Name of Affiliated Organization:	4 8 2 3 6	0	0		4 8 2 3 6
Last Name: N O R F L E E T First Name: W I L L I A M Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 1 2 7 5	7 1 0 4	3 4 9 0		9 1 8 6 9
Totals	325926	21442	15827		363195

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position (Enter employee's job title.)					
(C) Name of Affiliated Organization (if applicable)					
Last Name N O S A L First Name N A D I N E Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 3 5 2	7 1 5 9	8 3 9 0		9 7 9 0 1
Last Name N O V A K First Name T I M O T H Y Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 2 7 7	7 1 7 9	1 1 1 7 4		1 0 0 6 3 0
Last Name O D O N N E L L First Name T H O M A S Position A S S I S T A N T - R E G I Name of Affiliated Organization	9 2 1 9 9	7 1 1 9	1 6 9 3 3		1 1 6 2 5 1
Last Name O A T E S First Name V A L E R I E Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 4 2 7	7 1 3 9	4 3 9 9		9 3 9 6 5
Last Name O ' B R I E N First Name S U S A N Position S E C R E T A R Y I (M A J Name of Affiliated Organization	4 4 9 7 4	0	0		4 4 9 7 4
Totals	384229	28596	40896		453721

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: O C H O C I N S K I First Name: L I N D A Position: C L E R K T Y P I S T Name of Affiliated Organization:	4 3 3 1 7	0	0		4 3 3 1 7
Last Name: O ' C O N N O R First Name: J A M E S Position: E D U C A T I O N R E P Name of Affiliated Organization:	8 2 6 0 2	7 1 5 9	1 3 5 2 2		1 0 3 2 8 3
Last Name: O ' C O N N O R First Name: S E A N Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	9 2 9 9		9 8 7 5 5
Last Name: O E T M A N First Name: D O N A L D Position: A S S I S T A N T - R E G I Name of Affiliated Organization:	9 2 3 4 9	7 1 1 9	1 8 2 5 0		1 1 7 7 1 8
Last Name: O F C A R O L E T R T O First Name: T H E Position: S E C R E T A R Y I (M A J Name of Affiliated Organization:	1 5 3 4 6	0	2 5 3		1 5 5 9 9
Totals	315891	21457	41324		378672

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: OF SANDRA PATO THE First Name: Position: ADMINISTRATIVE S Name of Affiliated Organization:	28001	0	84		28085
Last Name: OF WALTER D TO THE First Name: Position: SERVICING REP Name of Affiliated Organization:	12500	0	0		12500
Last Name: OF RIA First Name: VINCENT Position: SERVICING REP Name of Affiliated Organization:	82352	7159	6749		96260
Last Name: OKRAY First Name: KATHIE Position: STENOGRAPHER Name of Affiliated Organization:	49349	0	0		49349
Last Name: OLSON First Name: CAROL Position: SECRETARY I (MAJ Name of Affiliated Organization:	46067	0	334		46401
Totals	218269	7159	7167		232595

ORGANIZATION NAME: International Union - UAW

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: O L S O N First Name: R I C H A R D Position: A S S I S T A N T M I N O R Name of Affiliated Organization:	8 8 9 9 7	7 1 1 9	4 6 9 8		1 0 0 8 1 4
Last Name: O R L A N D O First Name: J O S E P H Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 3 4 9 6	7 1 3 9	4 2 5 9		9 4 8 9 4
Last Name: O R T A - A N E S First Name: L I D A Position: H E A L T H & S A F E T Y Name of Affiliated Organization:	8 2 4 7 7	7 1 5 9	1 2 3 0 4		1 0 1 9 4 0
Last Name: O R T I Z First Name: A B I G A I L Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 7 7	7 1 7 9	5 4 8 3		9 5 1 3 9
Last Name: O R T I Z First Name: A N T O N I O Position: A S S I S T A N T - M A J O R Name of Affiliated Organization:	9 0 0 0 7	7 1 1 9	1 2 8 6 4		1 0 9 9 9 0
Totals	427454	35715	39638		502777

ORGANIZATION NAME: **International Union - UAW**

ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary <small>(before taxes and other deductions)</small>	Allowances <small>(E)</small>	Disbursements for Official Business <small>(F)</small>	Other Disbursements <small>(G)</small>	Total <small>(H)</small>
(B) Position <small>(Enter employee's job title.)</small>	(D)	(E)	(F)	(G)	(H)
(C) Name of Affiliated Organization <small>(if applicable)</small>	(D)	(E)	(F)	(G)	(H)
Last Name: C S G O O D First Name: D E N I S E Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 5 9	6 2 5 7		9 5 8 4 3
Last Name: O W E N First Name: K R I S Position: S E R V I C I N G R E P Name of Affiliated Organization:	7 0 9 3 4	6 1 5 6	1 6 2 3 2		9 3 3 2 2
Last Name: O W E N S First Name: D E N N I S Position: S E R V I C I N G R E P Name of Affiliated Organization:	7 8 3 1 9	6 8 3 3	1 5 6 2 8		1 0 0 7 8 0
Last Name: O W E N S First Name: L A R R Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	8 3 2 9		9 7 8 4 0
Last Name: O W E N S First Name: M I L E S Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 5 0 2	7 1 1 9	1 0 8 7 7		1 0 0 4 9 8
Totals	396534	34426	57323		488283

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: O Z U C H First Name: C A R O L Y N Position: M A C H I N E O P E R A T O R Name of Affiliated Organization:	4 0 3 7 6	0	0		4 0 3 7 6
Last Name: P A D G E T T First Name: J A M E S Position: U T I L I T Y R E P A I R M A Name of Affiliated Organization:	5 1 8 1 0	0	5 7		5 1 8 6 7
Last Name: P A G A N O First Name: V I N C E N T Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	9 1 3 0		9 8 5 8 6
Last Name: P A G N U C C O First Name: C H R I S T I Position: I N T ' L O F F I C E R ' S Name of Affiliated Organization:	4 7 9 4 0	0	0		4 7 9 4 0
Last Name: P A J K O V S K I First Name: R O B E R T Position: R E S E R A C H S P E C I A L Name of Affiliated Organization:	6 4 6 1 8	5 5 8 0	4 6 6 3		7 4 8 6 1
Totals	287021	12759	13850		313630

ORGANIZATION NAME: International Union - UAW
 ENDING DATE OF PERIOD COVERED: 12/31/00

FILE NUMBER: 0 0 0 - 1 4 9

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name P A L A Z Z O L A First Name S A M Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 3 5 2	7 1 5 9	7 2 2 2		9 6 7 3 3
Last Name P A N C Z Y K First Name B O N N I E Position T E C H A I D I Name of Affiliated Organization	4 4 6 9 6	0	2 9 9		4 4 9 9 5
Last Name P A R A M O First Name R O B E R T Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 3 5 2	6 9 4 4	4 9 2 6		9 4 2 2 2
Last Name P A R E N T E First Name N I C K Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 2 7 7	7 1 7 9	6 2 6 8		9 5 7 2 4
Last Name P A R I S First Name D A V I D Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 4 2 7	7 1 1 9	6 5 0 0		9 6 0 4 6
Totals	374104	28401	25215		427720

ORGANIZATION NAME International Union - UAW
ENDING DATE OF PERIOD COVERED 12/31/00

FILE NUMBER: 0 0 0 - 1 4 9

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: P A R K E R First Name: C H R I S T I Position: B O A R D S E C R E T A R Y Name of Affiliated Organization:	4 8 3 0 6	0	2 7 7		4 8 5 8 3
Last Name: P A R K S First Name: J A M E S Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 5 9	5 1 2 6		9 4 5 6 2
Last Name: P A T T E R S O N First Name: J E R I L Y N Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 5 7 7 3	0	0		4 5 7 7 3
Last Name: P A T T O N First Name: J A M E S Position: C O O R D I N A T O R Name of Affiliated Organization:	8 6 4 9 7	7 1 3 9	6 0 2 5		9 9 6 6 1
Last Name: P A T T O N First Name: L I N D A F Position: T R A I N I N G R E P Name of Affiliated Organization:	8 5 6 0 8	7 1 3 9	4 5 7 2		9 7 3 1 9
Totals	348461	21437	16000		385898

ORGANIZATION NAME: International Union - UAW
 ENDING DATE OF PERIOD COVERED: 12/31/00

FILE NUMBER: 000-149

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name P A Y T O N First Name C A R L Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 4 2 7	7 1 3 9	6 0 9 7		9 5 6 6 3
Last Name P E C K First Name M A R G A R E Position P H O T O L A Y O U T T Y P Name of Affiliated Organization	4 7 9 6 1	0	0		4 7 9 6 1
Last Name P E D E R S E N First Name C A R L Position T R A I N I N G R E P Name of Affiliated Organization	8 2 4 2 7	7 1 3 9	8 1 9 2		9 7 7 5 8
Last Name P E D E R S E N First Name J A M E S Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 4 2 7	7 1 5 9	7 0 5 4		9 6 6 4 0
Last Name P E N N First Name W I L L I A M Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 5 0 2	7 1 1 9	5 1 6 8		9 4 7 8 9
Totals	377744	28556	26511		432811

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

FILE NUMBER: 0 0 0 - 1 4 9

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: P E N N Y First Name: B R U C E Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	1 5 0 1 7		1 0 4 4 7 3
Last Name: P E R R Y First Name: H A R O L D Position: S E C U R I T Y Name of Affiliated Organization:	5 2 5 0 7	1 5 7 5	5 4 7		5 4 6 2 9
Last Name: P E R S I N G E R First Name: V O R I T A Position: S E R V I C I N G R E P Name of Affiliated Organization:	6 2 1 9 8	5 4 7 9	4 2 6 8		7 1 9 4 5
Last Name: P E T E R First Name: K R I S T Y N Position: M I S C 1 Name of Affiliated Organization:	5 9 5 0 8	0	3 0 7 4		6 2 5 8 2
Last Name: P E T E R First Name: R O B E R T Position: S E R V I C I N G R E P Name of Affiliated Organization:	4 5 7 4 8	4 0 7 3	2 6 8 4		5 2 5 0 5
Totals	302238	18306	25590		346134

ORGANIZATION NAME: International Union - UAW
 ENDING DATE OF PERIOD COVERED: 12/31/00

FILE NUMBER: 0 0 0 - 1 4 9

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position (Enter employee's job title.)					
(C) Name of Affiliated Organization (if applicable)					
Last Name: P E T E R S First Name: J O S E P H Position: A S S I S T A N T - R E G I Name of Affiliated Organization:	9 2 1 2 4	7 1 7 9	4 4 7 4		1 0 3 7 7 7
Last Name: P E T E R S O N First Name: W I L L I A M Position: A S S I S T A N T D E P A R T Name of Affiliated Organization:	8 9 8 5 7	7 1 5 9	7 2 2 2		1 0 4 2 3 8
Last Name: P E T R O First Name: D O N A L D Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	5 9 3 6		9 5 5 0 2
Last Name: P F A H L E R First Name: G E O R G E Position: O R G A N I Z E R Name of Affiliated Organization:	1 1 3 4 7 7	7 3 6 1	1 2 8 2 2		1 3 3 6 6 0
Last Name: P H I L L I P S First Name: L A U R I N D Position: T E C H A I D I Name of Affiliated Organization:	5 0 6 2 8	0	0		5 0 6 2 8
Totals	428513	28838	30454		487805

ORGANIZATION NAME **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

FILE NUMBER: 0 0 0 - 1 4 9

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: P H I P P S First Name: P A M E L A Position: O R G A N I Z E R Name of Affiliated Organization:	8 6 0 6 1	7 1 9 9	2 5 5 9		9 5 8 1 9
Last Name: P I C C I N I First Name: P E T E R Position: T R A I N I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	8 9 7 6		9 8 5 4 2
Last Name: P I C K E N S First Name: P H Y E L L I S Position: C L E R K T Y P I S T Name of Affiliated Organization:	4 5 2 8 3	0	9 3 7		4 6 2 2 0
Last Name: P I C K E T T First Name: D A V I D Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	7 5 0 6		9 6 9 6 2
Last Name: P I E R C E First Name: R O B E R T Position: S E C U R I T Y Name of Affiliated Organization:	6 2 1 9 0	3 6 9 0	1 5 5 2		6 7 4 3 2
Totals	358238	25207	21530		404975

ORGANIZATION NAME:	International Union - UAW
ENDING DATE OF PERIOD COVERED:	12/31/00

FILE NUMBER: 0 0 0 - 1 4 9

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position (Enter employee's job title.)					
(C) Name of Affiliated Organization (if applicable)					
Last Name: P I E T T E First Name: K Y L I E Position: I N T E R N Name of Affiliated Organization:	2 7 0 7 5	0	8 4 0		2 7 9 1 5
Last Name: P I N D E R First Name: A U B R E Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 1 4 8 4	4 2 7 5	6 2 0 4		9 1 9 6 3
Last Name: P I T T M A N First Name: H A R R Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 7 9	9 3 8 9		9 8 9 2 0
Last Name: P I V O V A R First Name: S H E R R I L Position: B O A R D S E C R E T A R Y Name of Affiliated Organization:	4 7 3 8 6	0	0		4 7 3 8 6
Last Name: P L A C K E First Name: P A T R I C I Position: I N T ' L O F F I C E R ' S Name of Affiliated Organization:	5 1 8 8 8	0	4 7 3 7		5 6 6 2 5
Totals	290185	11454	21170		322809

ORGANIZATION NAME: International Union - UAW

FILE NUMBER: 0 0 0 - 1 4 9

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: P L E S K O First Name: R O B E R T Position: S E R V I C I N G R E P Name of Affiliated Organization:	1 1 6 8 1 7	6 0 2 0	5 0 7 6		1 2 7 9 1 3
Last Name: P L O C K First Name: R A M O N Position: A S S I S T A N T D E P A R T Name of Affiliated Organization:	8 6 5 7 2	7 1 1 9	4 8 7 1		9 8 5 6 2
Last Name: P O D E S Z W A First Name: L U A N N E Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 5 7 6 4	0	1 3 3		4 5 8 9 7
Last Name: P O E First Name: M I R I A M Position: A S S I S T A N T - R E G I Name of Affiliated Organization:	9 2 2 7 4	7 1 1 9	1 2 8 8 7		1 1 2 2 8 0
Last Name: P C H O R E N C E First Name: M I C H A E L Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 3 9	8 9 5 8		9 8 3 7 4
Totals	423704	27397	31925		483026

ORGANIZATION NAME: International Union - UAW
 ENDING DATE OF PERIOD COVERED: 12/31/00

FILE NUMBER: 000-149

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position (Enter employee's job title.)					
(C) Name of Affiliated Organization (if applicable)					
Last Name P O K E R W I N S K I First Name R O B E R T Position A S S I S T A N T D E P A R T Name of Affiliated Organization	5 6 8 3 9	4 1 8 4	4 0 4 4		6 5 0 6 7
Last Name P O L I N G First Name S H I R L E Y Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 2 7 7	7 0 5 4	1 0 5 2 1		9 9 8 5 2
Last Name P O N T I A First Name B R U C E Position S E R V I C I N G R E P Name of Affiliated Organization	6 7 9 8 8	5 8 8 5	2 0 6 7 1		9 4 5 4 4
Last Name P O O L E First Name L A W R E N C Position S E R V I C I N G R E P Name of Affiliated Organization	8 0 8 4 0	5 0 6 2	3 9 0 0		8 9 8 0 2
Last Name P O R T E R First Name K I M B E R L Position S E R V I C I N G R E P Name of Affiliated Organization	5 9 3 9 8	5 3 4 4	2 8 2 1		6 7 5 6 3
Totals	347342	27529	41957		416828

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: P G R T W O O D First Name: J U A N I T A Position: C L E R K T Y P I S T Name of Affiliated Organization:	4 4 7 6 2	0	0		4 4 7 6 2
Last Name: P O S E Y First Name: J A M E S Position: O R G A N I Z E R Name of Affiliated Organization:	8 3 3 2 9	7 1 7 9	1 1 3 5 8		1 0 1 8 6 6
Last Name: P O W E L L - F I E L D First Name: E M M A Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	6 7 4 0	3 5 8 6		9 2 7 5 3
Last Name: P C Z Z I First Name: R O B E R T Position: D E P A R T M E N T H E A D Name of Affiliated Organization:	9 3 3 8 6	7 1 1 9	3 7 5 6		1 0 4 2 6 1
Last Name: P R A T H E R First Name: K A T H L E E Position: T E C H A I D I Name of Affiliated Organization:	4 4 9 0 4	0	8 4		4 4 9 8 8
Totals	349808	21038	18784		388630

ORGANIZATION NAME: International Union - UAW
 ENDING DATE OF PERIOD COVERED: 12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: P R E I S S First Name: J A C Q U E L Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 6 1 8 3	0	0		4 6 1 8 3
Last Name: P R E S T O N First Name: R O G E R Position: S E R V I C I N G R E P Name of Affiliated Organization:	4 0 5 8 8	6 9 6	1 4 0 4		4 2 6 8 8
Last Name: P R I C E First Name: A N T H O N Y Position: S Y S T E M S A N A L Y S T Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	3 3 4 5		9 2 8 0 1
Last Name: P R I C E First Name: C Y N T H I A Position: B O O K K E E P E R A Name of Affiliated Organization:	4 6 4 7 4	0	0		4 6 4 7 4
Last Name: P R I C E First Name: B R I A N Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 0 2 5	6 4 1 3		9 5 8 6 5
Totals	297949	14900	11162		324011

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: P R I E S T First Name: B R I A N Position: L E A D E R - S T O C K R O Name of Affiliated Organization:	4 8 2 5 9	0	9 7 7		4 9 2 3 6
Last Name: P R I T C H A R D First Name: E L V A Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 6 1 8 6	0	0		4 6 1 8 6
Last Name: P R O T U L I S First Name: S T E P H E N Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 1 6 2	7 0 9 9	3 9		1 5 3 0 0
Last Name: P R Y O R First Name: B R E N D A Position: S E R V I C I N G R E P Name of Affiliated Organization:	7 8 3 1 9	7 0 2 7	7 9 4 3		9 3 2 8 9
Last Name: P R Z Y B Y S Z First Name: A D R I E N N Position: B O O K K E E P E R B I Name of Affiliated Organization:	4 2 9 5 7	0	0		4 2 9 5 7
Totals	223883	14126	8959		246958

ORGANIZATION NAME: International Union - UAW
 ENDING DATE OF PERIOD COVERED: 12/31/00

FILE NUMBER: 000-149

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: P R Z Y D Z I A L First Name: A L A N Position: S E R V I C I N G R E P Name of Affiliated Organization:	7 3 8 9 0	6 4 2 7	4 4 0 2		8 4 7 1 9
Last Name: Q U I C K First Name: G A R Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 5 5 3 3	7 1 1 9	9 6 1 6		1 0 2 2 6 8
Last Name: Q U I C K First Name: P A U L Position: A D M I N I S T R A T I V E A Name of Affiliated Organization:	9 1 3 9 7	7 1 5 9	8 7 8 3		1 0 7 3 3 9
Last Name: Q U I N N First Name: G E R A L D Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	7 6 1 1		9 7 0 6 7
Last Name: Q U I N T A N A First Name: R O S E Position: E D U C A T I O N R E P Name of Affiliated Organization:	8 2 6 5 2	7 0 5 9	6 3 6 2		9 6 0 7 3
Totals	415749	34943	36774		487466

ORGANIZATION NAME:	International Union - UAW
ENDING DATE OF PERIOD COVERED:	12/31/00

FILE NUMBER: 0 0 0 - 1 4 9

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
<small>Last Name</small> R A D L O F F <small>First Name</small> S H E I L A <small>Position</small> E D U C A T I O N R E P <small>Name of Affiliated Organization</small>	8 2 2 7 7	7 1 7 9	1 1 2 7 6		1 0 0 7 3 2
<small>Last Name</small> R A F F A <small>First Name</small> N A N C E <small>Position</small> H E A T I N G / A I R C O N D <small>Name of Affiliated Organization</small>	6 7 4 9 0	0	0		6 7 4 9 0
<small>Last Name</small> R A H K E <small>First Name</small> B A R B A R A <small>Position</small> A S S I S T A N T - M A J O <small>Name of Affiliated Organization</small>	9 0 0 8 2	7 1 3 9	6 2 2 5		1 0 3 4 4 6
<small>Last Name</small> R A I C H <small>First Name</small> S T E V E <small>Position</small> S E R V I C I N G R E P <small>Name of Affiliated Organization</small>	8 2 2 5 8	7 1 7 9	5 0 7 4		9 4 5 1 1
<small>Last Name</small> R A N D <small>First Name</small> J U L I E <small>Position</small> I N T ' L O F F I C E R ' S <small>Name of Affiliated Organization</small>	6 0 3 3 9	0	5 2 1		6 0 8 6 0
Totals	382446	21497	23096		427039

ORGANIZATION NAME: International Union - UAW
 ENDING DATE OF PERIOD COVERED: 12/31/00

SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: R A N I C H First Name: E J O A N Position: M U L T I L I T H O P E R A T Name of Affiliated Organization:	4 6 0 3 0	0	0		4 6 0 3 0
Last Name: R A S M U S S E N First Name: W A N D A Position: S T E N O G R A P H E R Name of Affiliated Organization:	3 0 6 1 1	0	0		3 0 6 1 1
Last Name: R A S P B E R R Y First Name: F R E D R I C Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 2 9	7 1 7 9	8 4 1 0		9 7 8 1 8
Last Name: R A T Z L O F F First Name: J A N E T Position: T E C H A I D I Name of Affiliated Organization:	4 5 9 3 6	0	0		4 5 9 3 6
Last Name: R A W L I N G S First Name: M E I M A R Y J O Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	4 5 5 9		9 4 0 7 0
Totals	287158	14338	12969		314465

ORGANIZATION NAME:	International Union - UAW
ENDING DATE OF PERIOD COVERED:	12/31/00

FILE NUMBER: 0 0 0 - 1 4 9

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: R A Y First Name: C L A Y T O N Position: S E C U R I T Y Name of Affiliated Organization:	6 4 3 1 9	2 9 9 8	1 3 6 0		6 8 6 7 7
Last Name: R A Y M O N D First Name: K E I T H Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	3 6 5 6		9 3 1 1 2
Last Name: R E A S O N S First Name: S T A N L E Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	8 9 7 0		9 8 4 2 6
Last Name: R E E D E R First Name: L I N D A Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 6 0 3 1	0	0		4 6 0 3 1
Last Name: R E E S E First Name: R E B E C C A Position: G E N E R A L A - M A I N Name of Affiliated Organization:	4 4 7 3 0	0	0		4 4 7 3 0
Totals	319634	17356	13986		350976

ORGANIZATION NAME: International Union - UAW
 ENDING DATE OF PERIOD COVERED: 12/31/00

FILE NUMBER: 000-149

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: R E F F I T T First Name: B O N N I E Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 2 4	7 1 7 9	8 2 0 3		9 7 6 0 6
Last Name: R E I C H W A G E First Name: R O B I N Position: S E C R E T A R Y I I (M I Name of Affiliated Organization:	4 5 5 0 1	0	3 7 6		4 5 8 7 7
Last Name: R E I D First Name: B A X T E R Position: D E P A R T M E N T H E A D Name of Affiliated Organization:	8 6 5 7 2	4 0 7 5	1 6 0 2		9 2 2 4 9
Last Name: R E I D First Name: L A R R Y Position: O R G A N I Z E R Name of Affiliated Organization:	3 6 1 6 1	0	0		3 6 1 6 1
Last Name: R E I D T First Name: R O B E R T Position: D E P A R T M E N T H E A D Name of Affiliated Organization:	8 7 6 7 2	7 1 5 9	2 2 3 5		9 7 0 6 6
Totals	338130	18413	12416		368959

ORGANIZATION NAME:	International Union - UAW
ENDING DATE OF PERIOD COVERED:	12/31/00

FILE NUMBER: 0 0 0 - 1 4 9

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name R E I L L Y First Name J O S E P H Position A D M I N I S T R A T I V E A Name of Affiliated Organization	6 7 0 4 5	4 2 5 5	5 0 0 4		7 6 3 0 4
Last Name R E I L L Y First Name W I L L I A M Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 2 7 7	7 0 0 5	3 5 5 0		9 2 8 3 2
Last Name R E N K I E W I C Z First Name C Y N T H I A Position L A W C L E R K Name of Affiliated Organization	2 5 9 3 9	0	9 1		2 6 0 3 0
Last Name R E S T I V O First Name M I C H E L L Position T E C H A I D I Name of Affiliated Organization	4 8 5 0 0	0	0		4 8 5 0 0
Last Name R E U T H E R First Name A L A N Position L E G I S L A T I V E D I R E Name of Affiliated Organization	1 1 6 6 3 5	7 1 1 9	7 2 1 2		1 3 0 9 6 6
Totals	340396	18379	15857		374632

ORGANIZATION NAME:	International Union - UAW
ENDING DATE OF PERIOD COVERED:	12/31/00

FILE NUMBER: 0 0 0 - 1 4 9

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name R E Y E S First Name A R T U R O Position S K I L L E D T R A D E S R Name of Affiliated Organization	8 2 4 2 7	7 1 3 9	8 4 3 9		9 8 0 0 5
Last Name R E Y N O L D S First Name C A R O L Position C L E R K T Y P I S T Name of Affiliated Organization	4 3 8 3 5	0	0		4 3 8 3 5
Last Name R E Y N O L D S First Name W A Y N E Position S E R V I C I N G R E P Name of Affiliated Organization	4 5 7 4 4	4 0 7 3	3 9 0 6		5 3 7 2 3
Last Name R H O D E S First Name J O H N Position S E R V I C I N G R E P Name of Affiliated Organization	4 5 7 4 8	4 0 5 3	5 5 1 4		5 5 3 1 5
Last Name R I C H A R D S O N First Name T O M M Y Position A S S I S T A N T M I N O R Name of Affiliated Organization	8 6 4 9 7	7 1 3 9	8 3 4 9		1 0 1 9 8 5
Totals	304251	22404	26208		352863

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: R I C H T E R First Name: M A R I E Position: B O O K K E E P E R Name of Affiliated Organization: B I	5 0 1 5 4	0	0		5 0 1 5 4
Last Name: R I D N E R First Name: C A R O L Position: A D M I N I S T R A T I V E Name of Affiliated Organization: S	4 7 4 7 7	0	0		4 7 4 7 7
Last Name: R I G G S First Name: M I C H A E L Position: A S S I S T A N T Name of Affiliated Organization: M I N O R	8 6 4 2 2	7 1 5 9	7 9 8 5		1 0 1 5 6 6
Last Name: R I N G M A N First Name: R I C K Position: O R G A N I Z E R Name of Affiliated Organization:	6 9 4 6 1	6 0 2 1	8 6 7 0		8 4 1 5 2
Last Name: R I O R D A N First Name: M A R Y Position: A D M I N I S T R A T I V E Name of Affiliated Organization: A	9 4 6 2 2	7 1 5 9	2 1 4 1 2		1 2 3 1 9 3
Totals	348136	20339	38067		406542

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name R I O U X First Name J O S E P H Position O R G A N I Z E R Name of Affiliated Organization	8 2 2 0 2	7 1 9 9	8 0 4 9		9 7 4 5 0
Last Name R I S E R First Name G A R Y Position T R A I N I N G R E P Name of Affiliated Organization	8 2 3 5 2	7 1 5 9	4 0 0 4		9 3 5 1 5
Last Name R I V E R A First Name M A R I T Z A Position C L E R K T Y P I S T Name of Affiliated Organization	4 4 4 3 8	0	0		4 4 4 3 8
Last Name R O B E R T S First Name A N G E L A Position S T E N O G R A P H E R Name of Affiliated Organization	4 5 1 6 0	0	0		4 5 1 6 0
Last Name R O B E R T S First Name C H R I S T I Position A D M I N I S T R A T I V E S Name of Affiliated Organization	4 4 7 1 6	0	0		4 4 7 1 6
Totals	298868	14358	12053		325279

ORGANIZATION NAME:	International Union - UAW
ENDING DATE OF PERIOD COVERED:	12/31/00

FILE NUMBER: 0 0 0 - 1 4 9

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: R O B E R T S First Name: D A N I E L Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	6 6 1 8		9 6 0 7 4
Last Name: R O B E R T S First Name: H E R S H E L Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	3 1 8 5		9 2 7 5 1
Last Name: R O B E R T S First Name: J A Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	1 1 4 6 6		1 0 0 9 7 7
Last Name: R O B E R T S First Name: N A N C Y Position: L E G A L S E C R E T A R Y Name of Affiliated Organization:	4 7 1 5 5	0	1 2 9 9		4 8 4 5 4
Last Name: R O B E R T S First Name: R U D Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 9 9	9 3 5 0		9 8 8 2 6
Totals	376488	28676	31918		437082

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position (Enter employee's job title.)					
(C) Name of Affiliated Organization (if applicable)					
Last Name: R O B E R T S O N First Name: W I N I F R E Position: L E G A L S E C R E T A R Y Name of Affiliated Organization:	4 5 0 8 2	0	0		4 5 0 8 2
Last Name: R O B I N S O N First Name: D E B R A Position: B O O K K E E P E R A Name of Affiliated Organization:	4 7 6 2 2	0	0		4 7 6 2 2
Last Name: R O B I N S O N First Name: E D W A R D Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	1 0 5 8 1		1 0 0 0 3 7
Last Name: R O B I N S O N First Name: M A R I A Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 6 6 4 4	0	7 0 0		4 7 3 4 4
Last Name: R O B I N S O N First Name: M A R Y Position: T E C H A I D I Name of Affiliated Organization:	4 6 9 5 7	0	7 0 6		4 7 6 6 3
Totals	268582	7179	11987		287748

ORGANIZATION NAME: **International Union - UAW**

ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: R O B I N S O N First Name: T H O M A S Position: T R A I N I N G R E P Name of Affiliated Organization:	3 0 0 1 6	1 8 5 6	2 2 2 8		3 4 1 0 0
Last Name: R O D G E R S First Name: D I A N A Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	4 0 3 2		9 3 4 8 8
Last Name: R O D G E R S First Name: M A R Y E L Position: A S S I S T A N T D E P A R T Name of Affiliated Organization:	2 8 1 1 0	0	5 4 7		2 8 6 5 7
Last Name: R O D O W S K Y First Name: S H A R O N Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 5 4 5 5	0	0		4 5 4 5 5
Last Name: R O G E R S First Name: C A R O L E Position: T E C H A I D I Name of Affiliated Organization:	4 5 1 4 7	0	0		4 5 1 4 7
Totals	231005	9035	6897		246847

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: R O G E R S First Name: N A N C Y Position: O R G A N I Z E R Name of Affiliated Organization:	8 2 4 2 7	5 6 5 5	1 1 4 4 6		9 9 5 2 8
Last Name: R O M A N I K First Name: L I N D A Position: C I T I Z E N S H I P R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 7 9	8 4 9 6		9 8 0 2 7
Last Name: R O M E R O First Name: M A N U E L Position: A U D I T O R Name of Affiliated Organization:	1 9 8 3 0	1 6 9 4	1 5 4 2		2 3 0 6 6
Last Name: R O N N I N G First Name: T H O M A S Position: A S S I S T A N T - M A J O R Name of Affiliated Organization:	8 7 6 6 5	7 1 1 9	5 0 4 8		9 9 8 3 2
Last Name: R O S A D O First Name: M I L T O N Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 9 9	9 3 0 2		9 8 7 7 8
Totals	354551	28846	35834		419231

ORGANIZATION NAME International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: R O S E First Name: P H I L L I P Position: A S S I S T A N T M I N O R Name of Affiliated Organization:	8 4 1 0 4	7 1 5 9	6 0 7 6		9 7 3 3 9
Last Name: R O S E B R U G H First Name: D E B R A Position: C L E R K T Y P I S T Name of Affiliated Organization:	4 3 8 3 9	0	7 4 8		4 4 5 8 7
Last Name: R O S S First Name: K I M B E R L Position: C L E R K T Y P I S T Name of Affiliated Organization:	4 4 7 3 8	0	3 2		4 4 7 7 0
Last Name: R O S S I First Name: C H A R L O T Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 1 9	9 4 2 5		9 8 9 7 1
Last Name: R O T H First Name: R O B E R T Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 0 3 9	9 9 4 8		9 9 4 1 4
Totals	337535	21317	26229		385081

ORGANIZATION NAME: International Union - UAW
 ENDING DATE OF PERIOD COVERED: 12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: R O U L E A U First Name: M A R Y Position: L E G I S L A T I V E R E P Name of Affiliated Organization:	8 8 2 3 3	7 1 5 9	7 8 8 1		1 0 3 2 7 3
Last Name: R O W L A N D First Name: J O Y C E Position: B O A R D S E C R E T A R Y Name of Affiliated Organization:	4 7 7 8 8	0	3 4		4 7 8 2 2
Last Name: R U B L E First Name: J E R R Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	1 5 6 6 2		1 0 5 1 7 3
Last Name: R U B L E First Name: T E R R Y Position: B O O K K E E P E R B I Name of Affiliated Organization:	4 5 7 6 4	0	0		4 5 7 6 4
Last Name: R U C K E R First Name: J O H N Position: A D M I N I S T R A T I V E A Name of Affiliated Organization:	9 4 6 2 2	7 1 5 9	1 3 7 4 8		1 1 5 5 2 9
Totals	358759	21477	37325		417561

ORGANIZATION NAME:	International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: R U D Z I N S K I First Name: J O H N Position: S E R V I C I N G R E P Name of Affiliated Organization:	7 8 3 1 9	6 8 3 3	8 1 1 3		9 3 2 6 5
Last Name: R U I Z First Name: R A Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 5 6 7 7	7 1 3 9	7 3 0 5		1 0 0 1 2 1
Last Name: R U P L E First Name: R A N D Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 5 8	7 1 7 9	8 8 2 8		9 8 2 6 5
Last Name: R U P P E R T First Name: R I C H A R D Position: A S S I S T A N T - M A J O Name of Affiliated Organization:	8 9 5 0 9	7 1 9 9	6 9 2 6		1 0 3 6 3 4
Last Name: R U S H L A U First Name: G O R D O N Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 1 2 7 5	7 1 0 4	3 1 6 9		9 1 5 4 8
Totals	417038	35454	34341		486833

ORGANIZATION NAME: International Union - UAW
 ENDING DATE OF PERIOD COVERED: 12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position (Enter employee's job title.)					
(C) Name of Affiliated Organization (if applicable)					
Last Name: R U S S A W First Name: E S T E R V E Position: S E R V I C I N G R E P Name of Affiliated Organization:	6 2 1 9 8	5 4 7 9	8 2 5 6		7 5 9 3 3
Last Name: R U Y L E First Name: P A T R I C I Position: S T E N O G R A P H E R Name of Affiliated Organization:	1 3 1 2 8	0	0		1 3 1 2 8
Last Name: R Y P K O W S K I First Name: J O S E P H Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	8 7 8 5		9 8 2 9 6
Last Name: R Y S First Name: J A C Q U E L Position: S E C R E T A R Y I (M A J Name of Affiliated Organization:	4 5 9 0 1	0	4 6 8		4 6 3 6 9
Last Name: S A F F O L D First Name: D E A N N E Position: B O O K K E E P E R B I Name of Affiliated Organization:	3 6 8 6 0	0	0		3 6 8 6 0
Totals	240439	12638	17509		270586

ORGANIZATION NAME:	International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: S A G G A U First Name: M I C H A E L Position: A T T O R N E Y Name of Affiliated Organization:	1 0 1 4 1 7	7 1 7 9	3 5 4 4		1 1 2 1 4 0
Last Name: S A K S E W S K I First Name: D A V I D Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	1 0 3 6 3		9 9 8 1 9
Last Name: S A M B I A G I O First Name: M E L I S S A Position: C L E R K T Y P I S T Name of Affiliated Organization:	3 6 2 7 0	0	2 3 9		3 6 5 0 9
Last Name: S A N B O R N First Name: J A M E S Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 5 6 9 2	7 1 3 9	6 2 8 6		9 9 1 1 7
Last Name: S A N C H E Z First Name: P A U L Position: R E T I R E E R E P Name of Affiliated Organization:	3 7 5 0 0	6 9 6	2 5 2 4		4 0 7 2 0
Totals	343156	22193	22956		388305

ORGANIZATION NAME: International Union - UAW
 ENDING DATE OF PERIOD COVERED: 12/31/00

FILE NUMBER: 0 0 0 - 1 4 9

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: S A N D E R S First Name: M A T T Y E Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 4 3 2 2	0	2 6 3		4 4 5 8 5
Last Name: S A N G S T E R First Name: J O H N Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 5 0 2	7 1 1 9	1 7 6 6 5		1 0 7 2 8 6
Last Name: S A N G S T E R First Name: S H I R L E Y Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 4 6 1 9	0	0		4 4 6 1 9
Last Name: S A N T A G A T I First Name: G E N E V I E Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 5 0 0 1	0	0		4 5 0 0 1
Last Name: S A N T I M A N First Name: K E L L Y Position: C L E R K T Y P I S T Name of Affiliated Organization:	4 8 6 9 4	0	0		4 8 6 9 4
Totals	265138	7119	17928		290185

ORGANIZATION NAME	International Union - UAW
ENDING DATE OF PERIOD COVERED	12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: S A N T O S First Name: J O S E P H Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	1 2 1 3 5		1 0 1 5 9 1
Last Name: S A N T O S First Name: L A R R Y Position: T R A I N I N G R E P Name of Affiliated Organization:	8 2 2 7 7	6 1 4 6	3 4 6 9		9 1 8 9 2
Last Name: S A R K E S I A N First Name: D O N A L D Position: A S S I S T A N T M I N O R Name of Affiliated Organization:	8 4 2 5 6	7 1 5 9	8 3 9 7		9 9 8 1 2
Last Name: S A R K I S S I A N First Name: S U S A N Position: A D M I N I S T R A T I V E S Name of Affiliated Organization:	3 8 5 2 8	0	0		3 8 5 2 8
Last Name: S A R T I N First Name: J A N E T Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 7 8 2 6	0	0		4 7 8 2 6
Totals	335164	20484	24001		379649

ORGANIZATION NAME: International Union - UAW
 ENDING DATE OF PERIOD COVERED: 12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name S A U L S B E R R Y First Name D E L O R E S Position O R G A N I Z E R Name of Affiliated Organization	6 9 4 6 1	6 0 2 1	2 5 5 6		7 8 0 3 8
Last Name S A V A L L E First Name F R A N K Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 2 7 7	7 1 7 9	8 2 3 0		9 7 6 8 6
Last Name S A W Y E R First Name J O E L Position T R A I N I N G R E P Name of Affiliated Organization	4 8 9 7 7	0	0		4 8 9 7 7
Last Name S C H A F F N E R First Name W I L L I A M Position A S S I S T A N T D E P A R T Name of Affiliated Organization	8 8 1 2 8	7 1 3 9	4 3 7 5		9 9 6 4 2
Last Name S C H I F F E R First Name N A N C Y Position A T T O R N E Y Name of Affiliated Organization	6 6 5 2 7	3 0 8 5	2 1 3 6		7 1 7 4 8
Totals	355370	23424	17297		396091

ORGANIZATION NAME	International Union - UAW
ENDING DATE OF PERIOD COVERED:	12/31/00

FILE NUMBER: 000-149

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: S C H I P P A N I First Name: M I C H A E L Position: R E S E R A C H S P E C I A L Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	7 5 4 5		9 7 1 1 1
Last Name: S C H N E L L First Name: T I M O T H Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 1 5 9 0	7 1 9 9	5 6 8 0		9 4 4 6 9
Last Name: S C H O L L E N B E R G First Name: N O V A Position: T E C H A I D I Name of Affiliated Organization:	4 6 8 5 0	0	2 0 5		4 7 0 5 5
Last Name: S C H U L E R First Name: J A M E S Position: S E R V I C I N G R E P Name of Affiliated Organization:	7 0 5 7 8	3 0 8 5	7 6 1 6		8 1 2 7 9
Last Name: S C H U L T Z First Name: L E W I S Position: T R A I N I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 5 9	7 1 7 5		9 6 6 1 1
Totals	363722	24582	28221		416525

ORGANIZATION NAME: International Union - UAW
 ENDING DATE OF PERIOD COVERED: 12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: S C H U L Z First Name: J A N E T Position: O R G A N I Z E R Name of Affiliated Organization:	6 6 5 1 0	5 7 5 0	1 4 1 5 8		8 6 4 1 8
Last Name: S C H U L Z First Name: K R I S T I E Position: L E G A L S E C R E T A R Y Name of Affiliated Organization:	4 5 3 5 8	0	0		4 5 3 5 8
Last Name: S C H U T T E First Name: A N N E Position: C L E R K T Y P I S T Name of Affiliated Organization:	2 6 0 6 9	0	0		2 6 0 6 9
Last Name: S C H U T T E First Name: R E N E Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	1 2 4 9 6		1 0 1 9 5 2
Last Name: S C H W A R T Z First Name: L E O N A R D Position: A S S I S T A N T M I N O R Name of Affiliated Organization:	8 6 0 5 2	7 1 5 9	6 8 4 8		1 0 0 0 5 9
Totals	306266	20088	33502		359856

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: S C H W E N N First Name: L O R E T T A Position: C L E R K T Y P I S T Name of Affiliated Organization:	4 3 5 3 2	0	5 6 3		4 4 0 9 5
Last Name: S C I O T T I First Name: R O B E R T Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 8 6 4 2	7 1 5 9	5 1 6 6		1 0 0 9 6 7
Last Name: S C O T T First Name: B A R B A R A Position: C O O R D I N A T O R Name of Affiliated Organization:	8 6 4 9 7	7 1 3 9	6 1 6 5		9 9 8 0 1
Last Name: S C O T T First Name: K E N N I T H Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	4 0 8 9		9 3 5 4 5
Last Name: S C O T T First Name: N E D Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	9 5 3 2		9 9 0 4 3
Totals	383300	28636	25515		437451

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position (Enter employee's job title.)					
(C) Name of Affiliated Organization (if applicable)					
Last Name: S C O T T First Name: R O S E A N N Position: B O O K K E E P E R B I Name of Affiliated Organization:	4 5 4 0 0	0	0		4 5 4 0 0
Last Name: S C R A S E First Name: W I L L I A M Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	7 1 5 3		9 6 6 0 9
Last Name: S C R U S E First Name: B E T T Y J Position: B O O K K E E P E R B I Name of Affiliated Organization:	4 6 9 7 8	0	0		4 6 9 7 8
Last Name: S E E L Y First Name: T R A C I Position: C L E R K T Y P I S T Name of Affiliated Organization:	3 7 2 6 0	0	0		3 7 2 6 0
Last Name: S E L N E S S First Name: J A N I C E Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 6 3 6 8	0	0		4 6 3 6 8
Totals	258283	7179	7153		272615

ORGANIZATION NAME:	International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: SELVIG First Name: ROGER Position: SERVICING REP Name of Affiliated Organization:	8 2 4 2 7	7 0 7 9	4 8 7 6		9 4 3 8 2
Last Name: SENC I First Name: CHARLES Position: CITIZENSHIP REP Name of Affiliated Organization:	4 0 5 8 8	6 9 6	4 5 0		4 1 7 3 4
Last Name: SETTLES First Name: JAMES Position: SERVICING REP Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	6 7 5 0		9 6 3 1 6
Last Name: SHATNEY First Name: JUDY Position: EDUCATION REP Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	1 0 1 7 2		9 9 7 3 8
Last Name: SHELL First Name: MATTHEW Position: AUDITOR Name of Affiliated Organization:	8 4 7 7 7	7 1 7 9	1 0 5 9 4		1 0 2 5 5 0
Totals	372646	29232	32842		434720

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name S H E L T O N First Name E R N E S T Position S E R V I C I N G R E P Name of Affiliated Organization	4 7 9 9 6	1 7 5 6	1 3 8 9		5 1 1 4 1
Last Name S H E L T O N First Name H A R O L D Position C O O R D I N A T O R Name of Affiliated Organization	8 6 4 2 2	7 1 5 9	1 1 1 8 8		1 0 4 7 6 9
Last Name S H E L T O N First Name S T E V E N Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 2 7 7	7 1 7 9	6 1 1 3		9 5 5 6 9
Last Name S H E P H E R D First Name G A R Y Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 2 7 7	7 1 7 9	9 2 7 3		9 8 7 2 9
Last Name S H E P P A R D First Name S A M U E L Position D E P A R T M E N T H E A D Name of Affiliated Organization	8 6 6 4 7	7 0 3 6	4 9 2 8		9 8 6 1 1
Totals	385619	30309	32891		448819

ORGANIZATION NAME:	International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name S H E R C K First Name N O R M A N Position S E R V I C I N G R E P Name of Affiliated Organization	5 3 2 7 1	2 3 6 0	1 8 8 1		5 7 5 1 2
Last Name S H E R R I C K First Name D A N Position A T T O R N E Y Name of Affiliated Organization	1 1 4 8 3 4	7 1 7 9	6 4 4 9		1 2 8 4 6 2
Last Name S H I E L D S First Name B E R N I C E Position T R A I N I N G R E P Name of Affiliated Organization	8 2 4 2 7	7 1 9 9	5 2 7 3		9 4 8 9 9
Last Name S H I F F L E T T First Name D I A N E Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 2 7 7	7 1 7 9	4 5 8 8		9 4 0 4 4
Last Name S H I N G L E R First Name B A R B A R A Position B O A R D S E C R E T A R Y Name of Affiliated Organization	4 7 1 4 2	0	0		4 7 1 4 2
Totals	379951	23917	18191		422059

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: S H O E M A K E R First Name: D A V I D Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	7 8 3 0		9 7 3 9 6
Last Name: S H O E M A K E R First Name: M I C H A E L Position: S Y S T E M S A N A L Y S T Name of Affiliated Organization:	8 3 3 5 2	7 1 5 9	3 4 7 2		9 3 9 8 3
Last Name: S H O E M A K E R First Name: S U S A N Position: S E C R E T A R Y I (M A J Name of Affiliated Organization:	4 7 9 9 8	0	5 6 3		4 8 5 6 1
Last Name: S H R A D E R First Name: L A R R Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	9 6 0 2		9 9 0 5 8
Last Name: S H R O A T First Name: J A M E S Position: A S S I S T A N T - M A J O Name of Affiliated Organization:	8 8 0 4 0	7 1 3 9	9 2 4 0		1 0 4 4 1 9
Totals	384094	28616	30707		443417

ORGANIZATION NAME	International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: S I E G N E R First Name: D O R I S Position: A S S I S T A N T D E P A R T Name of Affiliated Organization:	8 9 7 8 2	7 1 7 9	2 0 6 0		9 9 0 2 1
Last Name: S I M M O N S First Name: B L A I R Position: A T T O R N E Y Name of Affiliated Organization:	7 8 3 7 8	7 1 7 9	5 8 1 8		9 1 3 7 5
Last Name: S I M P S O N First Name: D E B O R A H Position: T E C H A I D I Name of Affiliated Organization:	4 4 7 9 4	0	0		4 4 7 9 4
Last Name: S I N D L I N G E R First Name: R I C H A R D Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	6 9 7 6		9 6 5 4 2
Last Name: S I N G L E T O N First Name: M O R R I S Position: A S S I S T A N T - R E G I Name of Affiliated Organization:	9 2 2 7 4	7 1 3 9	1 2 5 0 7		1 1 1 9 2 0
Totals	387655	28636	27361		443652

ORGANIZATION NAME:	International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: S I N N I First Name: J O S E P H Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 3 9 8 2	7 1 7 9	8 6 2 3		9 9 7 8 4
Last Name: S I Z E M O R E First Name: J O A N N Position: S E C R E T A R Y I (M A J Name of Affiliated Organization:	4 7 2 4 3	0	1 6 5 1		4 8 8 9 4
Last Name: S K O T N E S First Name: K E I T H Position: E D U C A T I O N R E P Name of Affiliated Organization:	8 2 5 0 2	7 1 3 9	1 1 9 5 9		1 0 1 6 0 0
Last Name: S K R O B E First Name: P A T R I C I Position: W O M E N S A F F A I R S R Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	1 0 5 5 4		1 0 0 1 2 0
Last Name: S K U D L A R E K First Name: L E O N Position: T R A I N I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	1 0 5 6 1		1 0 0 1 2 7
Totals	378581	28596	43348		450525

ORGANIZATION NAME:	International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name S L A U G H T E R First Name H E N D E R S Position A D M I N I S T R A T I V E A Name of Affiliated Organization	9 4 8 4 7	7 0 9 9	7 3 4 8		1 0 9 2 9 4
Last Name S M I G I E L First Name R O B E R T Position G E N E R A L A - M A I N Name of Affiliated Organization	5 3 0 2 1	0	0		5 3 0 2 1
Last Name S M I T H First Name A D E L B E R Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 3 5 2	7 1 5 9	5 7 2 5		9 5 2 3 6
Last Name S M I T H First Name B E L I N D A Position B O A R D S E C R E T A R Y Name of Affiliated Organization	4 5 8 4 1	0	0		4 5 8 4 1
Last Name S M I T H First Name D A L E Position A U D I T O R Name of Affiliated Organization	8 2 2 7 7	7 1 7 9	1 3 8 8 7		1 0 3 3 4 3
Totals	358338	21437	26960		406735

ORGANIZATION NAME: International Union - UAW
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FILE NUMBER: 000-149

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary <small>(before taxes and other deductions)</small> (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: S M I T H First Name: D A R C Y Position: C L E R K T Y P I S T Name of Affiliated Organization:	4 3 7 7 0	0	0		4 3 7 7 0
Last Name: S M I T H First Name: D A R R E L L Position: T R A I N I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	4 2 8 2		9 3 7 9 3
Last Name: S M I T H First Name: D A V I D Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	6 8 3 5		9 6 2 9 1
Last Name: S M I T H First Name: F R A N C I S Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	7 6 0 6		9 7 0 6 2
Last Name: S M I T H First Name: G A Y E Position: B O O K K E E P E R B I Name of Affiliated Organization:	3 6 0 6 4	0	0		3 6 0 6 4
Totals	326740	21517	18723		365980

ORGANIZATION NAME:	International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: S M I T H First Name: L A R R Y Position: A D M I N I S T R A T I V E A Name of Affiliated Organization:	3 6 9 1 1	0	1 1 1 8		3 8 0 2 9
Last Name: S M I T H First Name: L A W R E N C Position: C O O R D I N A T O R Name of Affiliated Organization:	8 6 4 9 7	7 1 3 9	8 5 3 7		1 0 2 1 7 3
Last Name: S M I T H First Name: L E S L I E Position: S Y S T E M S A N A L Y S T Name of Affiliated Organization:	8 2 5 0 2	7 1 1 9	2 5 8 0		9 2 2 0 1
Last Name: S M I T H First Name: L I N D A Position: B O O K K E E P E R B I Name of Affiliated Organization:	3 2 4 8 2	0	0		3 2 4 8 2
Last Name: S M I T H First Name: L U L A Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 2 9	7 1 7 9	6 6 8 3		9 6 0 9 1
Totals	320621	21437	18918		360976

ORGANIZATION NAME: International Union - UAW
 ENDING DATE OF PERIOD COVERED: 12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position (Enter employee's job title.)					
(C) Name of Affiliated Organization (if applicable)					
Last Name: S M I T H First Name: M E R R Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 3 5 2 7	7 1 7 9	5 5 0 8		9 6 2 1 4
Last Name: S M I T H First Name: M I L D R E D Position: C I V I L R I G H T S R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	8 3 6 6		9 7 8 2 2
Last Name: S M I T H First Name: V E R N A Position: G E N E R A L A - M A I N Name of Affiliated Organization:	4 4 2 7 1	0	0		4 4 2 7 1
Last Name: S M R C H E K First Name: C A R O L Position: S E C R E T A R Y I I (M I Name of Affiliated Organization:	4 7 2 4 4	0	0		4 7 2 4 4
Last Name: S N E L L First Name: F R A N C I S Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	8 5 0 0		9 7 9 5 6
Totals	339596	21537	22374		383507

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

FILE NUMBER: 0 0 0 - 1 4 9

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: S N O W First Name: J O H N Position: S K I L L E D T R A D E S R Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	1 0 2 6 1		9 9 7 1 7
Last Name: S N Y D E R First Name: R I C H A R D Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 3 4 5 2	7 1 7 9	1 5 1 8 8		1 0 5 8 1 9
Last Name: S O B C Z Y N S K I First Name: M A R Y F R Position: M I S C Name of Affiliated Organization:	3 9 0 0 0	0	1 1 7 1		4 0 1 7 1
Last Name: S O L O M O N First Name: B A R B A R A Position: D E P A R T M E N T H E A D Name of Affiliated Organization:	9 3 5 3 8	7 1 1 9	4 6 4 0		1 0 5 2 9 7
Last Name: S O M M E R First Name: S C O T T Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	1 1 3 1 4		1 0 0 7 7 0
Totals	380544	28656	42574		451774

ORGANIZATION NAME: International Union - UAW
 ENDING DATE OF PERIOD COVERED: 12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position (Enter employee's job title.)					
(C) Name of Affiliated Organization (if applicable)					
Last Name: S O M S O N First Name: B A R B A R A Position: L E G I S L A T I V E R E P Name of Affiliated Organization:	8 8 1 5 8	7 1 5 9	4 1 9 8		9 9 5 1 5
Last Name: S O R R E L L First Name: G A R Y Position: A S S I S T A N T - R E G I Name of Affiliated Organization:	9 2 3 4 9	7 1 1 9	1 0 8 3 7		1 1 0 3 0 5
Last Name: S P A N G L E R First Name: K E L L Y Position: B O A R D S E C R E T A R Y Name of Affiliated Organization:	4 7 1 6 3	0	0		4 7 1 6 3
Last Name: S P A R K S First Name: K E L L Y Position: C I T I Z E N S H I P R E P Name of Affiliated Organization:	8 2 5 0 2	7 1 3 9	9 6 5 1		9 9 2 9 2
Last Name: S P A R R O W - R E E D First Name: M U R I E L Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 5 1 5 6	0	0		4 5 1 5 6
Totals	355328	21417	24686		401431

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: S P R I N G First Name: J O S E P H Position: A D M I N I S T R A T I V E A Name of Affiliated Organization:	9 4 9 7 1	7 1 1 9	8 9 3 3		1 1 1 0 2 3
Last Name: S P U R L O C K First Name: R O N A L D Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	1 4 0 2 8		1 0 3 5 9 4
Last Name: S T A C K P O O L E First Name: J O S E P H Position: R E S E R A C H S P E C I A L Name of Affiliated Organization:	8 7 2 7 7	7 1 7 9	1 1 5 3 6		1 0 5 9 9 2
Last Name: S T A F F O R D First Name: C H R I S T I Position: C L E R K T Y P I S T Name of Affiliated Organization:	4 2 7 0 2	0	0		4 2 7 0 2
Last Name: S T A F F O R D First Name: K A T H L E E Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 4 7 4 2	0	0		4 4 7 4 2
Totals	352119	21437	34497		408053

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: S T A G N E R First Name: L O U I S Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 4 7 7 7	7 1 7 9	1 2 8 5 8		1 0 4 8 2 4
Last Name: S T A H L First Name: D O N A L D Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	1 2 1 1 8		1 0 1 5 7 4
Last Name: S T A L I N S K I First Name: R I C H A R D Position: T R A I N I N G R E P Name of Affiliated Organization:	5 3 9 8 3	3 6 9 0	4 2 0 7		6 1 8 8 0
Last Name: S T A L L I N G S First Name: J O H N Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	8 5 4 4		9 8 1 1 0
Last Name: S T A N F O R D First Name: C A R O L Y N Position: S E C R E T A R Y I (M A J Name of Affiliated Organization:	4 7 7 0 5	0	9 2 8		4 8 6 3 3
Totals	351169	25187	38665		415021

ORGANIZATION NAME	International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: S T A R K First Name: S A M U E L Position: P U B L I C R E L A T I O N S Name of Affiliated Organization:	8 2 3 1 0	7 1 5 9	2 5 2 9		9 1 9 9 8
Last Name: S T A R R First Name: R I C H A R D Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	6 6 1 8		9 6 1 8 4
Last Name: S T A T E N First Name: M A U R I C E Position: T R A I N I N G R E P Name of Affiliated Organization:	8 2 2 0 2	7 1 7 9	8 1 3 0		9 7 5 1 1
Last Name: S T E E L E First Name: D O N A L D Position: R E T I R E E R E P Name of Affiliated Organization:	4 4 2 2 2	3 9 3 2	2 4 1 2		5 0 5 6 6
Last Name: S T E E L E First Name: L A R R Y Position: A S S I S T A N T - M A J O Name of Affiliated Organization:	8 5 9 8 3	7 1 9 9	1 8 1 2 1		1 1 1 3 0 3
Totals	377144	32608	37810		447562

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: S T E E V E S First Name: B R U C E Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	6 2 3 2	5 1 8 9		9 3 6 9 8
Last Name: S T E M P N I K First Name: W I L L I A M Position: S T O C K R O O M C L E R K Name of Affiliated Organization:	4 5 7 0 8	0	3 2 3		4 6 0 3 1
Last Name: S T E V E N S First Name: J A M E S Position: T R A I N I N G R E P Name of Affiliated Organization:	8 2 4 2 7	6 7 3 7	2 1 2 4		9 1 2 8 8
Last Name: S T E V E N S O N First Name: W I L L I A M Position: D E P A R T M E N T H E A D Name of Affiliated Organization:	9 4 7 7 2	7 1 3 9	6 3 5 3		1 0 8 2 6 4
Last Name: S T E V E R S First Name: W A N D A Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 5 9 6 0	0	0		4 5 9 6 0
Totals	351144	20108	13989		385241

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: STEWART First Name: ARTHUR Position: SERVICING REP Name of Affiliated Organization:	8 1 5 9 6	3 6 9 0	6 5 6		8 5 9 4 2
Last Name: STEWART First Name: BETTY Position: SERVICING REP Name of Affiliated Organization:	8 2 2 7 7	4 6 8 5	1 5 1 5 6		1 0 2 1 1 8
Last Name: STEWART First Name: GWENDOL Position: SERVICING REP Name of Affiliated Organization:	5 7 3 8 6	4 5 5 0	2 6 6 4		6 4 6 0 0
Last Name: STEWART First Name: RUTH Position: STENOGRAPHER Name of Affiliated Organization:	4 5 7 4 7	0	0		4 5 7 4 7
Last Name: STILLMAN First Name: DON Position: LEGISLATIVE REP Name of Affiliated Organization:	1 0 1 7 1 7	7 1 7 9	9 4 4 8		1 1 8 3 4 4
Totals	368723	20104	27924		416751

ORGANIZATION NAME:	International Union - UAW
ENDING DATE OF PERIOD COVERED:	12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: S T O K E R First Name: S T A N L E Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	7 0 9 3 4	6 2 5 6	8 7 0 4		8 5 7 9 4
Last Name: S T O K E S First Name: E U N I C E Position: A D M I N I S T R A T I V E A Name of Affiliated Organization:	9 8 3 6 3	7 1 5 9	8 0 3 5		1 1 3 5 5 7
Last Name: S T O N E First Name: L C R R A I N Position: B O A R D S E C R E T A R Y Name of Affiliated Organization:	4 9 1 9 6	0	8 7 4		5 0 0 7 0
Last Name: S T O N E First Name: M I C H A E L Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	9 7 3 6		9 9 3 0 2
Last Name: S T O R E M S K I First Name: B E N E D I C Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	1 0 4 9 1		1 0 0 0 0 2
Totals	383272	27613	37840		448725

ORGANIZATION NAME: International Union - UAW

FILE NUMBER: 0 0 0 - 1 4 9

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: S T R I B L I N G First Name: M A D A L E N Position: S E R V I C I N G R E P Name of Affiliated Organization:	3 5 0 6 9	3 1 0 5	1 5 8 1		3 9 7 5 5
Last Name: S T R N A D First Name: D E B O R A H Position: S E C R E T A R Y I (M A J Name of Affiliated Organization:	4 5 5 3 2	0	0		4 5 5 3 2
Last Name: S T R O N G First Name: V E R N I T A Position: C L E R K T Y P I S T Name of Affiliated Organization:	3 8 1 0 4	0	0		3 8 1 0 4
Last Name: S T R C U D First Name: D O N N A Position: I N T ' L O F F I C E R ' S Name of Affiliated Organization:	5 1 5 8 0	0	2 3 0		5 1 8 1 0
Last Name: S T R O U D First Name: J I M M Y Position: A S S I S T A N T M I N O R Name of Affiliated Organization:	8 3 0 8 1	7 1 7 9	5 8 5 9		9 6 1 1 9
Totals	253366	10284	7670		271320

ORGANIZATION NAME:	International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: S T R O U D First Name: K E L L I Position: B O O K K E E P E R B I Name of Affiliated Organization:	3 2 5 2 5	0	0		3 2 5 2 5
Last Name: S T R U C K M A N First Name: T H O M A S Position: S E R V I C I N G R E P Name of Affiliated Organization:	7 0 4 3 0	6 1 5 6	5 8 0 2		8 2 3 8 8
Last Name: S T U G L I N First Name: F R A N K Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 1 5 0 3	7 1 9 9	4 6 5 9		9 3 3 6 1
Last Name: S T Y E R S First Name: D E B R A Position: D E P A R T M E N T H E A D Name of Affiliated Organization:	8 9 8 5 7	7 1 5 9	7 8 2 4		1 0 4 8 4 0
Last Name: S T Y E R S First Name: K I M B E R L Position: S T O C K R O O M C L E R K Name of Affiliated Organization:	3 4 8 0 0	0	0		3 4 8 0 0
Totals	309115	20514	18285		347914

ORGANIZATION NAME **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: S U E M N I C K First Name: A L L A N Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	2 7 8 1		9 2 3 4 7
Last Name: S U E M N I C K First Name: C I N D Y Position: C O O R D I N A T O R Name of Affiliated Organization:	8 6 4 2 2	7 1 5 9	9 5 7 8		1 0 3 1 5 9
Last Name: S U L L I V A N First Name: R E B E C C A Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	3 8 2 8		9 3 3 3 9
Last Name: S U T T O N First Name: D O N N A Position: G E N E R A L A - M A I N Name of Affiliated Organization:	4 4 5 0 8	0	0		4 4 5 0 8
Last Name: S W E E T First Name: C R I C K E T Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	7 2 8 2		9 6 8 4 8
Totals	378136	28596	23469		430201

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: S W I F T First Name: K A R L A Position: A D M I N I S T R A T I V E A Name of Affiliated Organization:	9 4 7 7 2	7 1 3 9	7 7 1 7		1 0 9 6 2 8
Last Name: S Y P N I E W S K I First Name: D A N N Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	5 6 7 2		9 5 1 8 3
Last Name: S Z C Z E P A N I A K First Name: T E D Position: R E S E R A C H S P E C I A L Name of Affiliated Organization:	7 9 7 9 7	6 9 6 9	5 6 7 2		9 2 4 3 8
Last Name: S Z P U N A R First Name: L I Z A Position: S T E N O G R A P H E R Name of Affiliated Organization:	1 7 6 2 9	0	0		1 7 6 2 9
Last Name: S Z U M A L First Name: E D W A R D Position: A S S I S T A N T M I N O R Name of Affiliated Organization:	8 7 2 1 2	7 1 7 9	1 2 5 7 0		1 0 6 9 6 1
Totals	361762	28446	31631		421839

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: T A F F E First Name: J E A N Position: G E N E R A L A - M A I N Name of Affiliated Organization:	4 6 0 2 7	0	0		4 6 0 2 7
Last Name: T A L I K First Name: J O H N Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 1 2 7 5	7 1 0 4	5 8 3 8		9 4 2 1 7
Last Name: T A R P E Y First Name: K E L L Y Position: C L E R K T Y P I S T Name of Affiliated Organization:	1 9 5 1 1	0	0		1 9 5 1 1
Last Name: T A T E First Name: C A R O L Y N Position: C I T I Z E N S H I P R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	1 4 6 6 1		1 0 4 1 7 2
Last Name: T A T E First Name: E U L A Position: L E G I S L A T I V E R E P Name of Affiliated Organization:	8 2 3 5 2	7 4 1 1	1 2 2 3 1		1 0 1 9 9 4
Totals	311517	21674	32730		365921

ORGANIZATION NAME: International Union - UAW
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FILE NUMBER: 000-149

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: T A T E First Name: J A M E S Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 3 9	1 1 1 1 8		1 0 0 5 3 4
Last Name: T A Y L O R First Name: A A R O N Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 5 9	3 8 7 9		9 3 4 6 5
Last Name: T A Y L O R First Name: C A R O L Y N Position: B O A R D S E C R E T A R Y Name of Affiliated Organization:	4 8 0 6 5	0	0		4 8 0 6 5
Last Name: T E R R E L L First Name: A U D R E Y Position: W O M E N S A F F A I R S R Name of Affiliated Organization:	8 2 5 0 2	7 1 3 9	1 2 2 2 6		1 0 1 8 6 7
Last Name: T E R R E L L First Name: W I L L I A M Position: C I T I Z E N S H I P R E P Name of Affiliated Organization:	5 5 6 1 2	3 6 9 0	6 5 7 2		6 5 8 7 4
Totals	350883	25127	33795		409805

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

FILE NUMBER: 0 0 0 1 4 9

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: T E R R Y First Name: G L O R I A Position: I N T ' L O F F I C E R ' S Name of Affiliated Organization:	2 3 1 4 0	0	7 7 8		2 3 9 1 8
Last Name: T E R R Y First Name: W O N N I E Position: S T E N O G R A P H E R Name of Affiliated Organization:	3 3 0 1 4	0	0		3 3 0 1 4
Last Name: T E R Z I A N First Name: T H O M A S Position: S Y S T E M S A N A L Y S T Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	2 7 6 8		9 2 3 3 4
Last Name: T E W S First Name: M E R I D E L Position: C L E R K T Y P I S T Name of Affiliated Organization:	4 3 3 0 5	0	6 0 8		4 3 9 1 3
Last Name: T H I E R Y First Name: D E R E K Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	8 8 4 4		9 8 3 5 5
Totals	264238	14298	12998		291534

ORGANIZATION NAME: International Union - UAW
 ENDING DATE OF PERIOD COVERED: 12/31/00

FILE NUMBER: 0 0 0 - 1 4 9

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: THOMAS First Name: ARTHUR Position: SERVICING REP Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	1 1 6 2 8		1 0 1 0 8 4
Last Name: THOMAS First Name: JOHNNY Position: SERVICING REP Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	4 3 2 2		9 3 7 7 8
Last Name: THOMAS First Name: ROBERT Position: SERVICING REP Name of Affiliated Organization:	8 2 2 0 2	7 1 9 9	3 8 9 8		9 3 2 9 9
Last Name: THOMPSON First Name: DOUGLAS Position: TRAINING REP Name of Affiliated Organization:	8 5 6 5 8	6 9 0 2	5 0 1 3		9 7 5 7 3
Last Name: THOMPSON First Name: FRANCEN Position: BOARD SECRETARY Name of Affiliated Organization:	4 7 6 8 9	0	8 1 1		4 8 5 0 0
Totals	380103	28459	25672		434234

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

FILE NUMBER: 0 0 0 - 1 4 9

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: T H O M P S O N First Name: W A N D A Position: K E Y P U N C H C O O R D I N Name of Affiliated Organization:	4 3 4 9 4	0	0		4 3 4 9 4
Last Name: T H O R N T O N First Name: C L A U D E Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	6 3 9 0		9 5 9 5 6
Last Name: T H O R N T O N First Name: S T A N L E Y Position: S Y S T E M S A N A L Y S T Name of Affiliated Organization:	8 2 5 0 2	7 1 1 9	2 9 7 6		9 2 5 9 7
Last Name: T H U R M A N First Name: C O N N I E Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 5 0 2	7 1 1 9	5 8 9 9		9 5 5 2 0
Last Name: T I B B S First Name: R O S E T T A Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 7 9	1 4 8 4 9		1 0 4 4 5 5
Totals	373352	28556	30114		432022

ORGANIZATION NAME	International Union - UAW
ENDING DATE OF PERIOD COVERED	12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: T I L L E R Y First Name: C A R L Position: S E R V I C I N G R E P Name of Affiliated Organization:	5 6 1 3 4	1 8 5 6	4 6 1 5		5 2 6 0 5
Last Name: T I N N I N First Name: L A U R I E Position: B O O K K E E P E R C Name of Affiliated Organization:	4 4 7 7 1	0	1 9 8		4 4 9 6 9
Last Name: T I S E O First Name: A N G E L O Position: A S S I S T A N T - R E G I Name of Affiliated Organization:	9 2 3 4 9	7 1 1 9	3 4 0 4		1 0 2 8 7 2
Last Name: T I S E O First Name: R O B E R T Position: A S S I S T A N T - M A J O Name of Affiliated Organization:	8 9 9 3 2	7 1 3 9	5 6 6 8		1 0 2 7 3 9
Last Name: T O M A S K O First Name: E L I Z A B E Position: T R A I N I N G R E P Name of Affiliated Organization:	8 2 5 0 2	7 1 1 9	4 7 5 6		9 4 3 7 7
Totals	365688	23233	18641		407562

ORGANIZATION NAME:	International Union - UAW
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FILE NUMBER: 0 0 0 - 1 4 9

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: T O R L O N E First Name: M I C H A E L Position: U T I L I T Y R E P A I R M A Name of Affiliated Organization:	4 0 5 0 9	0	0		4 0 5 0 9
Last Name: T C R R E S First Name: M A R I A Position: O R G A N I Z E R Name of Affiliated Organization:	5 4 5 7 4	4 7 7 9	6 2 0 5		6 5 5 5 8
Last Name: T R A F T O N First Name: C A T H E R I Position: A T T O R N E Y Name of Affiliated Organization:	2 2 1 5 5	2 5 2 1	3 6 1 8		2 8 2 9 4
Last Name: T R A M M E L L First Name: S H A R O N Position: C L E R K T Y P I S T Name of Affiliated Organization:	2 1 6 4 8	0	0		2 1 6 4 8
Last Name: T R E N T First Name: E D D I E Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 7 9	1 0 0 7 9		9 9 6 1 0
Totals	221238	14479	19902		255619

ORGANIZATION NAME:	International Union - UAW
ENDING DATE OF PERIOD COVERED:	12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name T R I C E First Name L U L A Position S E R V I C I N G R E P Name of Affiliated Organization	8 0 8 2 6	6 4 4 4	6 6 4 5		9 3 9 1 5
Last Name T R O C K L E Y First Name R O B E R T Position S E R V I C I N G R E P Name of Affiliated Organization	8 2 3 5 2	7 1 5 9	1 1 3 6 5		1 0 0 8 7 6
Last Name T R O U P First Name A N T O I N E Position C L E R K T Y P I S T Name of Affiliated Organization	1 0 2 8 3	0	0		1 0 2 8 3
Last Name T R O U T M A N First Name R O N A L D Position S E R V I C I N G R E P Name of Affiliated Organization	9 1 9 0 6	4 9 0 0	9 5 2 9		1 0 6 3 3 5
Last Name T R O Y E R First Name L Y N E E Position O R G A N I Z E R Name of Affiliated Organization	5 7 8 7 6	5 2 0 3	1 3 4 4 4		7 6 5 2 3
Totals	323243	23706	40983		387932

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: T R U F F A First Name: J O H N Position: O R G A N I Z E R Name of Affiliated Organization:	6 6 9 2 3	3 6 9 0	7 7 3 9		7 8 3 5 2
Last Name: T R U L E First Name: J A N N Y Position: T I M E S T U D Y S P E C I Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	1 1 2 5 3		1 0 0 8 1 9
Last Name: T R U S S First Name: A U B R E Y Position: O U T S I D E S E C U R I T Y Name of Affiliated Organization:	3 8 9 2 4	0	0		3 8 9 2 4
Last Name: T U M M L E R First Name: W I L L I A M Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	7 3 7 0		9 6 8 2 6
Last Name: T U O M E Y First Name: V E R O N I C Position: S E C R E T A R Y I I (M I Name of Affiliated Organization:	4 5 0 4 1	0	0		4 5 0 4 1
Totals	315592	18008	26362		359962

ORGANIZATION NAME: International Union - UAW
ENDING DATE OF PERIOD COVERED: 12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: T U R N E R First Name: D E L L A Position: S E C R E T A R Y I (M A J Name of Affiliated Organization:	4 8 5 6 4	0	5 6 1 4		5 4 1 7 8
Last Name: T U R N E R First Name: D E N N I S Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 0 1 9	7 4 7 4		9 6 9 2 0
Last Name: T U R N E R First Name: J E A N E E N Position: C L E R K T Y P I S T Name of Affiliated Organization:	4 1 0 9 0	0	0		4 1 0 9 0
Last Name: T U R N E R First Name: R E U B E N Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 1 2 7 5	7 1 0 4	5 1 7 8		9 3 5 5 7
Last Name: T W I S S First Name: D A N I E L Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	5 5 8 1		9 5 0 3 7
Totals	335633	21302	23847		380782

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: T Y L E R First Name: J A N I C E Position: S T E N O G R A P H E R Name of Affiliated Organization:	3 9 3 0 0	0	0		3 9 3 0 0
Last Name: T Y L E R First Name: K E N N E T H Position: G E N E R A L A - M A I N Name of Affiliated Organization:	4 4 2 2 1	0	0		4 4 2 2 1
Last Name: T Y S O N First Name: R O B E R T Position: O U T S I D E S E C U R I T Y Name of Affiliated Organization:	4 0 1 6 1	0	0		4 0 1 6 1
Last Name: U N D E R W O O D First Name: S H I R L E Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 6 5 2	7 1 1 9	1 6 4 0 8		1 0 6 1 7 9
Last Name: U N R U H First Name: K A R E N Position: C L E R K T Y P I S T Name of Affiliated Organization:	1 1 2 4 7	0	0		1 1 2 4 7
Totals	217581	7119	16408		241108

ORGANIZATION NAME:	International Union - UAW
ENDING DATE OF PERIOD COVERED:	12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: U P C H U R C H First Name: B R E N D A Position: R E T I R E E R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 9 9	1 1 4 2 6		1 0 1 0 5 2
Last Name: U R B A N First Name: S A N D R A Position: S E R V I C I N G R E P Name of Affiliated Organization:	3 5 0 6 9	3 1 0 5	1 6 0 9		3 9 7 8 3
Last Name: U T E N D O R F First Name: C A T H Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	2 4 4 0 8	2 1 1 7	6 9 1 5		3 3 4 4 0
Last Name: V A D O V S K I First Name: R I C H A R D Position: A S S I S T A N T - R E G I Name of Affiliated Organization:	9 2 2 7 4	7 1 3 9	7 5 0 7		1 0 6 9 2 0
Last Name: V A L E N T I N E First Name: C A R R I E Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 5 9	6 3 2 0		9 5 7 5 6
Totals	316455	26719	33777		376951

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: V A N B U R E N First Name: L I N D A Position: B O O K K E E P E R Name of Affiliated Organization: B I	4 4 3 1 3	0	0		4 4 3 1 3
Last Name: V A N D E V E L D E R First Name: R O B E R T Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 1 2 7 5	7 1 0 4	4 1 1 4		9 2 4 9 3
Last Name: V A N L O P I K First Name: D I A N N Position: S T E N O G R A P H E R Name of Affiliated Organization:	3 7 7 0 0	0	0		3 7 7 0 0
Last Name: V A N D E R H Y D E First Name: M A R Y Position: S E C R E T A R Y I (M A J Name of Affiliated Organization:	4 7 4 1 0	0	1 4 0		4 7 5 5 0
Last Name: V A N D E R L I N D First Name: D E N N I S Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 0 2	7 1 9 9	7 3 4 0		9 6 7 4 1
Totals	292900	14303	11594		318797

ORGANIZATION NAME: International Union - UAW
ENDING DATE OF PERIOD COVERED: 12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: V A S Q U E Z First Name: C L A U D I A Position: G E N E R A L A - M A I N Name of Affiliated Organization:	3 0 1 2 1	0	0		3 0 1 2 1
Last Name: V A S Q U E Z First Name: H E C T O R Position: U T I L I T Y R E P A I R M A Name of Affiliated Organization:	4 2 6 7 9	0	0		4 2 6 7 9
Last Name: V A S Q U E Z First Name: Y G L A N D A Position: K E Y P U N C H O P E R A T O Name of Affiliated Organization:	4 6 2 7 5	0	0		4 6 2 7 5
Last Name: V A Z Q U E Z First Name: L U I S Position: G R A N T Name of Affiliated Organization:	8 7 5 7 9	7 0 7 9	6 6 1 1		1 0 1 2 6 9
Last Name: V A Z U R First Name: K E N N E T H Position: S E R V I C I N G R E P Name of Affiliated Organization:	5 7 8 7 6	5 2 0 3	7 7 9 1		7 0 8 7 0
Totals	264530	12282	14402		291214

ORGANIZATION NAME
International Union - UAW

ENDING DATE OF PERIOD COVERED: 12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: V E G A First Name: C A R O L I N Position: I N T ' L O F F I C E R ' S Name of Affiliated Organization:	4 6 4 7 6	0	1 7 8		4 6 6 5 4
Last Name: V E N E R I First Name: D E N I S E Position: I N T ' L O F F I C E R ' S Name of Affiliated Organization:	5 2 3 7 8	0	3 7 2		5 2 7 5 0
Last Name: V E N E R I First Name: P H I L I P Position: G E N E R A L A - M A I N Name of Affiliated Organization:	4 7 0 9 3	0	0		4 7 0 9 3
Last Name: V E N I A First Name: R E G I N A Position: M I S C I Name of Affiliated Organization:	1 2 4 2 1	0	0		1 2 4 2 1
Last Name: V E N T I M I G L I A First Name: A N T H O N Y Position: O R G A N I Z E R Name of Affiliated Organization:	7 9 8 0 2	6 9 6 9	4 1 8 1		9 0 9 5 2
Totals	238170	6969	4731		249870

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: V E R N I E R First Name: P A T R I C K Position: S E C U R I T Y Name of Affiliated Organization:	6 1 9 9 0	2 9 9 8	1 3 1 2		6 6 3 0 0
Last Name: V I C C I A First Name: F R A N K Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	6 7 6 3		9 6 3 2 9
Last Name: V I N S O N First Name: C A R Y L O N Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 5 9	9 9 7 9		9 9 4 1 5
Last Name: V C C I N O First Name: J U D Y Position: L E G A L S E C R E T A R Y Name of Affiliated Organization:	4 6 6 6 8	0	0		4 6 6 6 8
Last Name: V O S S E N A S First Name: P A M E L A Position: G R A N T Name of Affiliated Organization:	8 6 3 5 7	7 1 9 9	2 2 2 3		9 5 7 7 9
Totals	359719	24495	20277		404491

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: V U J E V I C H First Name: J O E L Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 5 9	7 3 5 5		9 6 9 4 1
Last Name: W A G N E R First Name: M A R I A Position: A D M I N I S T R A T I V E S Name of Affiliated Organization:	4 7 9 5 5	0	0		4 7 9 5 5
Last Name: W A I N A I N A First Name: D A N Position: T R A I N I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	3 4 0 1		9 2 8 5 7
Last Name: W A L D R O P First Name: E D W A R D Position: S E R V I C I N G R E P Name of Affiliated Organization:	4 2 6 9 6	3 7 9 1	3 8 1 0		5 0 2 9 7
Last Name: W A L E S First Name: W I L L I A M Position: T R A I N I N G R E P Name of Affiliated Organization:	8 2 2 0 2	6 9 8 8	3 3 9 1		9 2 5 8 1
Totals	337557	25117	17957		380631

ORGANIZATION NAME: International Union - UAW
 ENDING DATE OF PERIOD COVERED: 12/31/00

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: W A L G R A E V E First Name: C H E R Y L Position: T E C H A I D I Name of Affiliated Organization:	4 6 5 4 9	0	0		4 6 5 4 9
Last Name: W A L K E R First Name: D E N N I S Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 0 9 4	7 1 7 9	6 9 7 8		9 6 2 5 1
Last Name: W A L K E R First Name: J A M E S Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 5 8	7 1 9 9	6 4 0 4		9 5 8 6 1
Last Name: W A L K E R First Name: R O N A L D Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 3 3	7 1 5 9	7 0 5 3		9 6 5 4 5
Last Name: W A L L A C E First Name: P A T R I C K Position: E D U C A T I O N R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 3 9	4 5 7 6		9 3 9 9 2
Totals	375511	28676	25011		429198

ORGANIZATION NAME: International Union - UAW
 ENDING DATE OF PERIOD COVERED: 12/31/00

FILE NUMBER: 0 0 0 - 1 4 9

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: WALLACE First Name: THOMAS Position: SERVICING REP Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	7 7 3 2		9 7 2 4 3
Last Name: WALSH First Name: MICHAEL Position: ASSISTANT MINOR Name of Affiliated Organization:	1 8 2 9 1	6 9 6	7 8 9		1 9 7 7 6
Last Name: WALSH First Name: THOMAS Position: ASSISTANT - MAJ Name of Affiliated Organization:	8 9 9 3 2	7 1 3 9	7 5 0 8		1 0 4 5 7 9
Last Name: WALTON First Name: WILLIAM Position: SERVICING REP Name of Affiliated Organization:	8 2 4 2 7	7 1 5 9	8 1 9 9		9 7 7 8 5
Last Name: WARE First Name: CLEVELA Position: AUDITOR Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	2 2 2 0 0		1 1 1 7 6 6
Totals	355429	29292	46428		431149

ORGANIZATION NAME:	International Union - UAW
ENDING DATE OF PERIOD COVERED:	12/31/00

FILE NUMBER: 000-149

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: W A R F I E L D First Name: D A W N Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 5 1 5 7	0	2 2 7		4 5 3 8 4
Last Name: W A S H I N G T O N First Name: J O H N Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	4 9 1 4		9 4 3 7 0
Last Name: W A S H I N G T O N First Name: N A N C Y L Position: B O O K K E E P E R B I Name of Affiliated Organization:	4 9 5 3 2	0	0		4 9 5 3 2
Last Name: W A S Y L E N K O First Name: L I N D A Position: B O A R D S E C R E T A R Y Name of Affiliated Organization:	4 6 9 9 9	0	2 0 3 5		4 9 0 3 4
Last Name: W A T K I N S First Name: J A M E S Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 6 5 2	7 1 3 9	6 0 4 0		9 5 8 3 1
Totals	306617	14318	13216		334151

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: W A T K I N S First Name: S A M M I E Position: C I T I Z E N S H I P R E P Name of Affiliated Organization:	3 9 0 1 4	2 4 6 0	2 5 8 8		4 4 0 6 2
Last Name: W E B B First Name: B E V E R L Y Position: I N T ' L O F F I C E R ' S Name of Affiliated Organization:	3 0 1 4 3	0	2 0 8 9		3 2 2 3 2
Last Name: W E B E R First Name: W A L T E R Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 2	7 1 7 9	2 4 8 8		9 1 9 3 9
Last Name: W E B S T E R First Name: W I L L I A M Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	8 2 3 1		9 7 6 8 7
Last Name: W E E K L E Y First Name: T H O M A S Position: D E P A R T M E N T H E A D Name of Affiliated Organization:	8 9 9 3 2	7 1 3 9	1 4 4 9 1		1 1 1 5 6 2
Totals	323638	23957	29887		377482

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: W E I R First Name: J O S E P H Position: A S S I S T A N T M I N O R Name of Affiliated Organization:	8 6 4 9 7	7 1 9 9	5 6 1 3		9 9 3 0 9
Last Name: W E I R First Name: L Y N N E Position: B O O K K E E P E R C Name of Affiliated Organization:	4 4 7 1 4	0	1 0 1 5		4 5 7 2 9
Last Name: W E L T V E R First Name: R I T A Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 7 2 4 1	0	0		4 7 2 4 1
Last Name: W E R K I N G First Name: P H I L L I P Position: A S S I S T A N T - M A J O R Name of Affiliated Organization:	8 9 7 2 0	7 1 7 9	1 2 5 7 7		1 0 9 4 7 6
Last Name: W E S T First Name: C A R R I E Position: S E C R E T A R Y I (M A J O R) Name of Affiliated Organization:	4 6 1 0 9	0	0		4 6 1 0 9
Totals	314281	14378	19205		347864

ORGANIZATION NAME: **International Union - UAW**

ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: W E Y G A N D First Name: A L B E R T Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 5 5 8 3	7 1 5 9	1 5 3 8 9		1 0 8 1 3 1
Last Name: W H I T A K E R First Name: J O A N N A Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 0 2 8	6 3 0 9		9 5 6 8 9
Last Name: W H I T E First Name: F R A N K Position: C O O R D I N A T O R Name of Affiliated Organization:	8 9 7 8 2	7 1 7 9	8 5 9 2		1 0 5 5 5 3
Last Name: W H I T E First Name: L O N N I E Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 5 0 2	7 1 1 9	4 7 0 0		9 4 3 2 1
Last Name: W H I T E D First Name: J O A N N E Position: D A T A P R O C E S S I N G Name of Affiliated Organization:	4 3 4 6 1	0	0		4 3 4 6 1
Totals	383680	28485	34990		447155

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: W H I T L E Y First Name: S H E R R Y Position: B O O K K E E P E R C Name of Affiliated Organization:	4 6 8 5 5	0	0		4 6 8 5 5
Last Name: W H I T M A N First Name: M E R R I L L Position: A T T O R N E Y Name of Affiliated Organization:	1 0 7 7 5 0	7 0 7 9	4 9 3 8		1 1 9 7 6 7
Last Name: W I A N E C K I First Name: P A U L Position: T E C H A I D I Name of Affiliated Organization:	4 1 4 5 3	0	0		4 1 4 5 3
Last Name: W I C K L I N E First Name: R O B E R T Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 1 4 8 4	4 2 7 5	2 0 8 7		8 7 8 4 6
Last Name: W I D E M A N First Name: J A M E S Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 5 8	7 1 7 9	1 6 5 0 1		1 0 5 9 3 8
Totals	359800	18533	23526		401859

ORGANIZATION NAME: **International Union - UAW**

ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: W I E D I N G First Name: W A D E Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 5 7 7	7 1 1 9	1 4 3 2 9		1 0 4 0 2 5
Last Name: W I E R B I C K I First Name: M I C H A E L Position: G E N E R A L A - M A I N Name of Affiliated Organization:	3 9 2 5 0	0	1 0 1		3 9 3 5 1
Last Name: W I L L I A M S First Name: B O B B I E Position: S T E N O G R A P H E R Name of Affiliated Organization:	4 8 6 9 1	0	1 1 2 0		4 9 8 1 1
Last Name: W I L L I A M S First Name: C L A R E N C Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 5 0 2	7 0 9 9	1 5 6 7 3		1 0 5 2 7 4
Last Name: W I L L I A M S First Name: D E N N I S Position: A S S I S T A N T - R E G I Name of Affiliated Organization:	9 2 2 7 4	7 1 5 9	1 1 7 7 9		1 1 1 2 1 2
Totals	345294	21377	43002		409673

ORGANIZATION NAME: **International Union - UAW**

ENDING DATE OF PERIOD COVERED **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: W I L L I A M S First Name: E F F I E Position: D A T A P R O C E S S I N G Name of Affiliated Organization:	4 6 6 8 9	0	0		4 6 6 8 9
Last Name: W I L L I A M S First Name: H A T T I E Position: A D M I N I S T R A T I V E S Name of Affiliated Organization:	4 8 1 2 4	0	0		4 8 1 2 4
Last Name: W I L L I A M S First Name: H E R M A N Position: T R A I N I N G R E P Name of Affiliated Organization:	8 5 4 5 8	7 1 1 9	2 0 8 7 1		2 0 3 4 4 8
Last Name: W I L L I A M S First Name: L A R R Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	1 0 1 9 0		9 9 7 5 6
Last Name: W I L L I A M S First Name: M A R K Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 1 9	7 1 9 9	6 2 1 7		9 5 5 3 5
Totals	344917	21457	27278		393652

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: W I L L I A M S First Name: S A D I E Position: K E Y P U N C H O P E R A T O R Name of Affiliated Organization:	4 4 4 2 0	0	0		4 4 4 2 0
Last Name: W I L L I A M S First Name: S A M U E L Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	1 5 9 1 5		1 0 5 4 2 6
Last Name: W I L L I A M S First Name: T H O M A S Position: O U T S I D E S E C U R I T Y Name of Affiliated Organization:	4 1 3 8 8	0	0		4 1 3 8 8
Last Name: W I L L I A M S First Name: T I A R A Position: S T O C K R O O M C L E R K Name of Affiliated Organization:	4 5 9 3 7	0	2 3 0		4 6 1 6 7
Last Name: W I L L I A M S First Name: W A L T E R Position: A S S I S T A N T - R E G I Name of Affiliated Organization:	9 2 3 4 9	7 1 1 9	7 5 9 5		1 0 7 0 6 3
Totals	306446	14278	23740		344464

ORGANIZATION NAME	International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: W I L L I A M S First Name: W I L L I E Position: A S S I S T A N T M I N O R Name of Affiliated Organization:	8 6 4 2 2	7 1 5 9	1 2 4 9 9		1 0 6 0 8 0
Last Name: W I L L I A M S O N First Name: B I L L Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 0 8 8 6	4 2 5 5	7 1 4 5		9 2 2 8 6
Last Name: W I L L I A M S O N First Name: L A W R E N C Position: T R A I N I N G R E P Name of Affiliated Organization:	8 2 2 0 2	7 1 9 9	7 4 4 6		9 6 8 4 7
Last Name: W I L L I S First Name: S H O N T E L Position: C L E R K T Y P I S T Name of Affiliated Organization:	3 3 3 3 1	0	0		3 3 3 3 1
Last Name: W I L S O N First Name: C H A R L I E Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	4 5 3 6		9 4 0 4 7
Totals	365193	25772	31526		422591

ORGANIZATION NAME: **International Union - UAW**
 ENDING DATE OF PERIOD COVERED: **12/31/00**

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: W I L S O N First Name: K A T I E Position: A C T U A R I A L C L E R K Name of Affiliated Organization:	4 0 8 0 8	0	0		4 0 8 0 8
Last Name: W I L S O N First Name: R A Y Position: M A I N T E N A N C E M A N A Name of Affiliated Organization:	7 8 2 0 7	6 2 1 9	3 2 7 8		8 7 7 0 4
Last Name: W I L S O N First Name: W A L T E R Position: S E C U R I T Y Name of Affiliated Organization:	5 7 0 8 2	2 0 1 1	1 7 6 7		6 0 8 6 0
Last Name: W I N I A R S K I First Name: L A U R A Position: B O A R D S E C R E T A R Y Name of Affiliated Organization:	2 1 7 4 0	0	0		2 1 7 4 0
Last Name: W I N I A R S K I First Name: M A R T I N Position: A D M I N I S T R A T I V E A Name of Affiliated Organization:	9 4 6 9 7	7 1 5 9	4 6 9 5		1 0 6 5 5 1
Totals	292534	15389	9740		317663

ORGANIZATION NAME:	International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: W I N T E R First Name: D O R O T H Y Position: T R A I N I N G R E P Name of Affiliated Organization:	8 2 2 0 2	4 6 9 0	7 9 3 1		9 4 8 2 3
Last Name: W I R G A U First Name: K I M B E R L Position: K E Y P U N C H O P E R A T O R Name of Affiliated Organization:	4 3 9 4 9	0	0		4 3 9 4 9
Last Name: W I R G A U First Name: N O R M A N Position: C A R P E N T E R Name of Affiliated Organization:	4 9 2 4 5	0	0		4 9 2 4 5
Last Name: W O J C I K First Name: G I L B E R T Position: A S S I S T A N T - M A J O R Name of Affiliated Organization:	8 9 7 8 2	7 1 3 9	1 0 0 7 5		1 0 6 9 9 6
Last Name: W O L F E N B A R G E R First Name: J A N E Position: C L E R K T Y P I S T Name of Affiliated Organization:	4 5 2 8 7	0	0		4 5 2 8 7
Totals	310465	11829	18005		340300

ORGANIZATION NAME: **International Union - UAW**
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: W O M A C K First Name: D O U G L A S Position: O R G A N I Z E R Name of Affiliated Organization:	8 2 3 5 2	7 1 7 9	3 2 4 2 6		1 2 1 9 5 7
Last Name: W O N G First Name: S U S A N Position: I N T ' L O F F I C E R ' S Name of Affiliated Organization:	5 0 6 4 5	0	0		5 0 6 4 5
Last Name: W O O D First Name: J O S E P H Position: S E R V I C I N G R E P Name of Affiliated Organization:	4 5 9 6 8	1 2 5 6	2 0 2 0		4 9 2 4 4
Last Name: W O O D First Name: K E N N E T H Position: S T O C K R O O M C L E R K Name of Affiliated Organization:	4 5 3 2 2	0	0		4 5 3 2 2
Last Name: W O O D A R D First Name: B E V E R L Y Position: C L E R K T Y P I S T Name of Affiliated Organization:	1 1 4 9 0	0	0		1 1 4 9 0
Totals	235777	8435	34446		278658

ORGANIZATION NAME: International Union - UAW
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: WOODS First Name: FRANK Position: ORGANIZER Name of Affiliated Organization:	6 9 4 6 1	6 0 2 1	3 6 8 1		7 9 1 6 3
Last Name: WOODY First Name: DAVID Position: SERVICING REP Name of Affiliated Organization:	8 1 5 9 0	7 1 9 9	7 3 1 5		9 6 1 0 4
Last Name: WRIGHT First Name: FAYE Position: OUTSIDE SECURITY Name of Affiliated Organization:	2 6 3 2 8	0	0		2 6 3 2 8
Last Name: WURTZEL First Name: KENT Position: SERVICING REP Name of Affiliated Organization:	8 2 2 0 2	7 1 9 9	9 8 8 5		9 9 2 8 6
Last Name: WYATT First Name: CHARLES Position: ADMINISTRATIVE A Name of Affiliated Organization:	9 8 5 6 0	7 0 9 9	7 9 8 1		1 1 3 6 4 0
Totals	358141	27518	28862		414521

ORGANIZATION NAME: **International Union - UAW**
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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: W Y A T T First Name: O T E N Position: O R G A N I Z E R Name of Affiliated Organization:	2 1 3 5 6	1 8 3 5	1 1 5 4		2 4 3 4 5
Last Name: W Y K O W S K I First Name: W E S L E Y Position: M A I N T E N A N C E M A N A Name of Affiliated Organization:	7 5 1 2 2	7 1 7 9	4 7 4 1		8 7 0 4 2
Last Name: W Y S E First Name: L A R R Y Position: S T R I K E I N S U R A N C E Name of Affiliated Organization:	8 2 2 7 7	7 1 7 9	2 0 5 7 4		1 1 0 0 3 0
Last Name: Y A K L I N First Name: J A M E S Position: S E R V I C I N G R E P Name of Affiliated Organization:	6 7 0 9 2	4 2 3 5	9 1 8 0		8 0 5 0 7
Last Name: Y B A R R A First Name: A L B E R T Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 7 9	1 4 0 2 6		1 0 3 5 5 7
Totals	328199	27607	49675		405481

ORGANIZATION NAME:	International Union - UAW
ENDING DATE OF PERIOD COVERED:	12/31/00

FILE NUMBER: 0 0 0 - 1 4 9

PAGE 261 OF 268 ADDITIONAL PAGES

SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: Y E A S H E V I C H First Name: J O Y C E Position: T R A I N I N G R E P Name of Affiliated Organization:	8 2 4 2 7	7 1 3 9	6 5 0 9		9 6 0 7 5
Last Name: Y C S T First Name: L I N D A Position: C L E R K T Y P I S T Name of Affiliated Organization:	4 3 6 1 3	0	1 5		4 3 6 2 8
Last Name: Y O U N G First Name: J A N I C E Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 0 2 9	7 1 7 9	4 9 9 3		9 4 2 0 1
Last Name: Y O U N G First Name: J E R R Y Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	1 4 7 4 9		1 0 4 2 6 0
Last Name: Y O U N G First Name: K E N N E T H Position: A S S I S T A N T D E P A R T Name of Affiliated Organization:	8 6 4 9 7	7 1 3 9	1 2 6 6 6		1 0 6 3 0 2
Totals	376918	28616	38932		444466

ORGANIZATION NAME:	International Union - UAW
ENDING DATE OF PERIOD COVERED:	12/31/00

FILE NUMBER: 0 0 0 - 1 4 9

PAGE 262 OF 268 ADDITIONAL PAGES

SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
Last Name: Y O U N G First Name: K C N R A D Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 1 0	7 1 7 9	8 2 8 5		9 7 6 7 4
Last Name: Y O U N G First Name: L O R E T T A Position: O U T S I D E S E C U R I T Y Name of Affiliated Organization:	2 6 7 3 1	0	0		2 6 7 3 1
Last Name: Y O U N G First Name: P A U L A Position: B O A R D S E C R E T A R Y Name of Affiliated Organization:	5 5 8 6 4	0	1 4 1 2		5 7 2 7 6
Last Name: Y O U N G First Name: W I N I F R E Position: B O O K K E E P E R B I Name of Affiliated Organization:	4 3 7 8 8	0	0		4 3 7 8 8
Last Name: Z A H N First Name: J A C K Position: A S S I S T A N T M I N O R Name of Affiliated Organization:	1 0 8 7 1 4	6 1 3 1	1 5 1 9 6		1 3 0 0 4 1
Totals	317307	13310	24893		355510

ORGANIZATION NAME: International Union - UAW
ENDING DATE OF PERIOD COVERED 12/31/00

FILE NUMBER: 0 0 0 - 1 4 9

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SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>					
(C) Name of Affiliated Organization <i>(if applicable)</i>					
Last Name: Z I E G L E R First Name: G E O R G I A Position: S E C R E T A R Y I (M A J Name of Affiliated Organization:	4 1 1 5 6	0	0		4 1 1 5 6
Last Name: Z U C K S C H W E R D T First Name: D U A N E Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 2 7 7	7 1 9 9	6 3 3 5		9 5 8 1 1
Last Name: Z U R A W S K I First Name: C H A R L E S Position: S E R V I C I N G R E P Name of Affiliated Organization:	8 2 3 5 2	7 1 5 9	8 1 4 3		9 7 6 5 4
Last Name: First Name: Position: Name of Affiliated Organization:					
Last Name: First Name: Position: Name of Affiliated Organization:					
Totals	205785	14358	14478		234621

INTERNATIONAL UNION, UAW
LM-2 - 2000
FILE NO. 000-149

NOTES TO SIGNATURES
Lines 76 & 77

The attached LM-2, with accompanying schedules and attachments, was prepared by the firm of Clarence H. Johnson, P.C., C.P.A., based on the books, records and accounts of the International Union, UAW, maintained by its Accounting Department. The Attachment on Subsidiary Organization (Line 10) was prepared by legal counsel to the International Union, based on information supplied by those organizations.

The signatories to the LM-2 are, respectively, the International President and Secretary-Treasurer of the International Union, UAW. They have each reviewed the attached LM-2. The accountants, independent C.P.A. and legal counsel advise the signatories that, in their respective professional opinion(s), this LM-2, and the information it contains, is true, correct and complete. Neither of the signatories has knowledge or any reasonable belief that these professional opinions are erroneous, or based upon erroneous or incomplete information.

March 30, 2001

opeiu494



UAW INTERNATIONAL UNION
 DECEMBER 31, 2000
 FORM LM-2
 FILE #000-149

ITEM 75 - Additional Information

Item
Number

- 10 See attached schedule
- 13 See attached schedule
- 14 Audit prepared by Clarence H. Johnson, P.C., C.P.A.'s
- 15 See attached schedule
- 24 See attached schedule

CASH RECONCILIATION SCHEDULE

Cash - January 1, 2000	\$	44,420
Receipts - Line 55		330,124,185
	\$	330,168,605
Less - Disbursements Line 74		331,445,034
	\$	(1,276,429)

Adjustments:

Disbursements on Wage Schedule and on Loan Receivable Schedule as Advance Amounts	\$	210,305
Retirees Council Disbursements over Receipts		10,727
		221,032
Cash - December 31, 2000 Statement A 25B	\$	(1,055,397)

Item
Number

Schedule 1 Line 3-(D)(2)		
Loan to Local 960, Region 4 written off	\$	12,328
Loan to Local 2320, Region 9A written off		85,000
Loan to Local 2218, Region 8 written off		3,382
Loan to District 65 written off due to bankruptcy		35,000
	\$	135,710

UAW INTERNATIONAL UNION
DECEMBER 31, 2000
FORM LM-2
FILE #000-149

FOOTNOTE: Statement B

Item 55 - Total Receipts
 Item 74 - Total Disbursements

These figures include refunds, reimbursements and exchanges which are reported as receipts and disbursements. This method of reporting is a Department of Labor requirement. Generally Accepted Accounting Principles allow these refunds, reimbursements and exchanges to be netted with the respective disbursement, therefore showing lower and more accurate receipt and disbursement figures. The audited financial statements of the UAW International Union as of December 31, 2000 reflect those more accurate figures. The schedules below will reconcile the Form LM-2 total receipts and total disbursements to the audited financial statements.

Item 55 - Total Receipts		\$ 330,124,185
Less:		
Escrow Payments (Netted with Receipts)	\$ 2,967,559	
Sale of Fixed Assets - (Total Proceeds on LM-2 including gains)	305,657	
Loan Repayments	2,800,059	
Advance Write-off - (Netted with Miscellaneous Income)	135,710	
Bank Adjustments (Netted with Miscellaneous Income)	1,456	
Loss on Exchange of Canadian Funds	70,352	
Retiree Council Income	52,020	
Exchange Receipts	6,808,879	
Salaries, Travel and Fringe Reimbursements	18,786,619	
Reimbursements and Refunds (See Schedule 14 Line 10 attachment)	13,692,413	
Loss in UBN, Inc. for Year Ended 4/30/00 and Eight Months Ended December 31, 2000	3,119,919	
Loss in UBG, Inc. for 1999 and 2000	1,131,194	
Total Subtractions	49,871,837	
		\$ 280,252,348
Add:		
Gain or (Loss) on Sales of Fixed Assets		
Stocks	\$ 54,264	
Union Building Corporation Property	(134,394)	
Total Additions	(80,130)	
Total Fund Receipts per Audit Report		\$ 280,172,218

UAW INTERNATIONAL UNION
 DECEMBER 31, 2000
 FORM LM-2
 FILE #000-149

FOOTNOTE: Statement B (continued)

Item 74 - Total Disbursements		\$	331,445,034
Less:			
Purchases of Fixed Assets	\$		59,547,574
Loans Made			10,080,122
Repayments of Loans			326,666
Escrow Disbursements (Netted with Escrow Receipts)			2,967,559
Exchange Disbursements (Netted with Exchange Receipts)			6,779,569
Retiree Council Disbursements			62,747
Bank Adjustments (Netted with Miscellaneous Income)			1,456
Loss on Exchange of Canadian Funds (Netted with Miscellaneous Income)			70,352
Salaries, Travel and Fringe Reimbursements			18,786,619
Reimbursements and Refunds (See Schedule 14 Line 10 attachment)			13,692,413
Disbursements included on Wage Schedule and on Loan Receivable Schedule as Advance Amounts and included in disbursements elsewhere			210,305
Total Subtractions			112,525,382
		\$	218,919,652
Add:			
Payroll Deductions Liability Increased	\$		18,379
Assets Purchased and Expensed Furniture and Equipment			3,682,248
Total Additions			3,700,627
Total Fund Disbursements per Audit Report		\$	222,620,279



U.A.W. International Union
December 31, 2000
Form LM-2
File #000-149

Item 13

Donated items: *

<u>Donatee</u>		<u>Property</u>
UAW Local 1070	12	Conference Chairs
	2	Sofas
	3	Secretarial Chairs
	2	Swivel Lounge Chairs
	6	Steel Chairs
	1	Square Glass Table
	2	File Cabinets
	1	Printer
	2	Computer CPU's
	3	Computer Monitors

* Donated property was offered for bid sale; no bids were received and property was donated to the above organizations. The properties were depreciated to zero and no cost records were maintained.



U.A.W. International Union
December 31, 2000
Form LM-2
File #000-149

Item 13

The following items were put up for bid sale, no bids were received and the items were scrapped:

<u>Quantity</u>	<u>Item</u>
5	2 Drawer filing cabinets
8	5 Drawer filing cabinets
20	Desks
1	3 Drawer filing cabinets
5	Wood Tables
7	Credenzas
1	Couch
5	4 Drawer filing cabinets
1	Piano
1	Wheelchair
12	Chairs
2	Cabinets

Properties Reverted to U.A.W. by Constitution:

Local Union 664, Region 9
Tarrytown, NJ \$ 357,551

Property Traded in on New Purchase:

1995 Ford Van \$ 19,691

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U.A.W. International Union
December 31, 2000
Form LM-2
File #000-149

Item 15

The following were property losses reported to the Insurance Company:

<u>Location</u>	<u>Loss</u>	<u>Date of Loss</u>	<u>Amount of Loss</u>
UAW Region 1 Madison Heights, MI	Pipes burst causing damage to phones, flooring and ceiling.	12/18/00	Unsettled
UAW Headquarters Detroit, MI	Fence Damage	8/11/00	0.00

Attachment
Subsidiary Organizations
Question 10

The following entities may meet the definition of "subsidiary organization" under the instructions. Those marked by an "*" have independently audited financial statements, available on request. Those marked by "**" denote an audit by independent CPA underway, but not yet complete.

1) Education

a) Walter & May Reuther Family Education Center*.

Educational and conference facility at Onaway, Michigan, operated by Harbaugh Michigan Corp., under management contract. All real assets held by the Union Building Corp., *see below*. Cash Flow Analysis is filed as supplement to this LM-2.

b) Pat Greathouse Education Center.

Educational and conference facility at Ottawa, Illinois. The Center was built and run by the Locals and leadership in Region 4. It was originally incorporated July 20, 1949, as an Illinois non-profit corporation, under title of "UAW-CIO Region 4 Union Center." The name was subsequently changed. It now holds the real property of this facility, whose value is included on this LM. Qualified under §501(c)(2) of the Code. The operating accounts of the facility are handled on a cash impressed basis, so are reflected on a consolidated basis. It is not wholly financed by the International Union.

2) Grants - Health & Safety

The International Union is a party to various grants, from both state and federal agencies, which are funded by those agencies.

- a) Worker Health and Safety Training Grant, NIEHS, (National Institute of Environmental Health Sciences)
Superfund Health and Safety Training Grant
c/o International Union, UAW, 8000 East Jefferson Avenue, Detroit, Michigan 48214-3963
Contact: Franklin E. Mirer, Director, Health & Safety Department
Grant No. 5 U45 ES06180-08, Fiscal Year 9/1/99 through 8/31/00, Award \$745,986.00**
Grant No. 2U45 ES06180-09, Fiscal Year 9/1/00 through 8/31/01, Award \$723,861.00
EIN No. 38-2967597

- b) O.S.H.A. -Susan Harwood Training Grant Program
c/o International Union, UAW, 8000 East Jefferson Avenue, Detroit, Michigan 48214-3963
Contact: Franklin E. Mirer, Director, Health & Safety Department
Grant No. T-46E9HT2100, Fiscal Year 10/1/99 through 9/30/00, Award \$288,000.00
Grant No. T-46E0HT0800, Fiscal Year 9/30/00 through 9/30/01, Award \$307,000.00
EIN No. 38-3355805

- c) Safety Education and Training Grant
c/o International Union, UAW, 8000 East Jefferson Avenue, Detroit, Michigan 48214-3963
Contact: Franklin E. Mirer, Director, Health & Safety Department
Grant No. 7700-12, Fiscal Year 10/1/99 through 9/30/00, Award \$47,500.00
Grant No. 7701-12, Fiscal Year 10/1/00 through 9/30/01, Award \$47,500.00
EIN No. 38-3161896

- d) Michigan Health & Social Security Research Institute, Inc.
c/o International Union, UAW, 8000 East Jefferson Avenue, Detroit, Michigan 48214-3963
Contact: Charles Gayney, Director, Social Security Department
Fiscal Year 7/1/99 through 6/30/00*
Fiscal Year 7/1/00 through 6/30/01
EIN No. 38-1781250

3) Grants – Other

- a) Labor Organization Adjustment Assistance Job Training Partnership Act III Grant Awarded to UAW Region 5
Contact: Philip Tan, Sr. Director, UAW Labor Employment & Training Corp. (LETC)
Grant No. N-6562-8-00-87-60, Grant period 9/15/99 through 4/30/00, Award \$500,000.00
Grant No. AN 107660060, Grant period 6/1/00 through 6/30/02, Award \$1,050,000.00
EIN 43-1811543

- b) Subcontract from American Center For International Labor Solidarity (ACILS) to perform services funded by grant from National Endowment for Democracy to the ACIRS, AEP-G-00-99-00035-00.
Contact: Donald Stillman, Director, International Affairs Department
Grant No. 2000 UAW, Fiscal Years 1/1/00 through 3/31/01, Award \$153,130.00
EIN No. 52-1984713 (ACILS)

4) Political & Community Action - Segregated Federal Committees

To comply with the Federal Election Campaign Act (FEC), 2 U.S.C. §§431, *et seq.*, the UAW has established, under Article 12 §20 of the UAW CONSTITUTION, the following separate, segregated funds to handle voluntary contributions involving federal elections. Both are subject to §527 of the Code, and also file the required reports with the Federal Election Commission.

- a) UAW Voluntary Community Action Program (UAW V-CAP) **, for the UAW members and their families. Reports filed: Federal Election Commission, 999 E. Street, NW, Public Documents Room, Washington, D.C. 20463, FEC No. C0000 2840.

- b) Committee for Good Government (CFGG) **, for International Union Staff. Reports filed: Federal Election Commission, 999 E. Street, NW, Public Documents Room, Washington, D.C. 20453, FEC No. C0000 2382.

5) Union Building Corporation (UBC) *

A non-profit Michigan corporation, incorporated December 17, 1947, to hold real property of the International Union. It is qualified under §501(c)(2) of the Code. Financed solely by contributions from the International Union. The International Union controls the Board of the corporation. See Schedule of holdings, below.

6) United Broadcasting Network (UBN), Inc. *

A for-profit, Florida stock corporation, acquired through a Chapter 11 Plan of Reorganization, *In Re: United Broadcasting Network, Inc.*, E.D. Mich., No. 97-51312-R (Rhodes, B.J.), under Confirmation Order, filed June 3, 1998. Maintains its own accounts, and files own Form 1120, as taxable corporation. Operates a single radio station, programming source (d/b/a/ "i.e., america") and related broadcasting properties, including licenses, owns Telford Hotel. CPA Audit Report for period ending December 31, 2000 is filed with this LM-2.

7) UBG, INC. *

A for-profit Michigan Corporation, began operations in 1999, to operate the Black Lake Golf Club, and related facilities at Onaway, Michigan. Maintains its own accounts, and files own Form 1120, as a taxable corporation. CPA Audit Report for 12/31/2000, prepared by CPA, is filed with this LM2.

March 30, 2001

[Prepared by M. Jay Whitman, Esq., (P22280)]

MJW:cvm

opeiu494afl-cio

SUPPLEMENT TO LINE 24

1. *Clegg v. Powers*, No. 96-L-304. Litigation by individual workers who worked during a strike, brought against the UAW and various members, alleging tortious misconduct during and after the strike. In the opinion of counsel, the International Union has meritorious legal and factual defenses to these suits and continues to defend them vigorously.

Files: Circuit Clerk, Winchester County, Courthouse, 5 North Kent St., Winchester, VA 22601

2. *UAW v. Dorsey, UBN, et al.*, No. 97-8442-CB. The UAW brought a suit against its former business partners in the United Broadcast Network ("UBN"). In response, certain of those individuals filed counter-claims against the UAW, seeking millions of dollars in damages allegedly suffered by them as a result of the financial difficulties experienced by UBN. The suit is pending in state court in Ann Arbor, Michigan. The UAW is contesting those counter-claims vigorously, and in the opinion, counsel does not believe that those counter-claims will result in finding that the UAW is liable.

Files: 22nd Circuit Clerk, Washtenaw County, Courthouse, 101 East Huron Avenue, P.O. Box 8645, Ann Arbor, MI 48107-89645.

3. *D. Delaney v. UAW, Local 94, et al.*, N.D. IA, No. C-99-1041-MJM. Suit by non-member in Unit represented by UAW & its Local 94, in Dubuque, IA, alleging that Local's publication of "scab list" and other conduct violated RICO, and various tort duties. Filed December 15, 1999 served in 2000. Complaint has been answered, and is in discovery. In the opinion of counsel, the International Union has meritorious legal and factual defenses, and will defend vigorously.

Files: Clerk, U.S. District Court, Northern District of Iowa, 313 Federal Bldg., 101 First St., SE, P.O. Box 74710, Cedar Rapids, IA 52407-4710.

4. *D. Garrish, et al. v. GM, UAW, Local 594, et al.*, E.D. Mich., No. 00-CV-40291. Suit by group of individuals, employed by GM's Pontiac Truck plant, alleging that a mid-term strike in 1997 was prolonged by an attempt to get payments for union representatives, and skilled trades jobs for relative and friend of individual defendants. Complaint filed August 7, 2000. Discovery is ongoing. Local 594 and individuals are separately represented. In the opinion of counsel, the International Union has meritorious legal and factual defenses, and will defend vigorously.

Files: Clerk, U.S. District Court, Eastern District of Michigan, 133 Levin United States Courthouse, 231 W. Lafayette Blvd., Detroit, MI 48226.

March 29, 2001

opeiu494

U.A.W. INTERNATIONAL UNION

LM-2 2000

SCHEDULE 1 - LOANS RECEIVABLE

NOTES RECEIVABLE - LINE 1

Name (A)	Loans		Repayments Received During Period		Loans
	Outstanding at	Loans Made			Outstanding at
	Start of Period	During Period	Cash	Other Than Cash	End of Period
	(B)	(C)	(D)(1)	(D)(2)	(E)
A.F.S.C.M.E.-Local 1583	\$217,173.00	\$0.00	\$14,466.00	\$0.00	\$202,707.00
Calvary Cross Church of God	8,956.00	0.00	8,956.00	0.00	0.00
Citizens Action Fund	29,655.00	0.00	0.00	0.00	29,655.00
Jones 1989 Irrevocable Trust	360,000.00	0.00	360,000.00	0.00	0.00
McDonald, Duncan	122,390.00	0.00	19,779.00	0.00	102,611.00
Bard Young Memorial Trust	9,785.00	0.00	1,019.00	0.00	8,766.00
International Brotherhood of Teamsters	100,000.00	0.00	0.00	0.00	100,000.00
United Rubber Workers	480.00	0.00	480.00	0.00	0.00
UBN, Inc.	9,766,909.00	1,180,000.00	0.00	0.00	10,946,909.00
UBG, Inc.	600,000.00	650,000.00	0.00	0.00	1,250,000.00
Pro Air	-	5,234,843.00	0.00	0.00	5,234,843.00
Totals	\$11,215,348.00	\$7,064,843.00	\$404,700.00	\$0.00	\$17,875,491.00

Purpose: Notes on properties sold

Security: Property

Terms: Monthly payments with varying interest rates

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U.A.W. INTERNATIONAL UNION
LM -2 2000
SCHEDULE 1 - LOANS RECEIVABLE
MORTGAGES RECEIVABLE - LINE 2

		Loans		Repayments Received During Period		Loans
		Outstanding at	Loans Made			Outstanding at
Region	Local	Start of Period	During Period	Cash	Other Than Cash	End of Period
(A)		(B)	(C)	(D)(1)	(D)(2)	(E)
Region 1						
	7	\$1,322,217.00	\$0.00	\$121,727.00	\$0.00	\$1,200,490.00
	155	235,849.00	7,700.00	18,575.00	0.00	224,974.00
	160	187,631.00	0.00	15,679.00	0.00	171,952.00
	228	-	1,029,979.00	45,796.00	0.00	984,183.00
	653	146,950.00	0.00	90,456.00	0.00	56,494.00
	869	124,956.00	0.00	19,799.00	0.00	105,157.00
	909	279,250.00	0.00	96,470.00	0.00	182,780.00
	1264	110,605.00	0.00	52,263.00	0.00	58,342.00
	1700	256,987.00	0.00	51,270.00	0.00	205,717.00
Region 1A						
	36	961,052.00	0.00	64,399.00	0.00	896,653.00
	437	10,343.00	0.00	8,893.00	0.00	1,450.00
	892	204,964.00	0.00	59,709.00	0.00	145,255.00
	3000	624,314.00	0.00	66,140.00	0.00	558,174.00
Region 1C						
	1753	36,336.00	0.00	9,578.00	0.00	26,758.00
Region 1D						
	637	-	24,950.00	155.00	0.00	24,795.00
	2093	61,069.00	0.00	17,538.00	0.00	43,531.00
Region 2B						
	658	47,441.00	0.00	5,214.00	0.00	42,227.00

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U.A.W. INTERNATIONAL UNION
LM -2 2000
SCHEDULE 1 - LOANS RECEIVABLE
MORTGAGES RECEIVABLE - LINE 2

		Loans		Repayments Received During Period		Loans
		Outstanding at	Loans Made			Outstanding at
Region	Local	Start of Period	During Period	Cash	Other Than Cash	End of Period
(A)		(B)	(C)	(D)(1)	(D)(2)	(E)
Region 3						
	440	55,798.00	0.00	7,466.00	0.00	48,332.00
	2036	17,062.00	0.00	0.00	0.00	17,062.00
	2209	71,972.00	0.00	71,972.00	0.00	0.00
	2357	83,959.00	0.00	9,753.00	0.00	74,206.00
Region 4						
	450	47,656.00	0.00	3,590.00	0.00	44,066.00
	578	47,396.00	0.00	16,342.00	0.00	31,054.00
	974	177,335.00	0.00	59,392.00	0.00	117,943.00
	2488	74,369.00	0.00	23,324.00	0.00	51,045.00
Region 5						
	1070	10,633.00	0.00	1,536.00	0.00	9,097.00
	2097	116,275.00	0.00	18,397.00	0.00	97,878.00
	2297	16,578.00	0.00	2,179.00	0.00	14,399.00
Region 8						
	1183	199,755.00	0.00	59,967.00	0.00	139,788.00
	2123	17,026.00	0.00	3,093.00	0.00	13,933.00
Region 9						
	774	230,843.00	0.00	25,378.00	0.00	205,465.00
Elyria						
		9,562.00	0.00	3,952.00	0.00	5,610.00
Totals						
		5,786,183.00	\$1,062,629.00	\$1,050,002.00	\$0.00	\$5,798,810.00

Purpose: Mortgages on properties

Security: Property

Terms: Monthly payments with varying interest rates

DECEMBER 31, 2000

FORM LM-2

SCHEDULE 1 - LOANS RECEIVABLE

ADDITIONAL LOANS - LINE 3

NAME (A)	LOANS		REPAYMENTS RECEIVED DURING PERIOD		LOANS
	OUTSTANDING	LOANS MADE	CASH (D)(1)	OTHER THAN CASH (D)(2)	OUTSTANDING AT
	START OF PERIOD (B)	DURING PERIOD (C)			END OF PERIOD (E)
Region 1					
594	\$216,997.00	\$0.00	\$216,997.00	\$0.00	\$0.00
Region 1A					
174	123,472.00	0.00	29,915.00	0.00	93,557.00
Region 1D					
1874	0.00	7,903.00	3,204.00	0.00	4,699.00
Region 2					
1196	13,522.00	0.00	3,395.00	0.00	10,127.00
Region 3					
1420	0.00	16,311.00	4,398.00	0.00	11,913.00
2339	0.00	9,968.00	9,968.00	0.00	0.00
Region 4					
751	26,476.00	953,663.00	207,295.00	0.00	772,844.00
960	12,328.00	0.00	0.00	12,328.00	0.00
974	350,160.00	0.00	133,902.00	0.00	216,258.00
1982	8,266.00	0.00	2,954.00	0.00	5,312.00
2056	0.00	5,178.00	4,346.00	0.00	832.00
Region 5					
25	54,579.00	0.00	13,372.00	0.00	41,207.00
76	0.00	20,000.00	13,637.00	0.00	6,363.00
509	98,300.00	0.00	98,300.00	0.00	0.00
808	14,468.00	0.00	14,468.00	0.00	0.00
2165	6,299.00	0.00	0.00	0.00	6,299.00
2865	0.00	229,155.00	0.00	0.00	229,155.00

DECEMBER 31, 2000

FORM LM-2

SCHEDULE 1 - LOANS RECEIVABLE

ADDITIONAL LOANS - LINE 3

NAME (A)	LOANS		REPAYMENTS RECEIVED DURING PERIOD		LOANS
	OUTSTANDING	LOANS MADE	CASH (D)(1)	OTHER THAN CASH (D)(2)	OUTSTANDING AT
	START OF PERIOD (B)	DURING PERIOD (C)			END OF PERIOD (E)
Region 8					
786	151,502.00	0.00	0.00	0.00	151,502.00
788	38,836.00	0.00	38,836.00	0.00	0.00
1004	8,408.00	0.00	464.00	0.00	7,944.00
1183	124,690.00	0.00	124,690.00	0.00	0.00
1726	0.00	2,510.00	1,379.00	0.00	1,131.00
1748	0.00	4,000.00	553.00	0.00	3,447.00
2218	4,000.00	0.00	618.00	3,382.00	0.00
2222	776.00	0.00	639.00	0.00	137.00
2301	0.00	21,067.00	5973.00	0.00	15,094.00
2307	25.00	0.00	0.00	0.00	25.00
2409	0.00	8,220.00	477.00	0.00	7,743.00
4927	19,305.00	0.00	0.00	0.00	19,305.00
Region 9					
260	71,725.00	0.00	6,255.00	0.00	65,470.00
929	1,678.00	0.00	0.00	0.00	1,678.00
2300	0.00	393,660.00	201,450.00	0.00	192,210.00
2326	145,144.00	0.00	18,383.00	0.00	126,761.00
Region 9A					
1850	2,393.00	0.00	2,393.00	0.00	0.00
2320	85,000.00	0.00	0.00	85,000.00	0.00
2321	7,745.00	0.00	0.00	0.00	7,745.00
2324	0.00	88,094.00	0.00	0.00	88,094.00
Dist65	35,000.00	0.00	0.00	35,000.00	0.00
Total	\$1,621,094.00	\$1,759,729.00	\$1,158,261.00	\$135,710.00	\$2,086,852.00

Purpose: Per Capita Tax Loans

Security: Unsecured

Terms: Monthly Rebates Applies



**U.A.W. INTERNATIONAL UNION
UNION BUILDING CORPORATION
FORM LM-2 SCHEDULE 5-3
December 31, 2000**

			Total Depreciation		
		COST OR	or	Book	Fair Market
Description	Address	OTHER BASIS	Amount Expensed	Value	Value*
(A)		(B)	(C)	(D)	(E)
Greater Detroit Area					
Solidarity House	8000 East Jefferson, Detroit, MI 48214	\$8,859,574.00	\$0.00	\$8,859,574.00	\$8,859,574.00
Retiree Center	8731 & 8721 East Jefferson, Detroit, MI 48214	5,795,020.00	0.00	5,795,020.00	5,795,020.00
Regional Office (1)	30755 Montpelier, Madison Heights, MI 48071	3,071,599.00	0.00	3,071,599.00	3,071,599.00
Regional Office New (1)	Warren, Michigan	59,280.00	0.00	59,280.00	59,280.00
Regional Office (1A)	9650 Telegraph Rd, Taylor, MI 48180	794,900.00	0.00	794,900.00	794,900.00
Regional Office (1A)	9650 Telegraph Rd., Taylor, MI 48180	2,857,619.00	0.00	2,857,619.00	2,857,619.00
Romulus (Leased to Local 157)	29841 Van Born, Romulus, MI 48174	262,993.00	0.00	262,993.00	262,993.00
Detroit (Local 7)	Land	35,294.00	0.00	35,294.00	35,294.00
Michigan					
Flint Regional Office (1C)	1940 W. Atherton Rd, Flint, MI 48507	899,253.00	0.00	899,253.00	899,253.00
Lansing Sub-Regional Office (1C)	1010 River Street Lansing, MI 48912	207,826.00	0.00	207,826.00	207,826.00
Lansing (Land)	Vacant Land	25,000.00	0.00	25,000.00	25,000.00
Grand Rapids Regional Office (1D)	3300 Leonard N.E., Grand Rapids, MI 49546	2,571,424.00	0.00	2,571,424.00	2,571,424.00
Jackson Labor Temple	1002 E. South St., Jackson, MI 49203	325,000.00	0.00	325,000.00	325,000.00
Alabama					
Gadsden (Local 487)	2507-09 E. Broad Street, Gadsden, AL 35093	27,375.00	0.00	27,375.00	27,375.00
Arkansas					
Little Rock Sub-Regional Office (5)	1408 Rebsamen Park Rd, Little Rock AR 72202	126,730.00	0.00	126,730.00	126,730.00
California					
Fremont Sub-Regional Office (6)	45201 Fremont Blvd., Fremont, CA 94538	1,057,347.00	0.00	1,057,347.00	1,057,347.00
Pico Rivera	6508 S. Rosemead Blvd, Pico Rivera, CA 90660	1,898,085.00	0.00	1,898,085.00	1,898,085.00
Connecticut					
Farmington Regional Office (9A)	111 South Road, Farmington, CT 06032	1,491,872.00	0.00	1,491,872.00	1,491,872.00

*This figure is cost or depreciated (book) value.

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**U.A.W. INTERNATIONAL UNION
UNION BUILDING CORPORATION
FORM LM-2 SCHEDULE 5-3
December 31, 2000**

			Total Depreciation		
		COST OR	or	Book	Fair Market
Description	Address	OTHER BASIS	Amount Expensed	Value	Value*
(A)		(B)	(C)	(D)	(E)
District of Columbia					
Washington Headquarters	1757 "N" Street, N.W., Washington, D.C. 20036	\$1,036,612.00	\$0.00	1,036,612.00	1,036,612.00
Illinois					
Pontiac	Land	65,000.00	0.00	65,000.00	65,000.00
Rock Island (Local 1309)	4511 Fourth Ave., Rock Island, IL 61201	191,185.00	0.00	191,185.00	191,185.00
Indiana					
Indianapolis Regional Office (3)	5850 Fortune Circle West, Indianapolis, IN 46241	1,667,150.00	0.00	1,667,150.00	1,667,150.00
Indianapolis (Local 1226)	6204 E. 30th Street, Indianapolis, IN 46219	415,800.00	0.00	415,800.00	415,800.00
Mishawaka Sub-Regional Office (3)	1928 Lincolnway, East, Mishawaka, IN 46544	44,522.00	0.00	44,522.00	44,522.00
Haggerstown (Local 1501)	500 W. Main St., Haggerstown, IN 47346	142,618.00	0.00	142,618.00	142,618.00
Iowa					
Cedar Rapids (Local 299)	224 16th Avenue, S.W., Cedar Rapids, IA 52404	55,000.00	0.00	55,000.00	55,000.00
Kentucky					
Shively Sub-Regional Office (3)	3835 S. Fitzgerald Road, Louisville, KY 40216	192,500.00	0.00	192,500.00	192,500.00
Missouri					
Hazelwood Regional Office (5)	721 & 729 Dunn Rd., Hazelwood, MO 63042	3,989,675.00		3,989,675.00	3,989,675.00
Bridgeton Regional Office (5)	11340 Hammack Drive, Bridgeton, MO 63044	541,768.00	0.00	541,768.00	541,768.00
Kansas City Sub-Regional Office (5)	3841 N. Oak Trafficway, Kansas City, MO 64116	214,054.00	0.00	214,054.00	214,054.00
New York					
Hastings On the Hudson	3 Cemetery Lots	1,000.00	0.00	1,000.00	1,000.00
North Tarrytown (Local 664)	193 Beekman Avenue, North Tarrytown, NY 10591	357,551.00		357,551.00	357,551.00

*This figure is cost or depreciated (book) value.

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**U.A.W. INTERNATIONAL UNION
UNION BUILDING CORPORATION
FORM LM-2 SCHEDULE 5-3
December 31, 2000**

			Total Depreciation		
		COST OR	or	Book	Fair Market
Description	Address	OTHER BASIS	Amount Expensed	Value	Value*
(A)		(B)	(C)	(D)	(E)
North Carolina					
Mt. Holly (Region 8 Organizing Office)	132 E. Central Avenue, Mt. Holly, NC 28120	\$127,893.00	\$0.00	127,893.00	127,893.00
Ohio					
Maumee (2B)	1691 Woodlands Drive				
	Arrowhead Park, Maumee, OH 43537	2,600,758.00	0.00	2,600,758.00	2,600,758.00
Canton (Local 542)	718 Corneila Ave., Canton, OH 44704	85,785.00	0.00	85,785.00	85,785.00
Oklahoma					
Tulsa (Local 1093)	1414 N. Memorial, Tulsa, OK 74115	866,246.00	0.00	866,246.00	866,246.00
South Carolina					
Winnsboro	Land	1,199,640.00	0.00	1,199,640.00	1,199,640.00
Tennessee					
Lebanon Regional Office (8)	151 Maddox-Simpson Pkwy, Lebanon TN 37090	3,025,322.00	0.00	3,025,322.00	3,025,322.00
Memphis (Local 988)	2984 Harvester Lane, Memphis, TN 38127	41,825.00	0.00	41,825.00	41,825.00
Wisconsin					
Oak Creek Sub-Regional Office (4)	7435 S. Howell Avenue, Oak Creek, WI 53154	1,218,117.00	0.00	1,218,117.00	1,218,117.00
U.A.W. Pat Greathouse Education Center (Formerly John F. Kennedy Center)	1000 E. Center St., Ottawa, IL 61350	1,291,500.00	0.00	1,291,500.00	1,291,500.00
TOTAL UNION BUILDING CORPORATION PROPERTIES		\$49,737,712.00	\$0.00	\$49,737,712.00	\$49,737,712.00

*This figure is cost or depreciated (book) value.

Continuation of LM-2 Labor Organization Annual Report

INTERNATIONAL UNION, UNITED AUTOMOBILE, AEROSPACE &
Affiliation or Organization Name

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File Number

N/A N/A
Designation/Number

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12/31/2000
Ending Period

Schedule 7 – Purchase of Investments and Fixed Assets

Description (if land or buildings, give location) (A)	Cost (B)	Book Value (C)	Cash Paid (D)
improvements Black Lake	176,385	176,385	176,385
Purchase of Furniture and Equipment	3,682,248	3,682,248	3,682,248
Purchase of Vehicles	16,624	16,624	16,624
Construction - Region 5 - Hazelwood, MO	3,160,600	3,160,600	3,160,600
Improvements - Retirees Center	1,160,250	1,160,250	1,160,250
Region 1 Office - Warren	59,280	59,280	59,280
Improvements - Flint Office	288,400	288,400	288,400
Improvements - Washington Office	23,400	23,400	23,400
Land Development - Black Lake	869,233	869,233	869,233
Purchase of Maintenance Equipment	44,426	44,426	44,426

Continuation of LM-2 Labor Organization Annual Report

INTERNATIONAL UNION, UNITED AUTOMOBILE, AEROSPACE &
 Affiliation or Organization Name

0 0 0 1 4 9
 File Number

N/A N/A
 Designation/Number

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12/31/2000
 Ending Period

Schedule 11 — Benefits

Description (A)	To Whom Paid (B)	Amount (C)
Auto Insurance Deductible	McLaughlin Company	221,303
Insurance-Workers' Compensation	McLaughlin Company	376,074
Medical Program	Hospitals, Clinics & Individuals	188,383
Legal Services	Staff & Office Legal Services Plan	72,637
Carpenters Fringes	Detroit Carpenters Union	6,715
Pension Plans	Pension Trusts	9,398,239
Troubled Workers Fund	Non Qualified Plan	24,333

Continuation of LM-2 Labor Organization Annual Report

INTERNATIONAL UNION, UNITED AUTOMOBILE, AEROSPACE &
Affiliation or Organization Name

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File Number

N/A N/A
Designation/Number

12/31/2000
Ending Period

Schedule 12 — Contributions, Gifts & Grants

Description (A)	Amount (B)
Memorials and Flowers	21,298

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Continuation of LM-2 Labor Organization Annual Report

INTERNATIONAL UNION, UNITED AUTOMOBILE, AEROSPACE &
Affiliation or Organization Name

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File Number

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Designation/Number

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12/31/2000
Ending Period

Schedule 13 — Office & Administrative Expense

Description (A)	Amount (B)
Maintenance-Equipment	3,430,207
Meeting Expense	10,656,439
Registration Fees	262,000
Rent Expense	1,799,449
Services	7,901,905
Supplies-Office	1,285,699
Supplies-Computer	11,973
Telephone	1,947,294
Utilities	1,609,935
Insurance - General	1,460,385
Messenger Service	637



Continuation of LM-2 Labor Organization Annual Report

INTERNATIONAL UNION, UNITED AUTOMOBILE, AEROSPACE &
Affiliation or Organization Name

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File Number

N/A N/A
Designation/Number

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12/31/2000
Ending Period

Schedule 14 — Other Receipts

Description (A)	Amount (B)
Equipment Rental	29,946
Furniture and Equipment	31,106
Health Program	6,312
Insurance - Employees	3,162,432
Insurance - Workers' Comp	193,542
Insurance-Other	165,348
Legal Fees	552,703
Maintenance-Equipment	4,283
Maintenance-Supplies and Expense	1,376
Medical Program	49,138
Meeting Expense	1,447,878
Memorials and Flowers	709
Moving	54,908
Leagues and Tournaments	118,507
Registration Fees	68,567

Continuation of LM-2 Labor Organization Annual Report

INTERNATIONAL UNION, UNITED AUTOMOBILE, AEROSPACE &
Affiliation or Organization Name

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File Number

N/A N/A
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12/31/2000
Ending Period

Schedule 14 — Other Receipts

Description (A)	Amount (B)
Rent Expense	9,544
Services	562,869
Pension Benefits	4,817,781
Summer School/Winter Institute	11,249
Supplies-Office	1,889
Taxes	1,358,245
Telephone	131,687
Utilities	16,070
Royalties on Intangible Assets	925,093
Insurance Reimbursement	119,105
Organizing Fund Donations	251,436
Cafeteria Plans	730
Fees and Expenses	205,375

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FINANCIAL STATEMENTS

THE WALTER AND MAY REUTHER
FAMILY EDUCATION CENTER

DECEMBER 31, 2000

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CLARENCE L. JOHNSON, P.C.

CERTIFIED PUBLIC ACCOUNTANTS

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ROYAL OAK, MICHIGAN 48068

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MICHIGAN ASSOCIATION OF
CERTIFIED PUBLIC ACCOUNTANTS

INDEPENDENT AUDITORS' REPORT

March 6, 2001

Board of Trustees
The Walter and May Reuther
Family Education Center
8000 E. Jefferson Avenue
Detroit, Michigan 48214

Board of Trustees:

We have audited the accompanying balance sheet of The Walter and May Reuther Family Education Center as of December 31, 2000, and the related statement of revenue, expenditures, and changes in net assets and cash flows for the year then ended. These financial statements are the responsibility of the Organization's management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with generally accepted auditing standards. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of The Walter and May Reuther Family Education Center as of December 31, 2000, and the results of its operations and its cash flows for the year then ended in conformity with generally accepted accounting principles.

As discussed in the notes, the financial statements being presented are only for The Walter and May Reuther Family Education Center and do not include the assets, liabilities, and fund balances of the International Union-U.A.W. that are recorded in its financial statements. Accordingly, the accompanying financial statements are not intended to present the financial position of the International Union-U.A.W. as of December 31, 2000, or its results of operations for the year then ended in conformity with generally accepted accounting principles.

Very truly yours,



CERTIFIED PUBLIC ACCOUNTANTS

THE WALTE AND MAY REUTHER FAMILY EDUCATION CENTER
BALANCE SHEET
DECEMBER 31, 2000

- A S S E T S -

CURRENT ASSETS	\$ 1,356,323
Cash on Hand and in Bank	
Accounts Receivable -	
Guest Ledger	713
City Ledger	592,853
Recreation Department	19,210
Other Accounts Receivable	14,816
	627,592
Inventories -	
China, Glass, Silver and Linen	37,584
Reserve Stock	886
	38,470
TOTAL ASSETS	\$ 2,022,385

- L I A B I L I T I E S A N D N E T A S S E T S -

CURRENT LIABILITIES:	
Accounts Payable-Trade	\$ 35,335
Scholarship Fund	390
Education Department	5,576
Accrued Payroll Taxes	6,110
Accrued Salaries and Wages	22,564
Accrued Vacation Pay	193,576
Accrued Sales Tax	7,319
	\$ 270,870
NET ASSETS - DECEMBER 31, 2000	1,751,515
TOTAL LIABILITIES AND NET ASSETS	\$ 2,022,385

*See accompanying notes and accountants' report.

EXHIBIT "A"

THE WALTER D. MAY REUTHER FAMILY EDUCATION CENTER
STATEMENT OF REVENUE, EXPENDITURES, AND CHANGES IN NET ASSETS
FOR THE YEAR ENDED DECEMBER 31, 2000

DEPARTMENTAL REVENUE:

Rooms	\$ 2,345,682
Food	1,874,213
Beverages	203,364
Telephone	52,424
Gift Shop	196,819
Education	42,997
Recreation	47,736
Scholarship	596,763
Registration Fees - U.A.W.	121,575
Other Revenue	65,421
Total Departmental Revenue	<u>\$ 5,546,994</u>

DEPARTMENTAL EXPENDITURES:

Rooms	\$ 1,170,192
Food	995,751
Beverages	61,889
Telephone	234
Gift Shop	56,371
Education	42,997
Recreation	47,539
Scholarship	596,763
Total Departmental Expenditures	<u>\$ 2,971,736</u>

REVENUE OVER EXPENDITURES-
ALL DEPARTMENTS

	<u>\$ 2,575,258</u>
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OTHER OPERATING EXPENDITURES:

Administrative and General Security	\$ 237,549
Repair and Maintenance	603,829
Heat, Light, and Power	1,011,039
Total Other Operating Expenditures	<u>(70)</u> <u>\$ 1,852,347</u>

EXCESS REVENUE OVER EXPENDITURES

	\$ 722,911
--	------------

BEGINNING NET ASSETS - January 1, 2000

	<u>1,028,604</u>
--	------------------

ENDING NET ASSETS - December 31, 2000

	<u><u>\$ 1,751,515</u></u>
--	----------------------------

*See accompanying notes and accountants' report.

EXHIBIT "B"



THE WALTER AND MAY REUTHER FAMILY EDUCATION CENTER
STATEMENT OF CASH FLOWS
FOR THE YEAR ENDED DECEMBER 31, 2000

EXCESS REVENUE OVER EXPENDITURES \$ 722,911

Adjustments to reconcile excess of Revenue Over
Expenditures to net cash provided by operating activities:

(Increase) Decrease in:		
Accounts Receivable	\$	(106,886)
Prepaid Expenses		101,958
Inventories		126,098
		121,170

Increase (Decrease) in:		
Accounts Payable-Trade	\$	(1,657)
Accrued Expenses		93,834
		92,177

Net Cash Provided (Used) by Operating Activities \$ 936,258

Net Increase (Decrease) in Cash \$ 936,258

CASH BALANCE-January 1, 2000 420,065

CASH BALANCE-December 31, 2000 \$ 1,356,323

*See accompanying notes and accountants' report.

THE WALTER AND MAY REUTHER FAMILY EDUCATION CENTER
NOTES TO FINANCIAL STATEMENTS

NATURE OF ACTIVITIES:

The Walter and May Reuther Family Education Center shall formulate and implement programs at the Family Education Center for the education and training of U.A.W. members and their families through participation in the Family Education Scholarship Program in order to bring about a better understanding of the U.A.W.'s programs, policies, aims and objectives and to broaden and enlighten participants with a view toward the improvement of the quality of life. The function of the Family Education Center shall be to develop a cadre of future leadership, with supportive family involvement for all levels of the U.A.W.

It shall be the function of the Family Education Center to formulate and implement programs at Family Education Centers for the training of Local Union leadership and to develop among potential leaders and their families a clearer understanding of the Union and the complex problems facing our society.

ACCOUNTING POLICIES:

Accounts Receivable - The Walter and May Reuther Family Education Center considers accounts receivable to be fully collectible; accordingly, no allowance for doubtful accounts has been established. If accounts become uncollectible, they will be charged to operations when that determination is made.

Inventories - Inventories are stated at the lower of cost or market.

Presentation of Statements - These financial statements are presented only for The Walter and May Reuther Family Education Center and do not include the assets, liabilities, and fund balances of the International Union-U.A.W. that are recorded in its financial statements.

Use of Estimates - Management uses estimates and assumptions in preparing financial statements. Those estimates and assumptions affect the reported amounts of assets and liabilities, the disclosure of contingent assets and liabilities, and the reported receipts and disbursements.

MANAGEMENT AGREEMENT:

Harbaugh Michigan Corporation is responsible for performing the following services at The Walter and May Reuther Family Education Center: food services, dormitory services, janitorial and maintenance services, beverage lounge and gift shop operation, reception desk coverage, security services and other miscellaneous services. The annual management fee is paid in equal monthly installments.

INTERNATIONAL UNION-U.A.W.:

The Walter and May Reuther Family Education Center is owned by the Union Building Corporation/International Union - U.A.W. The International Union - U.A.W. pays various bills related to The Walter and May Reuther Family Education Center based on their management agreement with Harbaugh Michigan Corporation.

INCOME TAXES:

The Walter and May Reuther Family Education Center is a subsidiary organization of the International Union-U.A.W. which is a Section 501(c)(5) organization and, therefore, exempt from income taxes. The activity of the Family Education Center is filed as supplemental information to the International Union-U.A.W.'s Department of Labor Form LM-2.

THE WALTER AND MAY REUTHER FAMILY EDUCATION CENTER
NOTES TO FINANCIAL STATEMENTS

CASH EQUIVALENTS:

The Walter and May Reuther Family Education Center holds cash for short term investment in National City Bank's automated cash investment service, an institutional money market mutual fund. The investments in the automated cash investment service are not guaranteed by any bank or insured by the F.D.I.C., and involve risk.

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ADDITIONAL INFORMATION

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CLARENCE H. JOHNSON, P.C.

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CERTIFIED PUBLIC ACCOUNTANTS

**INDEPENDENT AUDITORS' REPORT
ON ADDITIONAL INFORMATION**

March 6, 2001

Board of Trustees:

Our report on our audit of the basic financial statements of The Walter and May Reuther Family Education Center as of December 31, 2000 appears in the preceding section of this report. That audit was made for the purpose of forming an opinion on the basic financial statements taken as a whole. The additional information listed in the following contents page is presented for purposes of additional analysis and is not a required part of the basic financial statements. Such information has been subjected to the auditing procedures applied in the audit of the basic financial statements and, in our opinion, is fairly stated in all material respects in relation to the basic financial statements taken as a whole.

Very truly yours,


CERTIFIED PUBLIC ACCOUNTANTS

CONTENTS

Schedule "A-1" - Cash Flow Analysis

THE WALTER MID MAY REUTHER FAMILY EDUCATION CENTER

CASH FLOW ANALYSIS

FOR THE YEAR ENDED DECEMBER 31, 2000

DEPARTMENTAL REVENUE:

Rooms	\$ 2,297,088
Food	1,825,619
Beverages	203,364
Telephone	52,424
Gift Shop	196,819
Education	50,752
Recreation	32,465
Scholarship	600,547
Registration Fees - U.A.W.	121,575
Campgrounds	19,026
Housing Rentals	8,425
Washers and Dryers	1,199
Ice Sales	636
Pop Vending	4,840
Sundry Vending	1,411
Vending Commission	1,935
Fees	27,300
Salvage	650
Total Departmental Revenue	<u>\$ 5,446,075</u>

DEPARTMENTAL EXPENDITURES:

Rooms	\$ 1,138,838
Food	963,771
Beverages	41,780
Telephone	234
Gift Shop	(30,654)
Education	42,997
Recreation	46,145
Scholarship	593,974
Total Departmental Expenditures	<u>\$ 2,797,085</u>

REVENUE OVER EXPENDITURES-

ALL DEPARTMENTS

\$ 2,648,990

OTHER OPERATING EXPENDITURES:

Administrative and General	\$ 131,408
Security	589,882
Repair and Maintenance	991,512
Heat, Light, and Power	(70)
Total Other Operating Expenditures	<u>\$ 1,712,732</u>

EXCESS REVENUE OVER EXPENDITURES

\$ 936,258

*See accountants' report on additional information.

Schedule "A-1"

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FINANCIAL STATEMENTS

UNITED BROADCASTING NETWORK, INC.

D/B/A I.E. AMERICA

DECEMBER 31, 2000

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INDEPENDENT AUDITORS' REPORT

January 16, 2001

United Broadcasting Network, Inc.
D/B/A I.E. America
3 River Street
White Springs, Florida 32096

Board of Directors:

We have audited the accompanying balance sheet of United Broadcasting Network, Inc. D/B/A I.E. America as of December 31, 2000, and the related statements of operations and cash flows for the eight months then ended. These financial statements are the responsibility of the Company's management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with generally accepted auditing standards. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of United Broadcasting Network, Inc. D/B/A I.E. America as of December 31, 2000, and the results of its operations and its cash flows for the eight months then ended in conformity with generally accepted accounting principles.

The accompanying financial statements have been prepared assuming that the Company will continue as a going concern. As discussed in the notes to the financial statements, the Company has suffered recurring losses from operations and has a net capital deficiency, which raise doubt about its ability to continue as a going concern. Management's plans regarding those matters also are described in the notes to the financial statements. The financial statements do not include any adjustments that might result from the outcome of this uncertainty.

Very truly yours


Edmund Johnson, P.C.

CERTIFIED PUBLIC ACCOUNTANTS

UNITED BROADCASTING NETWORK, INC.
D/B/A I.E. AMERICA
BALANCE SHEET
AS OF
DECEMBER 31, 2000

ASSETS

CURRENT ASSETS:		
Cash in Bank	\$	26,274
Accounts Receivable		109,220
Advances and Prepaids		49,149
Inventory		<u>1,230</u>
TOTAL CURRENT ASSETS	\$	185,873
FIXED ASSETS:		
Buildings	\$	1,115,051
Equipment		1,155,287
Vehicles		<u>3,216</u>
Less-Accumulated Depreciation		
TOTAL FIXED ASSETS	\$	<u>2,273,554</u> (975,487)
		1,298,067
OTHER ASSETS:		
Broadcast License	\$	50,000
Deposits		3,542
Goodwill		1,271,740
Organizational Costs		<u>637,441</u>
Less-Amortization	\$	<u>1,962,723</u> (870,334)
TOTAL OTHER ASSETS		1,092,389
TOTAL ASSETS	\$	<u>2,576,329</u>

LIABILITIES AND STOCKHOLDERS' EQUITY

CURRENT LIABILITIES:		
Accounts Payable	\$	3,710
Accrued Payroll		4,970
Accrued Taxes		1,580
Interest Payable		2,810,843
Notes Payable		<u>10,946,909</u>
TOTAL CURRENT LIABILITIES		\$ 13,768,012
STOCKHOLDERS' EQUITY:		
Capital Stock	\$	1,500,983
Paid-in Capital		5,000,000
Retained Earnings:		
Balance-May 1, 2000	\$	(15,802,883)
Net Loss for the Period		<u>(1,889,783)</u>
Balance-December 31, 2000		(17,692,666)
TOTAL STOCKHOLDERS' EQUITY		<u>(11,191,683)</u>
TOTAL LIABILITIES AND STOCKHOLDERS' EQUITY	\$	<u>2,576,329</u>

*See accompanying notes and accountants' report.

EXHIBIT "A"

UNITED BROADCASTING NETWORK, INC.
D/B/A I.E. AMERICA
STATEMENT OF OPERATIONS
FOR THE EIGHT MONTHS ENDED DECEMBER 31, 2000

REVENUES:			
SALES:			
Sales - Merchandise	\$	620	
Sales - Miscellaneous		4,582	
Spot Sales - UBN		28,776	
Spot Sales - Global		289,975	
Paid Programming		29,317	
Shipping Sales		639	
Discounts and Refunds		<u>(8)</u>	
TOTAL SALES	\$		\$ 353,901
COST OF SALES:			
Cost of Sales	\$	2,055	
Shipping		2,406	
Commissions		93,148	
Contract Talent and Outside Services		196,245	
Credit Card Fees		<u>495</u>	
TOTAL COST OF SALES			<u>294,349</u>
TOTAL REVENUES			\$ 59,552
OPERATING EXPENSE:			
Salaries and Wages	\$	421,111	
Payroll Taxes and Benefits		39,199	
Advertising		15,632	
Office Supplies		17,404	
Postage and Shipping		4,819	
Insurance		40,846	
Depreciation		85,346	
Fees and Expenses		5,691	
Outside Services		7,153	
Satellite Channels		80,500	
Maintenance		14,360	
Professional Fees		80,377	
Rent		29,020	
Taxes		13,114	
Travel		15,298	
Utilities		151,074	
Interest		738,058	
Amortization		<u>141,514</u>	
TOTAL OPERATING EXPENSE			<u>1,900,516</u>
INCOME (LOSS) FROM OPERATIONS			\$ (1,840,964)

*See accompanying notes and accountants' report.

EXHIBIT "B"
(Continued 1)

UNITED BROADCASTING NETWORK, INC.
D/B/A I.E. AMERICA
STATEMENT OF OPERATIONS
FOR THE EIGHT MONTHS ENDED DECEMBER 31, 2000

OTHER INCOME (EXPENSE) :	
Loss on Disposal of Property and Equipment	\$ (48,808)
Other Income (Expense)	<u>(11)</u>
TOTAL OTHER INCOME (EXPENSE)	\$ <u>(48,819)</u>
NET INCOME (LOSS)	<u>\$ (1,889,783)</u>

*See accompanying notes and accountants' report.

EXHIBIT "B"
(Concluded 2)

UNITED BROADCASTING NETWORK, INC.
D/B/A I.E. AMERICA
STATEMENT OF CASH FLOWS
FOR THE EIGHT MONTHS ENDED DECEMBER 31, 2000

CASH FLOWS FROM OPERATING ACTIVITIES:	
Net Profit or (Loss)	\$ (1,889,783)
Adjustments to reconcile net profit or (loss) to net cash provided (used) by operating activities:	
Depreciation	85,346
Amortization	141,514
Loss on Disposition of Property and Equipment	48,808
(Increase) Decrease in:	
Accounts Receivable	7,463
Advances and Prepaids	(45,383)
Inventory	429
Deposits	4,228
Increase (Decrease) In:	
Accounts Payable	(10,351)
Accrued Payroll	(10,852)
Accrued Taxes	1,298
Accrued Interest	738,058
	<u> </u>
NET CASH PROVIDED (USED) BY OPERATING ACTIVITIES	\$ (929,225)
CASH FLOWS FROM INVESTING ACTIVITIES:	
Purchases of Property and Equipment	\$ (38,783)
Proceeds From Disposition of Property and Equipment	<u>70,098</u>
NET CASH PROVIDED (USED) BY INVESTING ACTIVITIES	31,315
CASH FLOWS FROM FINANCING ACTIVITIES:	
Proceeds of Short-Term Debt	<u>780,000</u>
NET CASH PROVIDED (USED) BY FINANCING ACTIVITIES	<u>780,000</u>
NET INCREASE (DECREASE) IN CASH	\$ (117,910)
CASH BALANCE - May 1, 2000	<u>144,184</u>
CASH BALANCE - December 31, 2000	<u>\$ 26,274</u>

*See accompanying notes and accountants' report.

EXHIBIT "C"

UNITED BROADCASTING NETWORK, INC.
D/B/A I.E. AMERICA
NOTES TO FINANCIAL STATEMENTS

NATURE OF OPERATIONS AND SIGNIFICANT ACCOUNTING POLICIES:

Nature of Operations:

United Broadcasting Network, Inc. D/B/A I.E. America has the following two types of activity.

Broadcasting - The network is a supplier of informational and entertaining talk shows intended for distribution over local radio stations scattered across the United States. Weekday talk shows originate from Washington, D.C., Texas, Massachusetts, and Florida. Approximately one hundred independent radio stations clear some portion of United Broadcasting Network, Inc.'s programming.

WNSI is a 50,000 watt radio station which reaches some portions of Alabama, Georgia, and Tennessee when its daytime, full power, transmitter is in operation. FCC nighttime regulations require the station to operate at 500 watts and the coverage shrinks to approximately thirty miles. Daytime programming consists of local news and talk shows from United Broadcasting Network, Inc. Nighttime programming includes shows from three sports networks.

Use of Estimates:

The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

Cash and Equivalents:

For the purposes of balance sheet presentation and reporting of cash flows, the Company considers all unrestricted demand deposits, money market funds and highly liquid debt instruments with maturities of three months or less to be cash and cash equivalents.

Accounts Receivable:

United Broadcasting Network, Inc. D/B/A I.E. America considers accounts receivable to be fully collectible; accordingly, no allowance for doubtful accounts is required. If amounts become uncollectible, they will be charged to operations when that determination is made.

Inventory:

Inventory is stated at the lower of cost or market.

Building, Equipment and Vehicles:

Buildings, equipment and vehicles are stated at cost. Buildings, equipment and vehicles are depreciated over the estimated useful life of the related assets. Depreciation for both financial statements and income taxes is calculated using accelerated methods.

Intangible Assets:

Intangible assets consist of goodwill and organizational costs and are being amortized on a straight-line basis.

COMMON STOCK:

10,100 shares of no par common stock are authorized. 10,100 shares are issued and outstanding at December 31, 2000.

UNITED BROADCASTING NETWORK, INC.
D/B/A I.E. AMERICA
NOTES TO FINANCIAL STATEMENTS

INCOME TAXES:

At December 31, 2000, the company had operating loss carryforwards of approximately \$17,692,920 available to offset future taxable income. These net operating loss carryforwards expire fifteen years from the year in which the losses were incurred at various intervals through fiscal year 2015.

BANKRUPTCY REORGANIZATION/RELATED PARTY:

United Broadcasting Network, Inc. D/B/A I.E. America became a wholly owned subsidiary of the International Union-U.A.W. as of June 13, 1998, as a result of Chapter 11 Bankruptcy reorganization.

NOTE PAYABLE:

The demand note is payable to the Company's sole shareholder. The note bears interest at the prime rate of interest published by Chase Manhattan Bank, N.A. plus one percent. The balance of the note on December 31, 2000 was \$10,946,909.

SUPPLEMENTAL CASH FLOW INFORMATION:

Operating activities reflect interest paid of \$738,058 for the eight months ended December 31, 2000.

LEASE COMMITMENTS:

The Company leases office space in Washington, D.C., storage space, and various equipment under operating leases with terms ranging from one month to three years. Rent expense charged to current operations was \$29,020 for the eight months ended December 31, 2000.

EMPLOYEE RETIREMENT PLAN:

United Broadcasting Network, Inc. D/B/A I.E. America maintains an employee retirement plan under which the employees may defer a portion of their annual compensation, pursuant to Section 401(k) of the Internal Revenue Code. At the discretion of the Board of Directors, the Company may make a matching contribution equal to a percentage of each employee's contribution and may also contribute additional amounts, all subject to vesting. During the eight months ended December 31, 2000, the Company did not make any matching contributions.

The summary plan description or plan documents should be referred to for a more complete description of the plan's provisions.

GOING CONCERN:

As shown in the accompanying financial statements, United Broadcasting Network, Inc. D/B/A I.E. America incurred a net loss of \$1,889,783 during the eight months ended December 31, 2000, and as of that date, the Company's liabilities exceeded its assets by \$11,191,683. These factors create an uncertainty about the Company's ability to continue as a going concern. Management of the Company is developing a plan to reduce its liabilities through elimination of unproductive operating activities and reduction of expenditures in the remaining operations. The financial statements do not include any adjustments if the Company is unable to continue as a going concern.

SUBSEQUENT EVENTS:

On January 3, 2001, the Company sold the building in White Springs, Florida containing its facilities and related restaurant equipment. On January 11, 2001, the Company also signed an agreement to lease the same building on a short-term basis.

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FINANCIAL STATEMENTS

UBG, INC.

DECEMBER 31, 2000

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CLARENCE H. JOHNSON, P.C.

CERTIFIED PUBLIC ACCOUNTANTS

TELEPHONE (248) 398-4040

FAX (248) 544-8414

28212 WOODWARD AVENUE • P.O. BOX 427

ROYAL OAK, MICHIGAN 48068

MEMBER
AMERICAN INSTITUTE OF
CERTIFIED PUBLIC ACCOUNTANTS
MICHIGAN ASSOCIATION OF
CERTIFIED PUBLIC ACCOUNTANTS

INDEPENDENT AUDITORS' REPORT

March 6, 2001

Board of Directors
UBG, Inc.
8000 E. Jefferson Avenue
Detroit, Michigan 48214

Board of Directors:

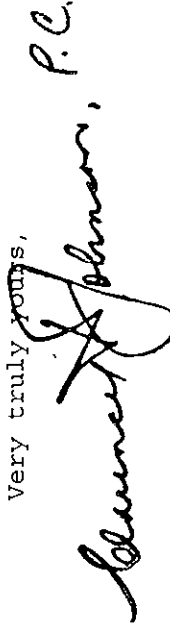
We have audited the accompanying statement of assets, liabilities and stockholders' equity-modified cash basis of UBG, Inc. as of December 31, 2000, and the related statement of revenue and expenses-modified cash basis for the six months and year then ended. These financial statements are the responsibility of the Company's management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with generally accepted auditing standards. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

The Company prepares its financial statements on the modified cash basis. This basis is a comprehensive basis of accounting other than generally accepted accounting principles. Consequently, some revenues and the related assets are recognized when received, rather than when earned, and some expenditures and liabilities are recognized when paid, rather than when the obligation is incurred.

In our opinion, the financial statements referred to above present fairly, in all material respects, the assets, liabilities, and stockholders' equity of UBG, Inc. as of December 31, 2000, and its revenue and expenses and changes in stockholders' equity for the six months and year then ended, on the modified cash basis of accounting.

Very truly yours,



CERTIFIED PUBLIC ACCOUNTANTS

UBG, INC.
STATEMENT OF ASSETS, LIABILITIES, AND STOCKHOLDERS' EQUITY-MODIFIED CASH BASIS
AS OF
DECEMBER 31, 2000

ASSETS

CURRENT ASSETS:	
Cash in Bank	\$ 112,964.90
Accounts Receivable-UBC	51,759.89
Inventory	57,638.88
TOTAL CURRENT ASSETS	<u>\$ 222,363.67</u>
TOTAL ASSETS	<u>\$ 222,363.67</u>

LIABILITIES AND STOCKHOLDERS' EQUITY

CURRENT LIABILITIES:	
Payroll Taxes Payable	\$ 1,878.80
Sales Tax Payable	405.14
Gift Certificates Payable	<u>1,273.73</u>
TOTAL CURRENT LIABILITIES	\$ 3,557.67
LONG-TERM LIABILITIES:	
Loan Payable-International Union-U.A.W.	<u>\$1,250,000.00</u>
TOTAL LONG-TERM LIABILITIES	<u>1,250,000.00</u>
TOTAL LIABILITIES	\$1,253,557.67
STOCKHOLDERS' EQUITY:	
Capital Stock	\$ 100,000.00
Retained Earnings:	
Balance - January 1, 2000	\$ (586,762.97)
Net Loss for the Period	<u>(544,431.03)</u>
Balance-December 31, 2000	<u>(1,131,194.00)</u>
TOTAL STOCKHOLDERS' EQUITY	<u>(1,031,194.00)</u>
TOTAL LIABILITIES AND STOCKHOLDERS' EQUITY	<u>\$ 222,363.67</u>

*See accompanying notes and accountants' report.

EXHIBIT "A"

UBG, INC.

STATEMENT OF REVENUE AND EXPENSES-MODIFIED CASH BASIS

	SIX MONTHS ENDED		SIX MONTHS ENDED		YEAR ENDED
	JUNE 30, 2000	DEC. 31, 2000	JUNE 30, 2000	DEC. 31, 2000	DEC. 31, 2000
INCOME:					
Golf Operations	\$ 29,365.22	\$ 255,998.46	\$ 29,365.22	\$ 255,998.46	\$ 285,363.68
Restaurant	34,886.90	145,102.19	34,886.90	145,102.19	179,989.09
Pro Shop	25,942.24	81,529.50	25,942.24	81,529.50	107,471.74
Interest Income	41.97	496.78	41.97	496.78	538.75
TOTAL INCOME	\$ 90,236.33	\$ 483,126.93	\$ 90,236.33	\$ 483,126.93	\$ 573,363.26
OPERATING EXPENSE:					
MAINTENANCE:					
Wages	\$ 113,837.60	\$ 152,003.56	\$ 113,837.60	\$ 152,003.56	\$ 265,841.16
Books and Pamphlets	258.00	-	258.00	-	258.00
Chemicals	11,686.49	30,827.24	11,686.49	30,827.24	42,513.73
Equipment Rental	-	4,758.29	-	4,758.29	4,758.29
Fertilizer	14,427.83	17,545.65	14,427.83	17,545.65	31,973.48
Fuel and Oil	3,065.00	9,265.34	3,065.00	9,265.34	12,330.34
Irrigation Maintenance	1,408.59	2,174.60	1,408.59	2,174.60	3,583.19
Repairs and Maintenance- Building	3,324.41	3,260.18	3,324.41	3,260.18	6,584.59
Repairs and Maintenance- Equipment	5,831.92	9,341.37	5,831.92	9,341.37	15,173.29
Supplies-Maintenance	706.03	173.69	706.03	173.69	879.72
Membership Dues	500.00	920.04	500.00	920.04	1,420.04
Education/Registration	30.00	410.00	30.00	410.00	440.00
Sand	-	1,335.50	-	1,335.50	1,335.50
Seed and Sod	-	(107.27)	-	(107.27)	(107.27)
Landscaping	-	1,646.00	-	1,646.00	1,646.00
Vacation Trust Fund	11,544.10	14,930.10	11,544.10	14,930.10	26,474.20
Pension Trust Fund	11,315.85	15,133.73	11,315.85	15,133.73	26,449.58
Insurance Trust Fund	28,323.60	50,024.40	28,323.60	50,024.40	78,348.00
Professional Services	990.02	243.70	990.02	243.70	1,233.72
Small Tools	191.98	639.68	191.98	639.68	831.66
Supplies	1,053.32	676.02	1,053.32	676.02	1,729.34
Taxes-Payroll	13,399.62	15,225.05	13,399.62	15,225.05	28,624.67
Telephone	1,268.79	817.33	1,268.79	817.33	2,086.12
Uniforms	2,707.18	93.57	2,707.18	93.57	2,800.75
Utilities	2,545.63	8,643.76	2,545.63	8,643.76	11,189.39
TOTAL MAINTENANCE EXPENSE	\$ 228,415.96	\$ 339,981.53	\$ 228,415.96	\$ 339,981.53	\$ 568,397.49
GOLF OPERATIONS:					
Wages	\$ 27,625.06	\$ 70,783.79	\$ 27,625.06	\$ 70,783.79	\$ 98,408.85
Employee Benefits	-	6,246.74	-	6,246.74	6,246.74
Travel	512.38	16.50	512.38	16.50	528.88
Advertising	21,858.83	12,876.43	21,858.83	12,876.43	34,735.26
Books, Pamphlets, and Subscriptions	342.68	-	342.68	-	342.68
Education/Registration	50.00	-	50.00	-	50.00
Fees and Expenses	2,583.28	6,263.31	2,583.28	6,263.31	8,846.59
Freight	23.50	-	23.50	-	23.50
Furniture and Equipment	1,153.30	594.72	1,153.30	594.72	1,748.02
Repairs and Maintenance- Building	116.00	775.37	116.00	775.37	891.37
Repairs and Maintenance- Equipment	91.34	-	91.34	-	91.34
Repairs and Maintenance- Golf Cart	-	151.44	-	151.44	151.44

*See accompanying notes and accountants' report.

EXHIBIT "B"
(Continued 1)

UBG, INC.

STATEMENT OF REVENUE AND EXPENSES-MODIFIED CASH BASIS

	SIX MONTHS ENDED JUNE 30, 2000	SIX MONTHS ENDED DEC. 31, 2000	YEAR ENDED DEC. 31, 2000
OPERATING EXPENSE: (Continued)			
GOLF OPERATIONS: (Continued)			
Supplies-Maintenance	\$ -	\$ 1,879.79	\$ 1,879.79
Licenses and Permits	100.00	-	100.00
Interest Expense	-	4.75	4.75
Meals and Entertainment	-	388.54	388.54
Membership Dues	780.00	719.00	1,499.00
Moving	299.52	-	299.52
Postage	149.68	339.61	489.29
Printing	14,806.38	424.00	15,230.38
Professional Services	1,520.64	3,329.18	4,849.82
Supplies	7,704.77	6,410.43	14,115.20
Taxes-Payroll	3,029.24	8,850.30	11,879.54
Telephone	5,618.83	8,122.69	13,741.52
Uniforms	3,593.13	455.13	4,048.26
Utilities	5,302.40	11,541.23	16,843.63
Cash Over and Short	(101.98)	21.93	(80.05)
TOTAL GOLF OPERATIONS EXPENSE	\$ 97,158.98	\$ 140,194.88	\$ 237,353.86
RESTAURANT:			
Cost of Sales	\$ 12,855.78	\$ 62,441.70	\$ 75,297.48
Wages	32,652.85	105,239.02	137,891.87
Employee Benefits	789.41	4,496.33	5,285.74
Advertising	-	4,781.80	4,781.80
Licenses and Permits	178.39	-	178.39
Meals and Entertainment	-	63.81	63.81
Membership Dues	-	195.00	195.00
Professional Services	50.00	1,503.74	1,553.74
Supplies	874.93	7,016.45	7,891.38
Taxes-Payroll	5,241.71	10,700.78	15,942.49
Uniforms	335.86	228.46	564.32
Utilities	121.32	769.27	890.59
Cash Over and Short	(94.47)	(128.30)	(222.77)
TOTAL RESTAURANT EXPENSE	\$ 53,005.78	\$ 197,308.06	\$ 250,313.84
PRO SHOP:			
Cost of Sales	\$ 15,299.74	\$ 42,712.27	\$ 58,012.01
Professional Services	322.12	-	322.12
Supplies	3,203.22	191.75	3,394.97
TOTAL PRO SHOP EXPENSE	\$ 18,825.08	\$ 42,904.02	\$ 61,729.10
TOTAL OPERATING EXPENSE	\$ 397,405.80	\$ 720,388.49	\$ 1,117,794.29
NET PROFIT OR (LOSS)	\$ (307,169.47)	\$ (237,261.56)	\$ (544,431.03)

*See accompanying notes and accountants' report.

EXHIBIT "B"
(Concluded 2)

UBG, INC.
NOTES TO FINANCIAL STATEMENTS

NATURE OF OPERATIONS AND SIGNIFICANT ACCOUNTING POLICIES:

Nature of Operations:

UBG, Inc. operates a golf course and related pro shop, food, beverage and recreation services in northern Michigan. The golf course is available for use by the public and members, family of members and retirees of the International Union, United Automobile, Aerospace and Agricultural Implement Workers of America.

Methods of Accounting:

The accompanying financial statements have been prepared on the modified cash basis of accounting. This basis differs from generally accepted accounting principles primarily because some revenues and assets are recognized when received, rather than when earned and some expenditures and liabilities are recognized when paid, rather than when the obligation is incurred.

Use of Estimates:

Management uses estimates and assumptions in preparing financial statements. Those estimates and assumptions affect the reported amounts of assets and liabilities, the disclosure of contingent assets and liabilities, and the reported revenue and expenses. Actual results could differ from those estimates.

Inventory:

Inventory is stated at the lower of cost or market.

INCOME TAXES:

At December 31, 2000, the Company had operating loss carryforwards of approximately \$1,130,938 available to offset future taxable income. These net operating loss carryforwards expire fifteen years from the year in which the losses were incurred at various intervals through fiscal year 2015.

COMMON STOCK:

60,000 shares of no par common stock are authorized. 1,000 shares are issued and outstanding at December 31, 2000.

RELATED PARTY:

UBG, Inc. is a wholly owned subsidiary of the International Union, United Automobile, Aerospace and Agricultural Implement Workers of America.

NOTE PAYABLE:

The unsecured non-interest bearing demand note is payable to the Company's sole shareholder. The balance of the note on December 31, 2000 was \$1,250,000.

PENSION PLAN:

Some of the Company's ground crew and equipment maintenance employees are participants in the Operating Engineers Local 324 Pension Fund, a multi-employer plan. UBG, Inc. contributions are determined by the rate in the participation agreement. Contributions for the six months ended June 30, 2000 and six months ended December 31, 2000 are \$11,316 and \$15,134, respectively.

The summary plan description or plan documents should be referred to for a more complete description of the plan's provisions.

