U.S. Department of Labor Employment Standards Administration Office of Labor-Management Standards Washington, DC 20210

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 TRUSTEESHIP Form Approved
Office of Management and Budget
No. 1215-0188
Expires: 11-30-2008

This report is mandatory under P.1. 86-257, as amended. Failure to comply may result in original prosecution, fines, or civil negatities as provided by 29 U.S.C. 439 or 440.

	READ THE INS	STRUCTION	NS CAREFULLY BEFORE PREPARING THIS REPORT.
For Official Use Profit			D COVERED 3. (a) AMENDED — If this is an amended report correcting a previously
	000 440	_ 1	MO DAY YEAR filed report, check here:
a. F. 3	000-149	From	0 1 0 1 2 0 0 4 (b) TERMINAL — If your organization ceased to exist and this is its terminal report, see Section XII of the instructions and check here:
E		Through	[1 2 3 1 2 0 0 4] (c) SUBSIDIARY — If this is a report for a subsidiary organization of your union as defined in Section X of the instructions, check here:
			8. MAILING ADDRESS
		:	First Name
ELIZABETH BUNN AUTO WORKERS AFL-CIO NHQ	2 000-149 320		ELIZABETH
8000 E JEFFERSON AVE			Last Name
DETROIT MI 48214-3963	3 12/2004		BUNN
	·		P.O. Box - Building and Room Number (if any)
4. AFFILIATION OR ORGANIZATION NAM	ME		Number and Charak
AUTO WORKERS AFL-CIO			Number and Street 8 0 0 0 E JEFFERSON
5. DESIGNATION (Local, Lodge, etc.)	6. DESIGNATIO	N NUMBER	R BOOO E SEFFERSON
NHQ			City
7. UNIT NAME (if any)			DETROIT
			State ZIP Code + 4
Are your organization's records kept at it (if "No," provide address in Item 75.)	ts mailing address? Yes	₫ № □	M I 4 8 2 1 4 - 3 9 6 3
75. ADDITIONAL INFORMATION			
Item Number			
<u> </u>			
1 1			
Each of the undersioned thulk authorized officers	of the above labor organization	declares un	nder 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	y the signatory and is, to the be		nder the applicable penalties of law, that all of the information submitted in this report (including the information contained in any lersigned's knowledge and belief, true, correct, and complete. (See Section VI on penalties in the instructions.)
76. SIGNED:		PRESID	Modern ER
3/36/65	(313)926-5431		ther title, instructions.) $3/3 \circ 9 \circ 5$ (313)926-5431 (If other title, see instructions.)
Date	Telephone Number		Date Telephone Number
Form LNL2 (Povised 2000)			A . Decalar

 During the Reporting Period Did Your Organization: 10. Have a "subsidiary organization" as defined in Section X of the instructions? 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 [18. How many members did your organization have at the end of the reporting period? 19. What is the date of your organization's next regular election of officers? 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
12. Have a political action committee (PAC) fund?		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.)
13. Acquire or dispose of any goods or property in any manner other than by purchase or sale?	X [(a) Regular Dues/Fees Rates of Dues and Fees N/A per (Month, Year, etc.)
14. Have an audit or review of its books and records by an outside accountant or by a parent body auditor/representative?	X ((b) Initiation Fees (c) Transfer Fees N/A N/A N/A N/A N/A N/A N/A
15. Discover any loss or shortage of funds or other property?	X	(d) Work Permits \$ per
 (Answer "Yes" even if there has been repayment or recovery.) 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? 		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?
17. Liquidate or reduce any liabilities without disbursement of cash?		23. Were any of your organization's assets pledged as security or encumbered in any other way at the end of the reporting period?
		24. Did your organization have any contingent liabilities at the end of the reporting period?
(If the answer to any of the above questions is "Yes," pain Item 75 as explained in the instructions for each item		ails (If the answer to Item 23 or 24 is "Yes," provide details in Item 75.)

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Complete Schedules 1 Through 15 Before Completing Statement A

Enter Amounts in Dollars Only - Do Not Enter Cents

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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
39. Dues		0	56. To Officers	9	1 4 6 2 2 5 7
40. Per Capita Tax		206454020	57. To Employees	10	6 1 7 5 2 8 2 5
41. Fees		3 4 9 1 5	58. Per Capita Tax	1	5 3 6 0 8 6 6
42. Fines		0	59. Fees, Fines, Assessments, etc		0
43. Assessments		0	60. Office & Administrative Expense	13	28081263
44. Work Permits		0	61. Educational & Publicity Expense		10721978
45. Sale of Supplies		7 4 1 6 2	62. Professional Fees		3 1 1 3 1 5 1
46. Interest		5 6 4 6 3 3 7 2	63. Benefits	11	5 1 0 3 8 1 0 8
47. Dividends	Ì	2 3 6 1 8	64. Contributions, Gifts & Grants	12	1 3 8 6 9 5 5
48. Rents		1 4 0 4 1 2	65. Supplies for Resale		200595
49. Sale of Investments & Fixed Assets	6	7 2 5 0 8 0	66. Direct Taxes]	8 9 0 6 2 8 8
50. Loans Obtained	8	0	67. Withholding Taxes		2 7 9 3 2 6 9 7
51. Repayments of Loans Made	1	1 5 4 2 9 4 9	68. Purchase of Investments & Fixed Assets	7	4 9 9 8 0 6 4 0
52. On Behalf of Affiliates for Transmittal to Them	}	1 0 6 7 3 5 2 9	69. Loans Made	1	3 4 6 4 5 3 4
53. From Members for Disbursement on Their Behalf		0	70. Repayment of Loans Obtained	8	2 1 3 3 3 3
54. Other Receipts	14	4 9 5 3 5 7 0 0	71. To Affiliates of Funds Collected on Their Behalf	[]	10418411
			72. On Behalf of Individual Members		20339071
			73. Other Disbursements	15	3 7 7 6 2 8 8 6
55. TOTAL RECEIPTS	F	3 2 5 6 6 7 7 5 7	74. TOTAL DISBURSEMENTS		3 2 2 1 3 5 8 5 8

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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		_	Loa														R	epa)	men	ts R	tecei	red During	Per	lod						Loa			
business enterprises regardless of amount. (A)		Out Sta	star nt of (E	Pe	g at riod	l						lade eriod						Cas (D)(-		Other	Tha (D)(ash				Out	stand of f (E)	ding : Perio)	at d	
Name: CITIZENS ACTION FUND Purpose: NOTE ON PROPERTY Security: PROPERTY Terms: MONTHLY			2	9	6	5	5							0			,				0				•	0				2	9 6		5 (
2. Name: MCDONALD, DUNCAN Purpose: NOTE ON PROPERTY Security: PROPERTY Terms: MONTHLY			3	3	8	3	3							0							0			_		0				3	3 8	-	3 ;
3. Name: CANCEL, ANGEL Purpose: NOTE ON PROPERTY Security: PROPERTY Terms: MONTHLY			3	3	3	2	6							0			3	3	3	2	6			_		0							•
4. Totals from additional pages (if any)	1 0	2	8	5	8	9	5	3	4	5	0	4	4	3	1	4	. 8	4	4	1	6	6	2	2 0	0	0	1	2	1	8	9 9	9 :	2 :
5. Totals of loans not listed above			6	5	0	8	5			1	4	0	9	1	T		2	5	2	0	7		5	8	2	9				4	8	1	4
6. Totals of Lines 1 through 5	1 0	4	4	7	7	9	4	3	4	6	4	5	3	4	1	5	4	2	9	4	9	6	7	8	2	9	1	2	3	0	1 8	5	5
The totals from Line 6 are entered in		·····c	Item	n 27 nn (A)	••••				11	em (59						Iten	1 51	•••••	•••••	with	Ite Expl	em 7 lana	5 tion					l	tem 2 Olum	 27 n (3)

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SCHEDULE 2 - INVESTMENTS (OTHER THAN U.S. TREASURY SECURITIES) SCHEDULE 3 - OTHER ASSETS

FILE NUMBER: 0 0 0 - 1 4 9

Description (A)	Amount (B)													
Marketable Securities 1. Total Cost	3	1	7	9	5	2	7	8	6					
2. Total Book Value	3	1	7	9	5	2	7	8	6					
List each marketable security which has a book value over \$1,000 and exceeds 20% of Line 2.														
(a) None									0					
(b)														
(c)	_			_										
(d)	-													
Other Investments 4. Total Cost			6	7	0	0	0	0	0					
5. Total Book Value									0					
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					
UBG, INC									0					
UBE, INC									0					
(d)	_													
(e) Total from additional pages (if any)		_	_											
7. Total of Lines 2 and 5	3	1	7	9	5	2	7	8	6					
The total from Line 7 is entered in		•••••		Item	29,	Col	umn	(B)						
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Description (A)				Вос	ok V (B)		_		
1. Family Education Center		2	7	2	5	6	3	2	3
2. Inventory - Resale Items			1	1	1	8	5	3	4
3.									
4.									
5.									
6. Total from additional pages (if any)									
7. Total of Lines 1 through 6	Γ	2	8	3	7	4	8	5	7

SCHEDULE 4 - OTHER LIABILITIES

Description (A)							
1. Payroll Deductions		2	0	7	4	7	3
2.							
3				_		_	
4							
5		<u>.</u>					
6. Total from additional pages (if any)			<u> </u>				
7. Total of Lines 1 through 6		2	0	7	4	7	3
The total from Line 7 is entered in		***********	item	36,	Colu	mn ((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): None	0	grand the contract of the contract	0	0
2. Totals from additional pages (if any)	450197		4 5 0 1 9 7	450197
3. Buildings (give location): Black Lake Golf Course	7555850	<u> </u>	6810940	6810940
4. Totals from additional pages (if any)	83361116	0	8 3 3 6 1 1 1 6	83361116
5. Automobiles and Other Vehicles	803183	748523	5 4 6 6 0	54660
6. Office Furniture and Equipment	34550419	26327100	8 2 2 3 3 1 9	822331
7. Other Fixed Assets	728757	655147	7 3 6 1 0	7361
8. Totals of Lines 1 through 7	127449522	28475680	98973842	9897384

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 - Little Rock, AR (Region 5)	126730	126730	325000	325000
Sale - Argos, IN (Local 2088)	143955	143955	130000	130000
3. Sale - Parcel, Oak Creek, WI	74539	74539	156688	156688
4. Sale - Fayette, AL (Local 759)	66000	66000	70000	70000
5. Totals from additional pages (if any)	16623	16623	43392	43392
6. Totals of Lines 1 through 5	427847	427847	725080	725080
	7. Less Reinvestments			0
	8. Net Sales			7 2 5 0 8 0
The total from Line 8 is entered in				Item 49

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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)
Purchases over Sales - Investments	44917373	44917373	44917373
Improvements - Solidarity House, Detroit, MI	246106	246106	246106
Improvements - Region 1, Warren, MI	206148	206148	206148
1. Improvements - Family Education Center	9249	9249	9249
5. Totals from additional pages (if any)	4601764	4601764	4601764
6. Totals of Lines 1 through 5	49980640	49980640	49980640
	7. Less Reinvestments	<u> </u>	0
	8. Net Purchases	4 9	980640
The total from Line 8 is entered in			Item 68

SCHEDULE 8 -- LOANS PAYABLE

Developed Lance Developed Association	1			~				Lana Obtained	l				Rec	ayn	nent	Made	During Period						~			
Source of Loans Payable at Any Time During the Reporting Period (A)			ins i irt o (i					Loans Obtained During Period (C)				-	Casi D)(1				Other Than (D)(2)					ans voio (
Local Union Loans	1	5	1	7	7	C	0	·	0	1		0	0	0	0	0			0	1	4	1	7	7	0) (
2. Construction Loan Payable		2	2	6	6	2	2 1		0	1		1	3	3	3	3			0		1	1	3	2	8	_ ;
3.								<u>-</u>																		
4										-						_			\downarrow							
5. Totals from additional pages (if any)		_																								
6. Totals of Lines 1 through 5	1	7	4	4	3	2	2 1		0	2	2	1	3	3	3	3			0	1	5	3	0	9	8	3
The total from Line 6 is entered in	!		Ito	m 3	A			Item 50					ltor	n 7(`			m 75					Itor	n 3		
THE GOLD TO SEE CHARLES IN	••••••		olun			•••••	******		*******		****		1101		• ••••	********	with Exp	olanation	1		****	Col				

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SCHEDULE 9 - ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

FILE NUMBER: 0 0 0 - 1 4 9

(A) Name (List all persons who held office during the reporting period they received no salary or other disbursements.)	d even if	(be	Gros fore											Disl	bun or C			_) Oi	ther							
(B) Title (Enter title of officer, such as PRESIDENT or TREASURER.)	Status (C)*	oth	er d		uct				Allo	wa (E		æs			3us				Disbun (semei G)	nts			-	ota (H)	l 	
BANTOM GERALD		1	3	0	3	4	1	Ī		7	5	0	0		6	0	8	5			0		1	4	3	9	2
· VICE PRESIDENT	С																										
BUNN MARY		1	4	2	1	4	1			7	5	0	٥		6	8	9	8			0		1	5	6	5	3
SEC-TREASURER	C																										
CASTEEL GARY		1	1	9	0	7	7	T		7	5	6	6	1	. 0	0	3	0	;		0		1	3	6	6	7
REGIONAL DIR	С	1						١														İ					
GETTELFINGER RONALD		1	4	5	4	6	6			7	5	6	٥		5	5	6	8			0		1	5	8	5	9
D. PRESIDENT	С																										
GOODEN NATHANI		1	. 3	0	3	4	1	T		7	5	0	0	1	. 0	0	1	. 3	i		0		1	4	7	8	5
5. VICE PRESIDENT	С																										
KING ROBERT		1	. 3	0	4	9	1	1		7	4	6	0		7	4	. 3	1			0		1	4	5	3	8
3. VICE PRESIDENT	С													i													
MAHAFFEY LLOYD		1	. 1	9	1	. 5	2	Ī		7	5	4	0		9	2	2) 6			0		1	3	5	8	9
REGIONAL DIR	С																										
8. Totals from additional pages (If any)		1	3	3	4	1 (0 0		8	2	7	2	0	1 4	J 3	6	3 9	7			0		1	5	6 0	5	1
9. Totals of Lines 1 through 8		2	2	5	1	1 (9) 1	3	5	3	4	6	1 9	3 (9	2	2 8	Ĭ <u> </u>		0		2	5	8 5	3	8
														10.	Les	s D	ledi	uctic	ns [1	1	2	;	3	1	2	6
The total from Line 11 is entered in									. Iten	n 56	3			11.	Net	Dis	sbu	rsen	nents	1	4	6	: :	2	2	5	7

*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.)

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SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES

FILE NUMBER: 0 0 0 - 1 4 9

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SCHEDULE 11 - BENEFITS

FILE NUMBER: 0 0 0 - 1 4 9

ting Members & TPA's	1	~					_	
	١.	2	6	1	8	9	9	5
nk's Catering				7	1	6	4	6
sion Trusts		5	5	1	5	2	0	5
Qualified Savings Pln				5	8	9	5	1
	3	3 2	: 7	7	3	3	1	1
	5	5 1	C	3	8	1	0	8
-	nsion Trusts n Qualified Savings Pln	n Qualified Savings Pln	n Qualified Savings Pln	n Qualified Savings Pln 3 2 7	n Qualified Savings Pln 5	n Qualified Savings Pln 5 8	1 Qualified Savings Pln 5 8 9 3 2 7 7 3 3	1 Qualified Savings Pln 5 8 9 5 3 2 7 7 3 3 1

SCHEDULE 12 - CONTRIBUTIONS, GIFTS & GRANTS

Description (A)				ount 3)			
1. Memorials and Flowers			1	8	6	5	8
2. Conferences & Committees		1	6	1	8	2	9
3. Citizenship Groups				9	0	9	2
4. Charitable Organizations			7	0	6	9	7
5. Educational Groups			1	5	6	2	9
6. Fratemal Organizations					5	5	0
7. Total from additional pages (if any)	1	1	1	0	5	0	0
8. Total of Lines 1 through 7	1	3	8	6	9	5	5
The total from Line 8 is entered in	 	•••••	ite	:m 6	4		

SCHEDULE 13 - OFFICE & ADMINISTRATIVE EXPENSE

Description (A)					ount 3)		_	
1. Travel		2	7	1	6	7	3	7
2. Delivery			2	0	4	6	4	9
3. Equipment Rental		1	3	0	9	3	6	6
4. Fees			2	2	8	8	5	2
5. Maintenance and Repair			1	5	9	5	6	7
6. Maintenance Bldg Supplies		•	4	3	1	8	8	7
7. Total from additional pages (if any)	2	3	0	3	0	2	0	5
8. Total of Lines 1 through 7	2	8	0	8	1	2	6	3
The total from Line 8 is entered in		•••••		. Ite	m 6	D		

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SCHEDULE 14 - OTHER RECEIPTS

Description (A)					ount 3)	İ		
1. Escrows Received		3	6	9	5	9	5	2
2. Royalties			1	2	4	7	3	0
3. Conference Income		1	0	1	4	1	8	6
4. Honorariums					1	3	3	0
5. Health Club Fees					2	7	9	5
6. Gain on Exchange Canadian Funds			1	5	0	0	0	4
7. Bankruptcy Recovery			2	8	7	5	0	0
8.WSU Labor Study Course	-		1	7	8	1	2	5
9.Films						1	4	0
10. Registration Fees			1	3	0	8	8	5
11. Organizing Fund Donations		2	7	4	1	7	4	3
12. Regional Funds-Fund Raisers		2	8	3	4	6	4	0
13. Council Funds-Fund Raisers			3	6	6	1	2	9
14. Subpoena Fees						4	6	7
15. Administrative Fees		1	8	1	3	0	1	0
16. Total from additional pages (if any)	3	6	1	9	4	0	6	4
17. Total of Lines 1 through 16	4	9	5	3	5	7	0	0
The total from Line 17 is entered in	•••••	•••••		Ite	m 5	4		

SCHEDULE 15 - OTHER DISBURSEMENTS

Description (A)					ouni 3)	t		
1.Escrows Disbursed		3	7	9	0	9	0	1
2.Public Review Board			4	6	5	3	4	1
3.Legal Settlements				6	0	8	2	8
4. Interest - Loans Payable			1	2	2	3	2	7
5. Moving			1	8	0	5	8	2
6.Leagues and Tournaments			2	2	6	3	2	9
7.Special Events				1	7	9	1	3
8. First Contract Expense			4	7	4	3	9	3
9.Local Union Subsidies		1	6	4	4	6	7	1
10.Local Union Rebates	3	0	7	7	9	6	0	1
11.								
12.								
13.								·
14.								
15.								
16. Total from additional pages (if any)								
17. Total of Lines 1 through 16	3	7	7	6	2	8	8	6

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ORGANIZATION NAME:		
AUTO WORKERS AFL-CIO		
ENDING DATE OF PERIOD COVERED:		
12/21/2004		

men	below loans to officers, employees, or nbers which at any time during the reporting od exceeded \$250 and list all loans to			oans		•	Repayments Received During Period g at Loans Made Cash Other Than Cash		ans	Made	A		Repayments R	ved During Period			Loar	ns ding :	at			
busi	ness enterprises regardless of amount. (A)		Start	of Po (B)	eriod	ì		ı			Perio			Cash (D)(1)		Other Than Cash (D)(2)		End	of F (E)	erio	d	
4.	Name: UBG, INC. Purpose: NOTE Security: NONE Terms: DEMAND	2		<u> </u>	0	0	0	5	5 1	1	0	0	0		0	0	2	6	1	1 () (0 0
5.	Name: J HIGGINS Purpose: NOTE ON PROPERTY Security: PROPERTY Terms: MONTHLY	_	3	3 5	3	1	5						0	3 9 4	6	0			3	1 3	3 (6 9
6.	Name: UBE, INC. Purpose: LOAN Security: NONE Terms: DEMAND	2	0 () 0	0	0	0	1 7	7 0	• (0 0	0	0		0	0	3	7	0	0 (_)	0 0
7.	Name: LOCAL 7, REG 1 Purpose: MORTGAGE Security: PROPERTY Terms: MONTHLY		7 4	4 8	3 2	9	1						0	1 5 9 8 9	3	0		5	8	8 3	3	9 8

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

mem perio	below loans to officers, employees, or bers which at any time during the reporting dexceeded \$250 and list all loans to	Loans Outstanding at	Loans Made	Repayments Recei	ived During Period	Loans Outstanding at
busir	ness enterprises regardless of amount. (A)	Start of Period (B)	During Period (C)	Cash (D)(1)	Other Than Cash (D)(2)	End of Period (E)
8.	Name: LOCAL 155, REG 1 Purpose: MORTGAGE Security: PROPERTY Terms: MONTHLY	162100	0	23909	0	138191
9.	Name: LOCAL 160, REG 1 Purpose: MORTGAGE Security: PROPERTY Terms: MONTHLY	1 1 5 8 0 6	0	20220	0	95586
10.	Name: LOCAL 51, REG 1 Purpose: MORTGAGE Security: PROPERTY Terms: MONTHLY	1194950	0	98207	0	1096743
11.	Name: LOCAL 869, REG 1 Purpose: MORTGAGE Security: PROPERTY Terms: MONTHLY	3 4 5 8 2	0	27708	0	6874

ORGANIZATION NAME:		
AUTO WORKERS AFL-CIO	 	
ENDING DATE OF PERIOD COVERED:	 	
12/31/2004		

List below loans to officers, employees, or members which at any time during the reporting period exceeded \$250 and list all loans to	Loans Outstanding at	Loans Made	Repayments Received During Period	Loans Outstanding at
business enterprises regardless of amount. (A)	Start of Period (B)	During Period (C)	Cash Other Than Cash (D)(1) (D)(2)	End of Period (E)
12. Name: LOCAL 249, REG 5 Purpose: MORTGAGE Security: PROPERTY Terms: MONTHLY	720903			966813
13. Name: LOCAL 424, REG 9 Purpose: MORTGAGE Security: PROPERTY Terms: MONTHLY	0	185000	7 4 8 5 0	1 7 7 5 °1 5
14. Name: LOCAL 36, REG 1A Purpose: MORTGAGE Security: PROPERTY Terms: MONTHLY	673484	0	8 3 4 9 3 0	589991
15. Name: LOCAL 3000, REG 1A Purpose: MORTGAGE Security: PROPERTY Terms: MONTHLY	3 3 4 3 3 9	0	190217 0	144122

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO

ENDING DATE OF PERIOD COVERED: 12/31/2004

List below loans to officers, employees, or members which at any time during the reporting period exceeded \$250 and list all loans to		Loans		Loans Made	Repayments Recei	ved During Period	Loans Outstanding at	
busir	ness enterprises regardless of amount. (A)	Outstanding at Start of Period (B)		During Period (C)	Cash (D)(1)	Other Than Cash (D)(2)	Outstanding at End of Period (E)	
16.	Name: LOCAL 415, REG 5 Purpose: MORTGAGE Security: PROPERTY Terms: MONTHLY	(0	4 5 0 0 0	0	0	45000	
17.	Name: LOCAL 637, REG 1D Purpose: MORTGAGE Security: PROPERTY Terms: MONTHLY	18945	5	0	2 1 7 7	0	16768	
18.	Name: LOCAL 658, REG 2B Purpose: MORTGAGE Security: PROPERTY Terms: MONTHLY	2 4 2 6	1	0	24261	0	0	
19.	Name: LOCAL 440, REG 3 Purpose: MORTGAGE Security: PROPERTY Terms: MONTHLY	2 3 5 3 3	3	. 0	9727	0	13806	

FILE NUMBER: 0 0 0 - 1 4 9

SCHEDULE 1 – LOANS RECEIVABLE (continued)

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	Loans Made	Repayments Rece	ived During Period	Loans Outstanding at
		Start of Period (B)	During Period (C)	Cash (D)(1)	Other Than Cash (D)(2)	End of Period (E)
Purpose: Security:	OCAL 2357, REG 3 MORTGAGE PROPERTY IONTHLY	40546	0	40546	0	0
Purpose: Security:	OCAL 450, REG 4 MORTGAGE PROPERTY MONTHLY	3 1 2 7 9	0	4926	0	26353
Purpose: Security:	OCAL 1070, REG 5 MORTGAGE PROPERTY MONTHLY	4009	0	4 0 0 9	0	0
Purpose Security:	OCAL 2297, REG 5 : MORTGAGE : PROPERTY MONTHLY	5940	0	2856	0	3084

(1)

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ORGANIZATION NAME: AUTO WORKERS AFL-CIO	FILE NUMBER: 0 0 0 - 1 4
ENDING DATE OF PERIOD COVERED:	

SCHEDULE 1 – LOANS RECEIVABLE (continued)

List below loans to officers, employees, or members which at any time during the reporting period exceeded \$250 and list all loans to		Loans Outstanding at	Loans Made	Repayments Rece	Loans Outstanding at		
busir	ness enterprises regardless of amount. (A)	Start of Period (B)	During Period (C)	Cash (D)(1)	Other Than Cash (D)(2)	End of Period (E)	
24.	Name: LOCAL 2123, REG 8 Purpose: MORTGAGE Security: PROPERTY Terms: MONTHLY	3058	0	3 0 5 8	0	0	
25.	Name: LOCAL 774, REG 9 Purpose: MORTGAGE Security: PROPERTY Terms: MONTHLY	106060	0	3 7 5 5 6	0	68504	
26.	Name: LOCAL 19 & LOCAL 260 Purpose: MORTGAGE Security: PROPERTY Terms: MONTHLY	234463	0	26385	0	208078	
27.	Name: LOCAL 325, REG 5 Purpose: MORTGAGE Security: PROPERTY Terms: MONTHLY	3 1 7 5 5 0	0	3 4 6 1 1	0	282939	

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ORGANIZATION NAME: AUTO WORKERS AFL-CIO	
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SCHEDULE 1 – LOANS RECEIVABLE (continued)

List below loans to officers, employees, or members which at any time during the reporting period exceeded \$250 and list all loans to		nbers which at any time during the reporting Loans od exceeded \$250 and list all loans to		Repayments Recel	Loans Outstanding at	
busin	ess enterprises regardless of amount. (A)	Start of Period (B)	Loans Made During Period (C)	Cash (D)(1)	Other Than Cash (D)(2)	End of Period (E)
28.	Name: LOCAL 5286, REG 8 Purpose: LOAN Security: NONE Terms: MONTHLY	0	6000	6000	0	0
29.	Name: LOCAL 6000, REG 1A Purpose: LOAN Security: NONE Terms: MONTHLY	8 0 9 3 9	0	80939	0	0
30.	Name: LOCAL 4121, REG 5 Purpose: LOAN Security: NONE Terms: MONTHLY	0	236300	0	0	236300
31.	Name: LOCAL 1805, REG 5 Purpose: LOAN Security: NONE Terms: MONTHLY	1 3 7 5 0	0	0	0	13750

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19)

ORGANIZATION NAME: AUTO WORKERS AFL-CIO

ENDING DATE OF PERIOD COVERED: 12/31/2004

Form LM-2 (Revised 2000)

List below loans to officers, employees, or members which at any time during the reporting period exceeded \$250 and list all loans to		Loans	Loans Made	Repayments Recei	Loans Outstanding at		
busir	ness enterprises regardless of amount. (A)	Outstanding at Start of Period (B)	During Period (C)	Cash (D)(1)	Other Than Cash (D)(2)	End of Period (E)	
40.	Name: LOCAL 260, REG 9 Purpose: LOAN Security: NONE Terms: MONTHLY	37222	0	16034	O	2 1 1 8 8	
41.	Name: LOCAL 813, REG 9 Purpose: LOAN Security: NONE Terms: MONTHLY	8 6 3 2 5	0	4872	0	8 1 4 5 3	
42.	Name: LOCAL 2396, REG 9A Purpose: LOAN Security: NONE Terms: MONTHLY	132612	0	1 3 2 6 1 2	0	0	
43.	Name: LOCAL 376, REG 9A Purpose: LOAN Security: NONE Terms: MONTHLY	0	5 8 8 0 0	43211	0	1 5 5 8 9	

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:

FILE NUMBER: 0 0 0 - 1 4 9

SCHEDULE 1 – LOANS RECEIVABLE (continued)

List below loans to officers, employees, or members which at any time during the reporting period exceeded \$250 and list all loans to		Loans Outstanding at	Loans Made	Repayments Recei	ved During Period	Loans Outstanding at	
busin	ess enterprises regardless of amount. (A)	Start of Period (B)	During Period (C)	Cash (D)(1)	Other Than Cash (D)(2)	End of Period (E)	
44.	Name: LOCAL 2336, REG 9 Purpose: LOAN Security: NONE Terms: MONTHLY	77907	0	1 4 7 2 3	0	63184	
45.	Name: LCOAL 3039, REG 9 Purpose: LOAN Security: NONE Terms: MONTHLY	8035	0	7 6 2 1	0	4 1 4	
46.	Name: LOCAL 2368, REG 9A Purpose: LOAN Security: NONE Terms: MONTHLY	0	3 3 2 2 7	7000	0	26227	
47.	Name: LOCAL 3030, REG 9A Purpose: LOAN Security: NONE Terms: MONTHLY	64000	0	0	0	64000	

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AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2004	

SCHEDULE 1 – LOANS RECEIVABLE (continued)

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	Loans Made	Repayments Recei	ved During Period	Loans Outstanding at
		Start of Period (B)	During Period (C)	Cash (D)(1)	Other Than Cash (D)(2)	End of Period (E)
48.	Name: LOCAL 3041, REG 8 Purpose: LOAN Security: NONE Terms: MONTHLY	4 2 6 3	0	1 4 1 2	0	2851
49.	Name: LOCAL 2379, REG 5 Purpose: LOAN Security: NONE Terms: MONTHLY	20000	0	0	0	20000
50.	Name: LOCAL 7902, REG 9A Purpose: LOAN Security: NONE Terms: MONTHLY	0	1 0 0 0 0 0	0	0	100000
51.	Name: PORT CITY BLDG ASSOC Purpose: LOAN Security: NONE Terms: MONTHLY	23000	0	4 4 0 0	0	18600

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FILE NUMBER: 0 0 0 - 1 4 9 **AUTO WORKERS AFL-CIO**

ENDING DATE OF PERIOD COVERED: 12/31/2004

SCHEDULE 1 – LOANS RECEIVABLE (continued)

List below loans to officers, employees, or members which at any time during the reporting period exceeded \$250 and list all loans to		Loans Outstanding at	Loans Made	Repayments Receiv	Repayments Received During Period			
busii	ness enterprises regardless of amount. (A)	Start of Period (B)	During Period (C)	Cash (D)(1)	Other Than Cash (D)(2)	Outstanding at End of Period (E)		
36.	Name: LOCAL 786, REG 8 Purpose: LOAN Security: NONE Terms: MONTHLY	205249	0	16323	0	188926		
37.	Name: LOCAL 1748, REG 8 Purpose: LOAN Security: NONE Terms: MONTHLY	5 0 7 1	0	0	0	5071		
38.	Name: LOCAL 2426, REG 8 Purpose: LOAN Security: NONE Terms: MONTHLY	2084	0	2084	0	0		
39.	Name: LOCAL 1522, REG 8 Purpose: LOAN Security: NONE Terms: MONTHLY	0	2500	5 8 6	0	1914		

ORGANIZATION NAME:

ORGANIZATION NAME: AUTO WORKERS AFL-CIO

ENDING DATE OF PERIOD COVERED: 12/31/2004

SCHEDULE 1 – LOANS RECEIVABLE (continued)

List below loans to officers, employees, or members which at any time during the reporting period exceeded \$250 and list all loans to		Loans Outstanding at	Loans Made	Repayments Receiv	red During Period	Loans Outstanding at
busir	ess enterprises regardless of amount. (A)	Start of Period (B)	During Period · (C)	Cash (D)(1)	Other Than Cash (D)(2)	End of Period (E)
32.	Name: LOCAL 1196, REG 2 Purpose: LOAN Security: NONE Terms: MONTHLY	4 2 3 5	0	1 5 2 1	0	2714
33.	Name: LOCAL 751, REG 4 Purpose: LOAN Security: NONE Terms: MONTHLY	560477	0	7 1 8 8 5	0	488592
34.	Name: LOCAL 1982, REG 4 Purpose: LOAN Security: NONE Terms: MONTHLY	1 6 4 0	0	1640	0	0
35.	Name: LOCAL 25, REG 5 Purpose: LOAN Security: NONE Terms: MONTHLY	3 4 6 5	0	3 4 6 5	0	0

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ORGANIZATION NAME:
AUTO WORKERS AFL-CIO

ENDING DATE OF PERIOD COVERED:

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List below loans to officers, employees, or members which at any time during the reporting period exceeded \$250 and list all loans to		nbers which at any time during the reporting Loans of exceeded \$250 and list all loans to		Repayments Recei	Loans Outstanding at	
busir	ess enterprises regardless of amount. (A)	Start of Period (B)	Loans Made Ouring Period (C)	Cash (D)(1)	Other Than Cash (D)(2)	End of Period (E)
52.	Name: LOCAL 2056, REG 4 Purpose: LOAN Security: NONE Terms: MONTHLY	5 4 0 6	0	2736	0	2670
53.	Name: LOCAL 2127, REG 4 Purpose: LOAN Security: NONE Terms: MONTHLY	5000	0	0	0	5 0 0 0
54.	Name: LOCAL 1532, REG 5 Purpose: LOAN Security: NONE Terms: MONTHLY	1 5 8 0 1	4 5 4 4	0	0	20345
55.	Name: UBN, INC. Purpose: LOAN Security: NONE Terms: DEMAND	0	6 2 0 0 0	0	6 2 0 0 0	0

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ORGANIZATION NAME: AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	

SCHEDULE 5 - FIXED ASSETS: LAND (continued)

Description of Land (give location) (A)	Cost or Other Basis (B)	Total Depreciation or Amount Expensed (C)	Book Value (D)	Fair Market Value (E)
Detroit, Michigan (Local 7 Land)	3 5 2 9 4		3 5 2 9 4	35294
Lansing, Michigan (Land)	25000		2 5 0 0 0	25000
Pontiac, Michigan (Land)	65000		65000	65000
Hastings on the Hudson (Land)	1000		1 0 0 0	1000
Winnsboro, South Carolina (Land)	3 2 3 9 0 3		3 2 3 9 0 3	323903
				
			1	

SCHEDULE 5 – FIXED ASSETS: BUILDINGS (continued)

Description of Buildings (give location) (A)	Cost or Other Basis (B)	Total Depreciation or Amount Expensed (C)		Book Value (D)	Fair Market Vatue (E)
Solidarity House, Detroit, MI	14712748	0	1 4 7	1 2 7 4 8	14712748
Retiree Center, Detroit, MI	6633660	0	6 6	3 3 6 6 0	6633660
Region 1, Warren, MI	12692663	0	1 2 6	9 2 6 6 3	1 2 6 9 2 6 6 3
Region 1A, Taylor, MI	5026655	0	5 0	2 6 6 5 5	5026655
Romulus, MI (Local 157)	277480	0	2	7 7 4 8 0	277480
Region 1C, Flint, MI	941938	0	9	4 1 9 3 8	941938
Sub-Region 1C, Lansing, MI	207826	0	2	0 7 8 2 6	207826
Region 1D, Grand Rapids, MI	2619830	0	2 6	1 9 8 3 0	2619830
Jackson Labor Temple, MI	3 2 5 0 0 0	0	3	2 5 0 0 0	325000
Gadsden, AL (Local 487)	27375	0		2 7 3 7 5	27375
Sub-Region 5, Fremont, CA	1196546	0	1 1	9 6 5 4 6	1196546
Region 5, Pico Rivera, CA	1898085	0	1 8	9 8 0 8 5	1898085
Region 9A, Farmington, CT	1491872	0	1 4	9 1 8 7 2	1491872
Washington Office, DC	2982263	0	2 9	8 2 2 6 3	2982263
Rock Island, IL (Local 1309)	191185	0	1	9 1 1 8 5	191185
Region 3, Indianapolis, IN	1667150	0	1 6	6 7 1 5 0	1667150
Indianapolis, IN (Local 1226)	4 1 5 8 0 0	0	4	1 5 8 0 0	415800

SCHEDULE 5 - FIXED ASSETS: BUILDINGS (continued)

Description of Buildings (give location) (A)	Cost or Other Basis (B)	Total Depreciation or Amount Expensed (C)	Book Value (D)	Fair Market Value (E)
Sub-Region 3, Lousiville, KY	192500	0	1 9 2 5 0 0	192500
Region 5, Hazelwood, MO	5026930	0	5 0 2 6 9 3 0	5026930
N. Tarrytown, NY (Local 664)	437642	0	4 3 7 6 4 2	437642
Region 9, Amherst, NY	9468178	0	9 4 6 8 1 7 8	9468178
Reg 8 Organizing, Mt Holly, NC	127893	0	1 2 7 8 9 3	127893
Greenville, PA (Local 1653)	26211	0	26211	26211
Region 2B, Maumee, OH	2600758	0	2600758	2600758
Canton, OH (Local 542)	85785	0	8 5 7 8 5	85785
Tulsa, OK (Local 1093)	866246	0	8 6 6 2 4 6	866246
Region 8, Lebanon, TN	3025322	0	3 0 2 5 3 2 2	3025322
Memphis, TN (Local 988)	4 1 8 2 5	0	4 1 8 2 5	4 1 8 2 5
Sub-Region 4, Oak Creek, WI	1085991	0	1085991	1085991
Albany, GA (Local 2082)	82000	0	8 2 0 0 0	82000
Pat Greathouse Ctr, Ottawa, IL	1291500	0	1291500	1291500
Haggerstown, IN (Local 1501)	142618	0	1 4 2 6 1 8	142618
Cedar Rapids, IA (Local 299)	55000	0	5 5 0 0 0	55000
Sub-Region 5, Kansas City, MO	214054	0	2 1 4 0 5 4	214054



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FILE NUMBER:	0	0	0	-	1	4	9

SCHEDULE 5 – FIXED ASSETS: BUILDINGS (continued)

Description of Buildings (give location) (A)	Cost or Other Basis (B)	Total Depreciation or Amount Expensed (C)	Book Vatue (D)	Fair Market Value (E)		
Redford, MI Local 985)	432833	0	4 3 2 8 3 3	432833		
Region 4, Lincolnshire. IL	4415992	0	4 4 1 5 9 9 2	4415992		
La Porte, IN (Local 530)	10905	0	10905	10905		
Hagerstown, MD (Local 842)	80461	0	8 0 4 6 1	80461		
Centralia, IL (Local 1766)	4 4 6 3 0	0	4 4 6 3 0	4 4 6 3 0		
Delphi, IN (Local 914)	40000	0	4 0 0 0 0	40000		
Philadelphia, PA (Local 813)	2 2 6 9 1 5	0	2 2 6 9 1 5	226915		
Philadelphia, PA (Local 757)	3 0 8 5 1	0	3 0 8 5 1	30851		

ORGANIZATION NAME:	
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SCHEDULE 6 - SALE OF INVESTMENTS AND FIXED ASSETS (continued)

Description (if land or buildings, give location) (A)	Cost (B)	Book Value (C)	Gross Sales Price (D)	Amount Received (E)
Sale - Albion, MI (Local 474)	15917	15917	41000	41000
Sale of Stocks	706	706	2392	2392
		··-		
		······································		· <u> </u>
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ORGANIZATION NAME:		 	•
AUTO WORKERS AFL-CIO			
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SCHEDULE 7- PURCHASE OF INVESTMENTS AND FIXED ASSETS (continued)

Description (if land or buildings, give location) (A)	Cost (B)	Book Value (C)	Cash Pald (D)
Building Construction - Region 4, Lincolnshire, IL	3934597	3934597	
Improvements - Black Lake Golf Course, Onaway, MI	28043	28043	28043
Purchase of Furniture and Equipment	627443	627443	627443
Purchase of Other Fixed Assets	2978	2978	2978
Purchase of Vehicle	8703	8703	8703
			
			<u> </u>

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
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SCHEDULE 9 - ALL OFFICERS AND DISBURSEMENTS TO OFFICERS (continued)

(A) Name (List all persons who hold office during the reporting period every they received no salary or other disbursements.)	n if		Gro:										sb. for					Other							
(B) Title (Enter title of officer, such as PRESIDENT or TREASURER.)	Status (C)*	ott	er o	bet (D		ion	s)	Ailov (var (E)	-	S		В	ısi F)	_	SS		Disbursemen (G)	ts			To			
OCHOCINSKA GERALDI		1	1	9	3	0	2	7	5	0	0		1	7	0	8	5	1	0	1	4	3	8	8	7
REGIONAL DIR	С																								
ortman donald	-	1	1	9	3	7	7	7	5	0	0		2	2	9	9	6		0	1	4	9	8	7	3
REGIONAL DIR	С																								
RAPSON CALVIN	<u></u>	1	3	0	3	4	1	7	5	2	0	T	1	5	2	2	6		0	1	-5	3	0	8	7
VICE PRESIDENT	С																								
ROTH ROBERT		1	. 1	9	2	2	7	7	5	4	0			9	0	3	4		0	1	3	5	8	0	1
REGIONAL DIR	C																		İ						
SETTLES JAMES		1	. 1	9	1	5	2	7	5	8	0	T	1	0	3	1	6		0	1	3	7	0	4	8
REGIONAL DIR	С																								
SHOEMAKER RICHARD		1	. 3	0	3	4	1	7	5	2	0	T		5	8	1	3		0	1	4	3	6	7	4
VICE PRESIDENT	С																								
TERRY KENNETH		,	. 1	9	1	<u> </u>	2	7	, 5	4	0			2	7	6	8		0	1	2	2 9	4	6	0
REGIONAL DIR	С																								
THURMAN TERRY		<u> </u>	1	. 9	3	0	2	7	' 5	5 2	0	\dagger		8	8	9	7	· - · ·	0	1	. 3	3 5	7	1	. 9
REGIONAL DIR	С																								
VICE PRESIDENT TERRY KENNETH REGIONAL DIR THURMAN TERRY	c	1	1	9	1	5	2	7	9 5	4	0			2	7	6	8		0	1	-	2 9	4	6	-

ORGANIZATION NAME: AUTO WORKERS AFL-CIO	FILE NUMBER: 0 0 0 - 1
ENDING DATE OF PERIOD COVERED: 12/31/2004	

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

A) Name (List all persons who hold office during the reporting period they received no salary or other disbursements.)	even if		(bei	ero for												C	oisb)			ne cia		Othe					·			
3) Title (Enter title of officer, such as PRESIDENT or TREASURER	Status (C)*		oth			duc					Al	low ()	ran E)	ce	s			us		ss		Disburse (G)	ment	s			To: (H			
BLLS JAMES			1	1	9	. :	3	0	2	Γ		7	5	0	0		1	4	8	8	8			0	1	4	1	6	9	0
REGIONAL DIR	С	i																												
HEELER PHILIP			1	1	9	. :	3	0	2	t		7	 5	0	0	T	1	7	8	8	6	1		•	1	4	4	6	8	8
REGIONAL DIR	C																													
ILLIAMS DENNIS		T	1	1	. 9	· :	3	0	2	t		7	 5	0	0	\dagger	1	8	7	8	8			•	1	4	5	5	 9	0
REGIONAL DIR	С																							ŀ						
		1	•							T	-					t	_							1	-					
		†								T						T								\dashv						
										İ																				
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		1								T						†														
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ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received m from your organization and any affil (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements iates.) (If applicable)	Gn (befo other	r de	axe	:s &	and		Allowance: (E)	S	Disbursements for Official Business (F)	Other Disbursements (G)			otal			
adams organizer n/a	RONALD		9	7	8	5	1	798	0	10908	0	1 '	1	6 7	7	3 (3
ABSCHBACKER CLERK TYPIST N/A	ROBIN		4	8	1	8	4		0	0	0	4	4	8	1	8 4	1
ABSCHBACKER TRAINING REP N/A	ROY *		4	7	6	4	8	2 1 2	1	1583	0		5	1 :	3	5 :	2
AILES SERVICING REP N/A	MICHABL		9	7	8	5	1	800	0	5 1 4 3	0	1	1	0	9	9	4
AKEMON INT'L OFF SEC N/A	DEAON		5	3	4	9	1		0	3 0 0	0		5	3	7	9	1

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ENDING DATE OF PERIOD COVERED:

12/31/2004

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

	nore than \$10,000 in total disbursaments liates.)	Gr (befo	oss ore (Disburseme for Officia	1	Other							
(B) Position (Enter employee's job title.)		othe			ctio	ns)		Allowance	es		Business		Disbursements				otal			
(C) Name of Affiliated Organization	(if applicable)			D)			_	(E)	_		(F)		(G)			(H)			
ALEXANDER	JANE		4	7	1	3	1			0		0	o		4	4	7 '	1	3	1
LEGAL SEC							l				ı									
N/A										į										
ALFRED	CHARLES	_	9	7	8	5	1	7 9	6	6	1629	0	0		1 :	2	2	1	0	7
RETIREE REP																				
N/A																				
ALLEN	MICHAEL		9	7	8	5	1	7 9	8	0	7 2 4	6	0		1	1	3 (0	7	
SERVICING REP																				
N/A																				
ALLEN	RAY		9	7	9	2	6	7 5	4	0	4 2 4	1 2	0		1	0	9	7	0	_ 8
TRAINING REP																				
N/A																				
ALLEN	WILLIAM		9	7	8	5	1	7 9	8	0	272	2 9	0	1	1	0	8	5	6	0
SERVICING REP											}									
N/A								i												



SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who receive from your organization and any (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	d more than \$10,000 in total disbursements affiliates.)	Gro (befor other	re ta	ixe:	s ar			Allowar (E)		s	Disbursements for Official Business (F)	Other Disbursements (G)			To (H	tal 1)		
ALLMAND TRAINING REP N/A	PAUL *		3 9	9 4	4 4	1 5		1 7	5	9	773	0		4	1	9	7	7 7
AMISON DATA PROCESS N/A	PATRICI		1	1 1	8 6	 6 7	,			0	0	0		1	1	8	•	6 7
ANCLAM SERVICING REP N/A	ROGER		9	8	0 7	7 6	5	7 9	2	2 0	6067	0	1	1	1 2	2 0	•	6 3
ANDERLE DE S SYS ANALYST N/A	ROBERT		9	9	5 (0 1		7 8	3 2	2 0	5067	0	1	1	1 2	2 3	3 8	88
ANDERSON SERVICING REP	CALDONI		9	7	7 :	3 2	2	7 €	5 8	3 6	5 2 7 7	0	1		1 (0 6	;	9 5

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
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(B) Position (Enter employee's job title.)	ore than \$10,000 in total disbursements liatos.)	Gri (befo other	. qe	axe Juc	s a	ind		Allow		ce:	s		ur r O	Hic	ia		Other Disbursements					otal			
(C) Name of Affiliated Organization	(if applicable)		([וי			1	(<u>E)</u>				(<u>F)</u>			(G)	<u> </u>			(1	1)			
ANDERSON	CHARLES		9	7	9 :	2 6	3	7	9	6	0	1	0	5	1	8	0		1	1	6	5 4	ļ (0 4	4
CITIZENSHIP REP		1					1																		
N/A																									
ANDERSON	CHARLES		9	8	0	0 1	1	7	5	2	0		3	1	C	0	0	T	1	C) {	3 6	3	2	1
SYS ANALYST		ŀ					ł																		1
N/A																									
ANDREWS	GORDON		9	7	9	2 (6	7	7	4	0		6	3	8	2	0	T	1	1	1 2	2 ()	4	8
SERVICING REP							ı																		
N/A		!																							
ANGEL	FRANCIS		9	7	8	5	1	7	9	8	0		6	7	2	2 8	0	1	1	1		2 (5	5	9
SERVICING REP																	1								
N/A																									
ANGUS	CRAIG		7	1	9	8	5		•		0			•		0	0	1		7	7	1 (9	8	_ 5
HVAC OPERATOR																									
N/A																	!								

ORGANIZATION NAME:		
AUTO WORKERS AFL-CIO		
ENDING DATE OF PERIOD COVERED:	 	
12/31/2004		

(A) Name (List all employees who received me from your organization and any affiliated (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements atos.)	Gr (befo	r de	axe	es a	and		Allowanc (E)	es		Disbursements for Official Business (F)	Other Disbursements (G)				otal H)		•	
ARGUELLO SERVICING REP N/A	RAY		9	3	2	9	4	5 4	4	1	3894	0	1	(2	2 6	3 :	2 9	
ARMOUR BOOKKEEPER A N/A	DEBRA		5	4	4	7	1			0	(0			5 4	4 4	1	7 1	1
ASSIST - REGION N/A	JOSEPH	1	1	1	6	2	9	7 9	4	0	19725	0	1	l ;	3 9	9 2	2	9 4	
ATWOOD ADMIN ASSISTANT N/A	JAMES	1	1	4	3	6	7	7 9	4	0	17070	0		1 :	3 :	9 (3	7 7	,
AUDIE-FIGUER ADMIN ASSISTANT N/A	ALICE	1	2	3	0	8	3	7 9	4	0	292	0		1 ;	3 :	3 9	9	4 8	

ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
IAUTU WURKERS AFL-CIU	
	·
ENDING DATE OF PERIOD COVERED:	
l12/31/2004	

(A) Name (List all employees who receive from your organization and any (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ed more than \$10,000 in total disbursements y affiliates.) On (if applicable)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
AWE BOOKKEEPER BI N/A	JENNIE	53162	0	0	0	53162
BAGGETT INT'L OFF SEC	CAROL	5 4 6 5 5	0	1 9	0	5 4 6 7 4
BAILEY MULTILITH OPER N/A	DEREK	5 1 8 5 3	0	0	0	5 1 8 5 3
BAINBRIDGE SERVICING REP N/A	JOHN	97851	7980	12952	0	118783
BAKER STENOGRAPHER N/A	SOPHIA	5 1 9 3 6	0	0	0	51936

FILE NUMBER:	0	n	n	_	1	4	O
FILE NUMBER:	v	v	U	-		4	3

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

(A) Name (List all employees who received m from your organization and any affiliate) (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements listes.) (If applicable)	Gro (befo other	. dec	axe	s aı	nd		All	owa (E		æs		Disbursem for Offici Busines (F)	al	Other Disbursements (G)	i i			ota (H)			
BALDWIN SERVICING REP N/A	DANIEL		9	7 9	9 2	2 6			7	9	6	0	6 2	5 6	0		1	1	2 ·	1	4	2
BALDWIN SECURITY GUARDS N/A	THEODOR		5	7	1 (0 3					6	0		0	0			5	7	1	6	3
BALFOUR RESEARCH SPEC N/A	JEFFREY		8	9	1 (0 7	,		6	7	6	5	6 3	8 3	0		1	0	2	2	5	5
BALINSKI SERVICING REP N/A	DUANE		9	9	5 (0 1			7	9	4	0	6 9	1 8	0		1	1	4	3	5	9
BANGHART SERVICING REP N/A	LARRY *		4	3	1	3 0			2	1	2	1	1 7	8 1	0		,	4	7	0	3	2

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

(A) Name (List all employees who received m from your organization and any affilial (B) Position (Enter employee's job (itle.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements lates.) (if applicable)	Gi (befo othe	r de	lax	es ictio	and		Allowances (E)		Disbursements for Official Business (F)	Other Disbursements (G)				tal 1)	_	
BARBARA ADMIN ASSISTANT N/A	JOHN	1	1	1	7	1	3	750(ס	3929	0	1	2	3	1	•	1 2
BARBARA CLERK TYPIST N/A	SANDRA		4	9	8	4	5		0	0	0		4		8 (-	4 5
BARBER STENOGRAPHER N/A	NORMA		5	2	8	3 5	2	?	0	0	0		5	5 2	2 8	3 :	5 2
BARGAMIAN ATTORNEY N/A	GEORGI-	1	1	9	2	2 2	7	7 5 2	0	3814	0		1 3	3 () 5	5 (6 1
BARNES ORGANIZER N/A	LINDA		9	7	' g	2	6	796	0	4979	0		1 1	 (3 (3	6 5

	_		_				
FILE NUMBER:	0	0	0	-	1	4	9

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

(A) Name (List all employees who received from your organization and any (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	f more than \$10,000 in total disbursements affiliates.)	Gr (befo	r de	axe	es a	and		Allowances (E)	isbursements for Official Business (F)	Other Disbursements (G)				otal H)			
BARNES TECH AID I N/A	LYDIA		4	9	9	0	9	0	0	0		4	1 9	9 9	•	0	9
BARNETTE SERVICING REP N/A	MICHAEL		9	8	0	7	6	7946	10835	0	1	1	- (6 8	3	5	7
BARTLETT CLERK TYPIST N/A	JOSEPHI		4	8	7	9	1	0	0	0		4	4	8 7	7	9	1
BATES ADMIN SEC N/A	LYNN		5	4	9	2	0	0	0	0			5	4 9	9	2	0
BATTAGLIA STENOGRAPHER N/A	Kathlee		5	0	5	8	1	0	271	0		•	5	0	8	5	2

ORGANIZATION NAME:		
AUTO WORKERS AFL-CIO		
ENDING DATE OF PERIOD COVERED:	 	
12/31/2004		

(A) Name (List all employees who receive from your organization and any (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	d more than \$10,000 in total disbursements affiliates.)	Gross (before other de	tax	es ctic	and		Allowances (E)		officions (F)	al	Other Disbursements (G)		•	To:			
BAUDERS STENOGRAPHER N/A	TAMMY	5	0	8	2	5	0			0	0		5	0	8	2	5
BOOKKEEPER BI	ALLAN	5	5	0	5	7	0		_	0	0		5	5 5	0	5	7
BAXTER SERVICING REP N/A	MICHAEL *	5	4	1	8	5	2 1 0 1		9	8 5	0		5	5 7	2	7	1
BEAN SERVICING REP N/A	SCOTT	9	9	3	5	1	7980	2	4 4	2 6	0	1	3	3 1	7		5 7
BEARDSLEE SERVICING REP N/A	JOHN	9	7	8	5	1	7980		6 9	6 9	0	1	1	2	8	(0

ORGANIZATION NAME: AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED: 12/31/2004	

(B) Position (Enter employee's Job Little.)			r de	tax	es : ctic	y and ons)		Allowances (E)	f	or C Bus)ffi	cia ISS		Other Disbursements (G)				tal			
BEARDSLEY ADMIN ASSISTANT N/A	JAMES *	1	3	2	2	9	5	5922		6	8	4	1 5	0	1	4	. 5	5 ()	6	2
BEARDSLEY SERVICING REP N/A	NATHAN		9	7	8	5	1	7560		4	. 8	3 3	3 2	2 0	1	1	() 2	2	4	3
BEASLEY STENOGRAPHER N/A	SYLVIA		5	3	2	1	9	0		-		2	2 7	0		5	5 3	3 2	2	4	6
BECKMAN REGIONAL DIR N/A	STEVEN	1	1	7	8	8	0	7560		4	() ;	2 3	3 0	1	2	2 9	9 4	4	6	3
BECK SERVICING REP N/A	WILLARD		9	7	8	5	1	7980		1 7	7 3	3 :	3 7	7 0	1	2	2 :	3	1	6	8

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

(A) Name (List all employees who roceived in from your organization and any affit (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	noro than \$10,000 in total disbursements iliates.) (if applicable)	(before taxes and other deductions) (D)			Allowanc (E)			s	Disbursements for Official Business (F)	Other Disbursements (G)	(H)									
BECOTTE ORGANIZER N/A	DONNA		9	7	9	2	6	7	9	6	0	8 3 0 2	0		1	1	4	1	*	3 8
BEMBERY ORGANIZER N/A	LENA		9	8	0	0	1	7	9	4	0	3 0 2 4	0		1	0	8	9		6 5
BENNETT SERVICING REP N/A	C RICHA *	1	0	7	9	9	1	6	1	€	5 2	3 8 4 8	0		1	1	8	0) (0 1
BERGMANN SERVICING REP N/A	ALFRED		9	8	1	5	1	7	6	· •	3 0	5849	0		1	1	1	6	•	6 0
BERMUDEZ ATTORNEY N/A	CARLOS		8	2	4	. 1	5	7	5		6 0	4170	0			9	4	1		4 5

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FILE NUMBER:	0	0	0	-	1	4	9

ORGANIZATION NAME: AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED: 12/31/2004	

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received a from your organization and any all (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	nore than \$10,000 in total disbursements illates.) (If applicable)	Gr (befo other	r de	axe	s a	and		Allowa (E		æs		Disburser for Offic Busine (F)	lsk		Other Disbursements (G)			ota (H)			
BERNATH ASSIST MINOR N/A	GARRY		9	9	1	6	7	7 9	•	6	0	106	4	3	0	1	1	7	7	7	0
BEST SERVICING REP	CHARLES		9	8	1	5	1	7 4	4	8	0	4 4	2	8	0	1	1	0	0	5	9
BEST BOARD SEC N/A	MICHELL		5	4	4	9	6				0	6	3	7	0	:	5	5	1	3	3 3
BETTAG SWITCHBOARD N/A	CAROL		5	0	8	5	2				0			0	0	1	5	0	8	5	5 2
BEVIS ASSIST - REGION N/A	ROY DON	1	0	8	8	7	9	7	9	4	6	8 4	. 1	8	0	1	2	5	2		1 3

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ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	

ENDING DATE OF PERIOD COVERED:

12/31/2004

(A) Name (List all employees who receive from your organization and any) (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	d more than \$10,000 in total disbursements affiliates.) I'n (if applicable)	Gross Salary (before taxes and other deductions) (D)		Allowances (E)			3	Disbursements for Official Business (F)	Other Disbursements (G)			ota (H)		_				
BIEBER ORGANIZER N/A	KENNETH		9	9 :	5 (0 1		7 9	4	0	8173	0	1	1	5	6	1 4	
BIEBER ASSIST - REGION N/A	MICHABL	1	0	8	8	7 9	,† 	7 9	4	0	9024	0	1	2	5	8	4 3	
BIEBER ASSIST - MAJOR N/A	RONALD	1	0	6	2 9	9 2	<u>></u>	7 5	4	0	5 4 4 1	0	1	1	9	2	7 3	}
BIEGEL SECRETARY I N/A	LAURIE		4	7	5	3 (,			0	5 8	0		4	7	5	8 8	3
BILLINGS CLERK TYPIST N/A	MICHELL		5	0	3	3 7	7			0	1 2 2 8	0		5	1	5	6 :	5



ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

(A) Name (List all employees who received from your organization and any a (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements filiates.) n (if applicable)	(befo	Gross Salary (before taxes and other deductions) (D)		Allowances (E)	(F)			al	Other Disbursements (G)	(H)				l				
BINNINGTON INT'L OFF SEC N/A	CATHY		4	8	8 9	9	9	0			,	4 9	0		4	4 1	В 9	9	4 8
BINZ SERVICING REP N/A	JEFFREY		9	8	0	0	1	7700		6	2	5 3	0	1		1	 1	9	5 4
BIRDSALL SERVICING REP N/A	SCOTT		9	7	8	5	1	7620		5	4	3 1	0	1		1	0 !	9	0 2
BISCEGLIA ORGANIZER N/A	FRANK		9	2	3	3	3	6764		8	6	5 8	0	1	1 1	0	7	7	5 5
BISHOP SERVICING REP N/A	DEBI		9	7	6	2	8	4783		3	4	0 4	0	1		0	5	8	1 5

	_					_	_
FILE NUMBER:	0	0	0	-	1	4	9

ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2004	

(A) Name (List all employees who received a from your organization and any after (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements filiates.)	Gr (befo	dec	эхе	s a	nd		Allowances (E)	D	Disbursements for Official Business (F)	Other Disbursements (G)				ota (H)			
BISHOP SERVICING REP N/A	WILLIAM *		9	4 :	9 :	2 1	1	4642		4499	0	,	1	0	4	0	6	2
BLACKWELL TECH AID I N/A	JACQUIL		4	7	9	7 9	9	0		0	0			4	7	9	7	9
BLACK TRAINING REP N/A	MARK		9	8	0	7 (6	7900		6208	0		1	1	2	1	8	4
BLACK STENOGRAPHER N/A	MARY		5	0	6	3 7	7	0	,	0	0			5	0	6	3	7
BLAINE SERVICING REP N/A	JAMES		9	7	9	2 (6	7 5 4 0)	6108	0		1	1	1	5	7	4

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

				s a							fc	or C	ffic			Other							
<u> </u>	other			tior	is)	1	Allo			•	•	3usi		S		Disbursements				Ote			
· · · · · · · · · · · · · · · · · · ·	ļ					<u> </u>		(E)				(F)		_	(G)	ļ			(n)			_
KIM		9	8	0 (0 1		7	7	0	0	1	3	5	9	0	0		1	1	9	2	9	1
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angela		9	7	7	7 4	-	7	8	2	0		3	2	1	4	0		1	0	8	8	0	8
																	Ì						ļ
KAREN		4	9	1	8 6		•			0	<u> </u>	··· ·	2	6	5	0			4	9	4	5	1
RONALD		9	7	9	2 6		7	7 5	5 4	0	1	2	0	3	1	0		1	1	7	4	9	7
RICHARD *		7	2	4	6 5		3	3 4	1 (1	T	1	3	8	5	0	T		7	7	2	5	1
						1																	
	ANGELA KAREN RONALD RICHARD *	ANGELA KAREN RONALD	ANGELA 9 KAREN 4 RONALD 9	ANGELA 97 KAREN 49 RONALD 97	ANGELA 9 7 7 KAREN 4 9 1 RONALD 9 7 9	MANGELA 97774 KAREN 49186 RONALD 97926	MANGELA 97774 KAREN 49186 RONALD 97926	ANGELA 97774 7 KAREN 49186 RONALD 97926 7	MIM 98001 77 ANGELA 97774 78 KAREN 49186 RONALD 97926 75	RIM 98001 770 ANGELA 97774 782 KAREN 49186 RONALD 97926 754	PRIM 98001 7700 ANGELA 97774 7820 KAREN 49186 0 RONALD 97926 7540	PRIM 98001 7700 1 ANGELA 97774 7820 KAREN 49186 0 RONALD 97926 7540 1	PRIM 98001 7700 13 ANGELA 97774 7820 3 KAREN 49186 0 RONALD 97926 7540 12	RIM 98001 7700 135 ANGELA 97774 7820 32 KAREN 49186 0 2 RONALD 97926 7540 120	ANGELA 9 7 7 7 4 7 8 2 0 3 2 1 KAREN 4 9 1 8 6 0 2 6 RONALD 9 7 9 2 6 7 5 4 0 1 2 0 3	PRIM 98001 7700 13590 ANGELA 97774 7820 3214 KAREN 49186 0 265 RONALD 97926 7540 12031	ANGELA 9 7 7 7 4 7 8 2 0 3 2 1 4 0 KAREN 4 9 1 8 6 0 2 6 5 0 RONALD 9 7 9 2 6 7 5 4 0 1 2 0 3 1 0	ANGELA 97774 7820 3214 0 KAREN 49186 0 265 0 RONALD 97926 7540 12031 0	RIM 98001 7700 13590 0 1 ANGELA 97774 7820 3214 0 1 KAREN 49186 0 265 0 RONALD 97926 7540 12031 0 1	ANGELA 98001 7700 13590 0 11 ANGELA 97774 7820 3214 0 10 KAREN 49186 0 265 0 4 RONALD 97926 7540 12031 0 11	ANGELA 9 7 7 7 4 7 8 2 0 3 2 1 4 0 1 0 8 KAREN 4 9 1 8 6 0 2 6 5 0 4 9 RONALD 9 7 9 2 6 7 5 4 0 1 2 0 3 1 0 1 1 7	ANGELA 9 7 7 7 4 7 8 2 0 3 2 1 4 0 1 0 8 8 KAREN 4 9 1 8 6 0 2 6 5 0 4 9 4 RONALD 9 7 9 2 6 7 5 4 0 1 2 0 3 1 0 1 1 7 4	ANGELA 9 7 7 7 4 7 8 2 0 3 2 1 4 0 1 0 8 8 0 KAREN 4 9 1 8 6 0 2 6 5 0 4 9 4 5 RONALD 9 7 9 2 6 7 5 4 0 1 2 0 3 1 0 1 1 7 4 9

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FILE NUMBER:	0	0	0	-	1	4	9

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

(A) Name (List all employees who received more the from your organization and any affiliates.	an \$10,000 in total disbursements	Gross Salary (before taxes and other deductions)				Disbu				Other										
(B) Position (Enter employee's job title.)			r de	du				Allowances	•		ısin			Disbursements			1	Γota	ıl	
(C) Name of Affiliated Organization (# 4)	opticable)	<u> </u>	(D)				(E)			(F)		(G)	┖			(H)		
BODE	THOMAS		9	7	8	5	1	7 9 4	0	1 (0 :	3	8 7	0		1	1	6	1	7 8
SERVICING REP		\					١							1						
n/a		ŀ																		
BOHLAND	DIANE		5	0	2	9	9		0		_		0	0	<u> </u>		5	0	2	9 9
CLERK TYPIST		ŀ																		
n/A																				
BOLLINGER	MATTHEW		9	7	8	5	1	800	0		8	3	1 0	0		1	1	4	1	6 1
SERVICING REP																				
N/A																				
BOLTE	TERRY		9	7	9	2	6	7 9 6	0	1	0	0	4 0	0	+	1	1	5	9	2 6
ORGANIZER										ļ					ļ					
N/A																				
BOMMARITO	JERRY		6	9	9	9	2		0				3 0	0			7	0	0	2 2
HVAC OPERATOR																				
N/A																				

ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2004	

(A) Name (List all employees who receive from your organization and any (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	d more than \$10,000 in total disbursements affiliates.) On (If applicable)	Gro (befor other	re ta	axe iuc	s a	nđ		Allow (I	an E)	ces	3	Disbursen for Offic Busine (F)	ial	ts	Other Disbursements (G)			Toi (H				
EDUCATION REP	ANITA		9	8	0 (0 1		7	5	4	0	3 7	9	6	0	1	0	9	3		3 7	7
BOOHER SERVICING REP N/A	CATHERI		9	7	9 ;	2 6	3	7	9	6	0	3 9	3	0	0	1	0	9	8		1 (6
BOONE SERVICING REP N/A	ROBERT *		6	2	1 (6 9	,	2	1	2	1	2 7	8	3	0		6	7	0	,	7 :	3
BOREN SERVICING REP N/A	M DANNY		9	7	8	5 1	1	7	9	8	6	1 2 2	7	5	0	1	1	8	1		1 :	2
BORITZKI SERVICING REP N/A	THOMAS		9	7	8	5 1	1	7	5	6	0	5 9	1	4	0	1	1	1	3	}	2	5

ORGANIZATION NAME: AUTO WORKERS AFL-CIO

ENDING DATE OF PERIOD COVERED: 12/31/2004

(A) Name (List all employees who received m from your organization and any affilial (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements lates.) (if applicable)	Gn (befo other	r de	axe	es a	and		Ailow (I	ar E)	ces	<u> </u>		r O Iusi	ffic	ial	its	Other Disbursements (G)				Tol		_		
BORTZ SERVICING REP N/A	DAVID		9	7	9	2 6	3	7	9	8	0	3	2	1	1	5	0	:	1	3	8	0	2	2 1	
BOSAK SERVICING REP N/A	BRIAN		9	7	9	2 6	6	7	9	6	0		7	8	7	1	0		1	1	3	7	•	5 7	,
BOSWORTH SERVICING REP N/A	DAVID		9	7	8	5 1	1	7	9	8	0		3	5	0	8	0		1	0	9	3		3 9	•
BOURDO CLERK TYPIST N/A	BETH		5	1	2	3 (6				0					0	0			5	1	2	•	3 (
BRACKETT RESEARCH SPEC N/A	RANDOL		9	8	0	0 ′	1	7	5	2	: 0		5	5	4	3	0		1	1	1	0	•	6 4	1

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:

12/31/2004

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(B) Position (Enter employee's job title.)		Gn (befo other	de	axe	98 8	and		Allowances	Disbursements for Official Business	Other Disbursements	-		ota)		
(C) Name of Affiliated Organizati	ON (if applicable)						_	(E)	(F)	(G)			(H)		_	
BRADEN STENOGRAPHER N/A	MARCIA		5	2	6	1	4	0	0	0	!	5	2 (6	1	4
BRADFORD SERVICING REP N/A	LEON *		2	9	5	0	5	1470	812	0	;	3	1	7	8	7
BRADSHAW SERVICING REP N/A	CHERYL		9	7	7	7	6	8000	2 4 4 8	0	1	0	8 :	2	2	4
BRADY INT'L OFF SEC N/A	PATRICI		5	9	3	9	5	0	9 0	0		5	9	4	8	5
BRAMELL SECRETARY N/A	MARILYN		5	0	7	9	0	0	0	0		5	0	7	9	0

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ORGANIZATION NAME:			
AUTO WORKERS	AFL-CIO	 	
ENDING DATE OF PERIOD	COVERED:		
12/31/2004			

(A) Name (List all employees who received m from your organization and any affilial (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization		Gr (befo	r de	axe	9S 8	and		Allow (an E)		•		r O Busi	ffic	ial	nts	Other Disbursements (G)			•	To (F				
BREEDLOVE SERVICING REP N/A	ROBERT		9	7	8	5 ⁻	1	7	9	8	0		5	1	7	0	0		1	1	1	0	(0	1
BRESSLER ASSIST - MAJOR N/A	тімотну	1	0	2	1	2 ;	3	7	5	4	0	1	8	9	2	2	0		1	2	8	5 5	•	<u>В</u>	 5
BRIDGEWATER TECH AID I N/A	REBECCA		5	5	2	7	7				0					0	0			5	5	5 2		7	7
BRIMM ASSIST - MAJOR N/A	GLORIA	1	0	6	3	6	7	7	9	4	0		6	2	1	4	0		1	2	· C) 5	•	2	1
BROMAROFF INT'L OFF SEC N/A	JEAN		5	5	6	2	5				0					9	0			5	5 5	5 6	3	3	4

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	_	•	•		•	•	•

ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2004	

(A) Name (List all employees who received from your organization and any a (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements ffiliates.) (If applicable)	G (befo	ır de	axe	es 8	ind		Allowa (E		æs		Disbi for Bu		fici 1es	al		Other Disbursements (G)			To (F	tal i)			
BROOKS ASSIST MINOR N/A	DANIEL	1	0	2	5	7 2		7 :	5	0	0		7	3	2	5	0	1	1	7	3	} !	9	7
BROOKS TECH AID I N/A	DENISE		5	0	4	2 0	}	-			0		4	5	9	5	0		5	5	5 0)	1	5
BROWDER ASSIST - MAJOR N/A	CATHERI	1	0	6	2	9 2	?	7	9	6	0	1	0	8	8	6	0	1	2	5	5 1		3	8
BROWNING SERVICING REP N/A	CHARLES		9	7	7	7 6	5	8	0	0	0		6	3	4	2	0	1	1	2	2 1	I	1	8
BROWN SERVICING REP N/A	JEROME *	1	0	8	7	4 7	7	6	6	5	3	:	9	5	7	9	0	1	2	2 4	1 9	•	7	9



ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

(A) Name (List all employees who received mo from your organization and any affilial (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	re than \$10,000 in total disbursements stes.) (if applicable)	Gn (befo other	r de	axe	es a	and		Allow (I	an E)	ces	\$		or C Bus)ffi	cial ISS		Other Disbursements (G)			Гot (Н			
BROWN SERVICING REP N/A	LAURENC		9	7	9	2 (6	7	5	4	0		3	8	7	9	0	1	0	9	3	4	5
BROWN SERVICING REP N/A	MICHAEL	1	0	1	4	6	5	8	0	0	6	1	9	8	5 5	2	0	1	2	9	3	2	2 3
BROWN ACTUARIAL CLERK N/A	RUBY		5	2	3	3	5				0					0	0		5	2	3	3	3 5
BRUGLIO BOOKKEEPER BI N/A	MYRA		5	2	8	7	8		•		0			1	1 (0	0		5	2	9	7	7 8
BRUNO SERVICING REP N/A	ADOLFO *		7	3	4	0	4	4	6	4	2		•	\$ 9) ·	1 9	0		8	4	9	•	6 5

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FILE NUMBER:	0	0	0	-	1	4	9

ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2004	

(A) Name (List all employees who received in from your organization and any after (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	noro than \$10,000 in total disbursemen illates.) (il applicable)	⊣ (⊳	Gross efore t her de	tax	es : ctic	and		Allowances (E)		Disbursements for Official Business (F)	Other Disbursements (G)				ota (H)			
BRYANT SERVICING REP N/A	JOAN		9	8	8	7	5	7 5 6	0	3784	0	1	1	1	0 2	2	1	9
BRYAN ASSIST MINOR N/A	DENNIS *		6	2	9	1	4	3 3 4	1	3 4 4 9	0		ļ	6	9	7	0	4
BRYMER ORGANIZER N/A	JAMES *		9	0	2	7	2	472	2	16326	0	,	1	1	1	3	2	0
BRYNER ADMIN ASSISTANT N/A	GARY *		8	6	3	6	5	3 3 6	1	2390	0		•	9	2	1	1	6
BRYNER INT'L OFF SEC	SHBLLY		5	5	8	8 8	3		0	C	0			5	5	8	8	3



ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

than \$10,000 in total disbursements 9s.)	(befor	e ta	axe	s aı	nd			Disbursements for Official	Other		-				
	other			tion	s)		s								
applicable)		- (1				(E)		(F)	(G)			(H)			_
KRIS	!	5	3 9	9 9	9 0	:	0	0	0	!	5	3 9	9	9	0
									ļ						
THERESA		9	7	1 '	1 0	5 0 1	l 1	3565	0	1	0	5	6	8	6
															İ
									:						
CONCETT		5	1	5 4	4 6		0	0	0		5	1	5	4	6
									1						
DON *		8	0	9	7 6	3 4 (0 1	3 3 2 6	0		8	7	7	0	3
NANCY		5	1	6	1 0		0	0	0		5	1	6	1	0
	THERESA CONCETT DON *	(befor other	(before to other decorate (I) KRIS THERESA 9 CONCETT 5	(D) KRIS THERESA 9 7 CONCETT DON * 8 0	(before taxes at other deduction (D) KRIS 5 3 9 5 THERESA 9 7 1 CONCETT 5 1 5 6	(before taxes and other deductions) (D) KRIS 5 3 9 9 0 THERESA 9 7 1 1 0 CONCETT 5 1 5 4 6	(before taxes and other deductions) KRIS 5 3 9 9 0 THERESA 9 7 1 1 0 CONCETT 5 1 5 4 6 DON * 8 0 9 7 6 3 4 6	(before taxes and other deductions) (D) Allowances (E) KRIS 5 3 9 9 0 0 0 THERESA 9 7 1 1 0 5 0 1 1 CONCETT 5 1 5 4 6 0 DON * 8 0 9 7 6 3 4 0 1	(before taxes and other deductions) (D) KRIS 5 3 9 9 0 THERESA 9 7 1 1 0 5 0 1 1 3 5 6 5 CONCETT 5 1 5 4 6 DON * 8 0 9 7 6 3 4 0 1 3 3 2 6	Concert State Concert Concer	Concert	(before taxes and other deductions) (D) Allowances (E) (F) (G) (G) (G) (G) (G) (G) (G) (G) (G) (G	(before taxes and other deductions) (D) Allowances (E) (F) (G) (H) KRIS 5 3 9 9 0 0 0 0 0 0 5 3 9 THERESA 9 7 1 1 0 5 0 1 1 3 5 6 5 0 1 0 5 1 CONCETT 5 1 5 4 6 0 0 0 5 1 DON * 8 0 9 7 6 3 4 0 1 3 3 2 6 0 8 7	Concert Conc	Concert

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received m from your organization and any affilial (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements lates.) (if applicable)	Gr (befo	r de	axe	BS 2	and		Allowand (E)	æs		Disbursements for Official Business (F)	Other Disbursements (G)				otal			
BURNETT SERVICING REP N/A	LISA		9	7	9	6 3	3	7 5	4	0	3 4 0 2	0	,	1 (0	8 9	9	0	5
BURTCH DEPART HEAD N/A	DAVID	1	0	6	3	6 7	7	7 9	0	0	11510	0		1	2	5	7	7	7
BUSH CLERK TYPIST N/A	CAROLYN		1	1	4	6 8	8		-	0	O	0			1	1	4	6	8
BUZZY SERVICING REP N/A	DEBORAH		9	8	0	0	1	7 9	6	0	4 5 9 4	0		1	1	0	5	5	5
BYDLOS ADMIN SEC N/A	BEVERLY		5	1	7	0	7			0	C	0			5	1	7	0	7

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ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
17/41/2002	

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

	nore than \$10,000 in total disbursements Mates.)	Gr (befo	ross ore t				T					Dis fo		rse Off			Other						_	
(B) Position (Enter employee's job title.)		othe	r de	du			1	Allow	an	ces	;	1	3u	sin	888	;	Disbursements				To			
(C) Name of Affiliated Organization	(if applicable)		(1	D)			┸	(1	E)					(F))		(G)	L			(H) 		
BYERS	JOHN	1	0	7	2	8 2	2	7	9	6	0	1	8	3 7	7 8	3 7	0		1	3	4	0	2	2 9
ADMIN ASSISTANT							ı																	
N/A																								
BYRNE	POLLY		9	9	5	7 6	5	7	9	4	0	2	· 7	7 2	2 () 4	0		1	3	4	7		2 0
ORGANIZER							١																	
N/A																								
CACCAMO	estella		9	8	0	0 1	1	7	9	4	0	1	4	4 :	2 :	5 5	0		1	2	0	1	•	9 6
CITIZENSHIP REP		ł					١					l												
N/A		·																						
CALHOUN	LOIS		5	0	8	0 9	9			-	0				-	C	0			5	0	8 (. (0 9
TECH AID I																		ı						
N/A							ļ																	
CALLAHAN	JOHN		9	7	8	5 '	1	7	7	6	0	1	1	3	0	1 9	0	,	1	1	8	6	;	3 0
SERVICING REP																								
N/A																								

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ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

(A) Name (List all employees who received m from your organization and any affit (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements liates.) (if applicable)	Gr (befo	r đe	tax	3S 4	and		Allowances (E)		Disbursements for Official Business (F)	Other Disbursements (G)				ota (H)			
CALVO SERVICING REP N/A	Joseph		9	8	0	0	1	783	2	6153	0	1	•	1	1 9	9	8	6
CAMERON BOOKKEEPER A N/A	CLAUDET		5	3	4	5	3		0	0	0		:	5	3	4	5	3
CAMPA SERVICING REP N/A	GEORGE		9	7	8	5	1	798	0	3735	0	1	1	0	9	5	6	6
CAMPBELL ASSIST MINOR N/A	ESTHER	1	0	2	4	2	2	703	1	2803	0	1	1	1	2	2	5	6
CAMPBELL ATTORNEY N/A	LAURA	1	1	9	2	2	7	572	6	1388	0		1	2	6	3	4	1

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ORGANIZATION NAME:	•
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2004	

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received from your organization and any at (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements fillates.)	Gr (befo other	r de	axe	s a tior	nd		Allowa (E		ces	;	Disbursements for Official Business (F)	Other Disbursements (G)			ota (H)	l		
CAMPBELL SERVICING REP N/A	PATRICI		9	8 (0 (0 1		7	5	4	0	3616	0	1	0	9	1	5	7
CANNON RESEARCH SPEC N/A	MICHAEL		9	9	0	1 2	2	7	9	6	0	6074	0	1	1	3	0	4 (6
CARDAMONE BOOKKEEPER BI N/A	LAURA		5	3	9	2 5	5				0	126	0		5	4	0	5	1
CAREY ATTORNEY N/A	THOMAS	1	1	9	0	7 7	7	7	5	8	0	2524	0	1	2	9	1	8	1
CARNES SERVICING REP N/A	ALBERT		9	8	0	7 6	5	7	9	2	0	449(0	1	1	0	4	9	2

Form LM-2 (Revised 2000)

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ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/200 <i>4</i>	

(A) Name (List all employees who received from your organization and any a (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements fillates.) (if applicable)	Gr (befo	r de	axe	es a	and		Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	To (F			
CARPENTER SECURITY N/A	DANIEL	5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	7	6	6	5 9	3	3 3 0 0	1 2 8 4	0	8 1	2	. 4	4 3
CARPENTER INT'L OFF SEC	DIANA		5	3	2	4 ·	1	0	0	0	5 3	3 2	! •	4 1
CARPENTER STENOGRAPHER N/A	MARY		4	9	8	0 1	7	0	0	0	4 9	3 (3 (0 7
CARRIGAN ADMIN SEC N/A	RENEE		3	7	3	0	7	0	1 4 5	0	3 7	7 4		5 2
CARTAGENA STENOGRAPHER N/A	CARMEN		5	2	5	5	0	0	0	0	5 2	2 5	5	5 0

ORGANIZATION NAME:
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	ore than \$10,000 in total disbursements iates.)	(befo	oss ore t	axe	s ar	nd							Disbur	Offic	lsic	nts	Other							
(B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	(if poplicable)	othe		duc))	tion	s)		All	owa E)		es		Bus		SS		Disbursements (G)				otal (H)			
(O) Name of Annated Organization	In observers.											-		F)			 	┝	_					4
CARTER	Joseph		9	7	7 7	7 6	ŀ		8	0	0	0	7	1	9	9	0		1 '	1	2 9	9	7	5
SERVICING REP							ľ											ŀ						l
N/A																								
CARTER	KEYSA		4	9 :	2 (8 (0				0	0		4	4	9 2	2	0	8
CLERK TYPIST																								ı
n/a																	1							
CARUSONE	GLORIA		5	1	6 4	4 7	T				•	0			4	1	0		;	5	1 (6	8	8
STENOGRAPHER																								
N/A																								
CARUSO	JANICE		5	2	0 4	4 8					_	0		2	0	0	0			5	2 :	2	4	8
STENOGRAPHER		ļ																						
N/A		ŀ											:											
CARYN	DONALD	1	0	3	8 (6 2		1	0	3	0	3	3	3 2	8 :	0	0		1	1	7	4	4	5
SERVICING REP																								
N/A																								

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
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SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

	more than \$10,000 in total disbursements ffiliates.)	Gi (befo	ross ore t								Disbursements for Official	Other							
(B) Position (Enter employee's job title.)		othe			tioi	ns)	1	Allowance	es	1	Business	Disbursements				ota			
(C) Name of Affiliated Organizatio	n (if applicable)		(l	D) 			1	(E)		╽	(F)	(G)			((H)	1		
CASSEL	HAROLD		9	7	7	7 (6	7 9	B 0)	4910	0	1	۱ .	1	0	6	6	6
RETIREE REP							1			Ì									
N/A													ļ						
CASSEY	MARIE A		5	2	4	3 :	2		0	7	7 2 7	0			— 5	3	1	5	9
INT'L OFF SEC										İ									
N/A																			
CASTLE	CHARLES		9	8	0	0	1	7 7	6 0	,	9498	0	1	1	1	5	2	5	9
TRAINING REP										١									
N/A																			
CATALFIO	MARIA		5	4	5	4	1	:		5	484	0	-		 5	5	0	2	2 5
TECHNICIAN																			
N/A												ļ							
CATANZARO	JASPER *		8	7	2	0	0	4 0	3 1	1	2795	0			9	4	0	2	2 6
COORDINATOR																			
N/A										١									

(6b)

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received mon from your organization and any affilial (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	re than \$10,000 in total disbursements atos.) (If applicable)	Gr (befo other	r de	axe	3S &	and		Allowances (E)		Disbursements for Official Business (F)	Other Disbursements (G)			Γota (H)			
CAUDLE SECRETARY N/A	LOTTIE		5	2	6	2 (0	0	,	0	0		5	2	6	2	2 0
CECIL SERVICING REP N/A	JERRY *		9	3	8	3	7	4642	2	1832	0	1	0	0	3	1	1 1
CHAMBERLAIN SERVICING REP N/A	DEBORAH		9	8	0	0	1	7 5 4 0)	5903	0	1	1	1	4		1 4
CHAMBERS ASSIST MINOR N/A	FLORENC	1	0	2	4	9	7	7 5 2 0	7	4886	0	1	1	4	9	(3
CHAMPAGNE ASSIST - MAJOR N/A	LAURA *		2	9	3	8	3	8 4 2	2	2656	0		3	2	8		8 1

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SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received from your organization and any at (B) Position (Enter employee's job title.) (C) Name of Affiliated Organizatio	more than \$10,000 in total disbursements iffiliates.)	Gros (before other d	e ta	xes lucti	an		Allowances (E)	[Disbursements for Official Business (F)	Other Disbursements (G)			Tot (H			
CHAPEL CLERK TYPIST N/A	JULAUND	5	5 () 2	2 8	4	C		0	0		5	0	2	8	4
CHAPPO INT'L OFF SEC	DEBORAH	5	5 5	5 5	5 2	5	()	0	0		5	5	5	2	5
CHAVEZ INT'L OFF SEC	DIANA	5	5 4	4 4	1 3	0	(ס	0	0		5	4	4	3	0
CHESNUTT EDUCATION REP N/A	GARY	9	9	 7	9 2	2 6	7 5 6 (D	3677	0	1	1 0	9	1	6	3
CHINN ORGANIZER N/A	RONALD		€ .	7 8	8 5	5 1	7980	0	9572	0	1	 1	5	4	C	3

(10 B)

			_				
FILE NUMBER:	0	0	0	-	1	4	9

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

(A) Name (List all employees who received in from your organization and any affil (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements liates.) (if applicable)	Gro (befo other	de	axe	s a	ind		Allowance (E)	es	Disbursements for Official Business (F)	Other Disbursements (G)				otal H)		
CHOTKOWSKI SERVICING REP N/A	JEROME		9	7	9 :	2 €	3	7 2 2	2 5	11552	0	1	1	1 6	3 7	' (0 3
CHRISPEN MULTILITH OPER N/A	JAMES		5	7	3	7 3	3		0	0	0		5	5 7	7 3	3	7 3
CHRISTENSEN INTN'L AFFAIRS N/A	JOHN		5	3	4	2 5	5	9	1 2	2 2 6	0		5	5 4	4 5	5 (6 3
CIOTTI TRAINING REP N/A	JAMES		9	8	0	0 -	1	75	4 0	4094	0	1	() !	9 6	3	3 5
CLAFFEY STENOGRAPHER N/A	PATRICI		5	2	7	8 (6		0	0	0		ţ	5 2	2 7	7	8 6

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AUTO WORKERS AFL-CIO
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(A) Name (Ust all employees who receive from your organization and any (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	nd more than \$10,000 in total disbursements affiliates.) On (if applicable)	Gr (befo other	r de	axe	es a	and		Allowances (E)	Disbur for C Bus	Offic	ial	S	Other Disbursements (G)			To:				
CLAMPITT MULTILITH OPER N/A	PATRICK		5	2	8	6	5	0			(0			5	2	8		6 5	5
CLARK ASSIST - MAJOR N/A	JOHN *		9	2	9	7	3	5862	4	2	7 :	5	0	1	0	3	- 1		1 ()
CLARK SERVICING REP N/A	PATRICI		9	7	8	5	1	7980	1 5	8	0 (0	0	1	2	1	6	; ;	3	1
CLIFTON SERVICING RBP N/A	JAMES		9	7	8	5	1	7540	6	4	2	5	0	1	1	1	8	}	1 (_ 6
CLIFTON TRAINING REP N/A	JERRY		9	8	3	7	6	7 4 2 0	4	9	7	0	0	1	1	0	7	•	6 (6

ORGANIZATION NAME:		
AUTO WORKERS AFL-CIO	<u></u> .	
ENDING DATE OF PERIOD COVERED:		

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received my from your organization and any affilial (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	oro than \$10,000 in total disbursements ates.) (if applicable)	Gr (befo othe	r de	axe	es a	and		Allowances (E)	3	Disbursements for Official Business (F)	Other Disbursements (G)			otal	ĺ	
CLINGAN ASSIST MINOR N/A	JAMES		9	8	6	6 7	7	796	0	10528	0	1	1	7 ′	1	5 5
COAKLEY DEPART HEAD N/A	JAMES	1	0	2	5	7 2	2	788	0	7 4 4 8	0	1	1	7 9	9	O 0
COBB SERVICING REP N/A	тімотну		9	8	0	0 -	1	7 6 4	0	8 3 8 1	0	1	1	4 (3	2 2
CODELUPPI TIME STUDY SPEC N/A	GEORGE		9	8	0	7 (6	6 2 9	7	11786	0	1	1	6	1	5 9
CODY STENOGRAPHER N/A	KATHLEE		5	1	7	6 :	3		0	0	0		5	1	7	6 3

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ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
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(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates.) (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization (if applicable)			Gross Salary (before taxes and other deductions) (D)					Allowances (E)					Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)					
COLBERT SERVICING REP N/A	DEWEY	•		6 (5 9	7	' 4		4	7	6	2	2086	0		7	2	В	2	2
COLEMAN INT'L OFF SEC N/A	CAROLYN			5 8	В 7	7 9	2					0		0		5	8	7	9	2
COLEMAN SERVICING REP N/A	NORMAN	*		6	5 9	9 7	′ 4		4	6	4	2	10066	0		8	0	6	8	2
COLLINGS ACTUARY N/A	JOHN			5	9 9	9 2	2 1		•			0	4 2 8	0		6	0	3	4	9
COLOMBO STENOGRAPHER N/A	LISA			5	3 4	4 1	l 6					0	4 (0		5	3	4	5	6

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

FILE NUMBER: 0 0 0 - 1 4 9

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates.)	(before taxes and		Disbursements for Official	Other	
(B) Position (Enter employee's job title.)	other deductions)	Allowances	Business	Disbursements	Total
(C) Name of Affiliated Organization (# applicable)	(D)	(E)	(F)	(G)	(H)
COMAI ANDREW	97926	7960	5082	0	110968
HBALTH-SAFETY					
n/A			į	!	
COMBS MARY	5 4 3 1 3	0	0	0	5 4 3 1 3
BOARD SEC					
N/A					
CORACI BONNIE	5 2 1 8 6	0	0	0	5 2 1 8 6
INT'L OFF SEC					
A/N					
CORACI VITO +	8 8 2 6 4	4642	1417	0	9 4 3 2 3
ASSIST MINOR					
N/A					
CORBETT ROBIN	3 3 6 8 3	3 0	0	0	3 3 7 1 3
SECURITY GUARD					
N/A					l

ORGANIZATION NAME: AUTO WORKERS AFL-C	IO
ENDING DATE OF PERIOD COVERE 12/31/2004	D:

(A) Name (Ust all employees who received from your organization and any a (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements filiates.)	Gro (befo other	de	axe	38	and		Allowances (E)		or (Bus	Offi	cia ess	l	Other Disbursements (G)				ota (H)			
CORDELL SERVICING REP N/A	DONALD		9	7	9	2	6	7 9 6 6	1	4	3	3 5	5 9	0	1	I	2	0 :	2	5	1
COTTON SERVICING REP	GREGORY		9	7	8	5	1	7 5 6 0		5	4	1 2	2 8	0	1	1	1	0	В	3	_ 9
COULTER ORGANIZER N/A	DARRELL		9	8	0	0	1	7 9 4 0	1	1	1	1 2	2 6	0		1	1	7	0	6	7
COVILLE SERVICING REP N/A	GEORGIA *		4	1	9	0	2	1 4 7 0			•	 5	4 6	0			4	3	9	1	8
COX ASSIST MINOR N/A	GARY	1	0	2	4	9	7	7520		•	3 7	7 (0 1	0		1	1	6	7	1	8

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

(A) Name (List all employees who received more from your organization and any affiliation)	o than \$10,000 in total disbursements es.)	(befo		axe	s a	ınd	1						or (Offi	cial		Other								
(B) Position (Enter employee's job title.)		other			tio	ns)	ı	Allow		ces	•	1	Bus	sine	SS		Disbursements	3			Tot				١
(C) Name of Affiliated Organization @	f applicable)	<u> </u>		D) 			4	(E	<u>E)</u>		_		((F)			(G)	Ļ			(H	<u>) </u>	_		_
соч	CHARLES		9	7	9	2 6	3	7	4	8	6		5	3	7	5	0		1	1	0	7	8	3 :	7
SERVICING REP							1																		١
N/A																									
CRABTREE	SUSAN		9	9	8	4 '	1	8	0	0	0	1	1	4	4	- 5	0		1	1	9	2	-	B (6
ASSIST MINOR							١					İ													
N/A																									
CRANK	PAULA		4	9	6	8 9	9	••		•	0					0	0	1		4	9	6		8	9
MAINTENANCE																									Į
N/A																	:								Ì
CRAWFORD	MARK		3	2	8	8 ;	3			5	6					0	0	+		3	2	9	— ;	3	9
SECURITY GUARD		1										1													
N/A																									
CULVER	JOE		5	0	9	2	1			5	2					0	0	+		5	0	9) '	7	3
SECURITY GUARD							ļ																		
N/A																									

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
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SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more from your organization and any affiliate (B) Position (Enter employee's job (its.) (C) Name of Affiliated Organization (if		fs Gr (befc othe	ore t r de	axe		nd	Allowances (E)		Disbursements for Official Business (F)	Other Disbursements (G)			Γota (H)			
CUNNINGHAM BOARD SEC N/A	BETTYE		5	5	3 3	3 6		0	7 4	0		5	5	4	1 (0
CURRY SERVICING REP N/A	RAYMOND		2	3	2 7	7 3	1 6 4	9	5019	0		2	9	9	4	1
CURRY TRAINING REP N/A	ROY *		7	2	9 (6 5	5 2 7	2	3 5 0 1	0		8	1	7	3	8
CURSON DIR-SPECIAL PROJ N/A	DAVID	1	1	9	3 (0 2	7 5 2	0	6727	0	1	3	3	5	4	9
CURSON SERVICING REP N/A	SHARON		9	8	0	0 1	7 5 2	0	5926	0	1	1	1	4	4	7

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ORGANIZATION NAME:
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	nore than \$10,000 in total disbursements liates.)	(befo	oss ore t	axe	s a	nd						Disbursements for Official	Other							
(B) Position (Enter employee's job title.)		othe			tion	s)	Allo			es	1	Business	Disbursements				ota	1		Ì
(C) Name of Affiliated Organization	(if applicable)		(1) 				(E	<u> </u>			(F)	(G)			(H)			_
CUSENZA	JOSEPH	1	0	2 ;	3 4	1 7	7	7 :	5 (6	0	5 4 8 3	0	•	1 '	1 :	5 3	3	9	0
ASSIST MINOR		ļ					ŀ													
N/A																				
CUTWAY	PAUL	1	0	8 :	3 4	4 7		7 !	5 :	2	0	9351	0		1 :	2	5 :	2	1	8
ADMIN ASSISTANT																				
N/A							:													
CYBULSKI	JANICE		5	2	4	B 6	1				0	0	0			5	2	4	8	6
ADMIN SEC																				í
N/A																				
CZAPE	BRYAN		9	7	9 :	2 6		7	5	4	0	5391	0		1	1	0	8	5	<u> </u>
SERVICING REP																				
N/A													ł							
CZEIZLER	SHELLEY	-	9	8	0	7 6		6	0	3	1	4289	0	<u> </u>	1	0	8	3	9	6
TRAINING REP																				
N/A																				

ORGANIZATION NAME:
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(A) Name (List all employees who received more from your organization and any affilial (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization (e then \$10,000 in total disbursements tes.) If applicable)	Gr (befo other	r de	axe	s a	nd		Ailov	war (E)		s	Disburs for O Busi	ffic	ial		Other Disbursements (G)			otal H)			
CZERNESKI SERVICING RBP N/A	STEPHEN		9	7 :	9 2	2 6		7	6	6	0	Ì		7	7	0	1 1	1 :	3 9	•	6	3
D'EPIFANIO ASSIST MINOR N/A	FRANK *		6	0	5 (0 6	5	2	· 1	2	1	1	8	1	9	0	(3	4 4	1	4	6
DAIGNEAU UTILITY REPAIR N/A	MICHAEL		5	4	0	6 7	,				0				0	0	!	5	4 (0	6	7
DAKURAS SERVICING REP N/A	GEORGE		9	7	8	5 1		7	7 5	 5 6	6 0	5	0	3	6	0	1	1	0	4	4	7
DANDERS SERVICING REP N/A	LINDA	!	9	7	8	5 1	1	7	7 (9 8	3 0	3	5	5 0) 5	0	1	0	9	3	3	6

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
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12/31/2004

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received mon from your organization and any affiliate (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization (in	· · · · · · · · · · · · · · · · · · ·	Gr (befo	r de	axe	s a	ind		Allowances (E)	3	Disbursements for Official Business (F)	Other Disbursements (G)			To (H			
DANFORD CITIZENSHIP RBP N/A	WARREN		9	7	9 :	2 6		7 9 4	0	9149	0	1	i 1	5	0	1	5
DANIEL SECURITY N/A	DWAYNE		7	7	6	3 4		5 1 3	6	1954	0		8	3 4	7	2	2 4
DANJIN LIBRARIAN N/A	JANE		5	5	6	9 7	7		0	0	0		5	5 5	6	•	7
DANTA STENOGRAPHER N/A	PHYLLIS		5	3	1	0 2	2		0	0	0		(5 3	3 1	•	2
DARDEN COMMUN TECH N/A	TIARA		5	3	5	2 1	1		0	0	0		ţ	5 3	3 5	1	2 1

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0	CABIL	ZATION	NAME:
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ORKERS AFL-CIO

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(A) Name (List all employees who received more from your organization and any affiliate (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization (I	e than \$10,000 in total disbursements les.) if applicable)	Gi (befo	r de	taxe	es a	and		Allow (I	an E)	ces	.		ours r Oi usii (F	fici nes	al	Dis	Othe sburser (G)				otal H)			
DAUGHERTY ASSIST - MAJOR N/A	JULIA	1	0	6	2	9 2	2	7	9	4	0	1	4	5	5 9			0	1 2	2 8	B 7	•	9 1	•
DAVIS-MCKINN SERVICING REP N/A	JUANITA *		5	6	2	5 7	7	3	3	4	4		3	2	7 2	!		0		6 :	2 8	3 .	7 3	3
DAVISON ASSIST - REGION N/A	MAURICE	1	0	4	2	9 7	7	7	9	6	0		7	7	9 (0	1 :	2	0 () .	4 7	7
DAVIS ADMIN ASSISTANT N/A	JAMES	1	1	1	7	1 3	3	7	5	2	0		5	3	2 2	2		0	1 :	2	4 (5	5 :	5
DAVIS CITIZENSHIP REP N/A	JOHN HE		9	8	6	1 8	3	7	9	6	0		7	3	4 8	3		0	1	1	3 9	•	2 (6

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(A) Name (List all employees who received from your organization and any a (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements (filiates.)	Gr (befo	r de	ахе	9S 8	and		Allowances (E)	Olsbursements for Official Business (F)	Other Disbursements (G)				ital 1)		
DAVIS STENOGRAPHER N/A	LAVERNE		5	1	6	0	1	0	0	0	1	5	i 1	6	6 (0 1
DAVIS P/R REP N/A	SANDRA		9	8	0	0	1	7540	2622	0	1	C		3 1	(6 3
DAWES SERVICING REP N/A	STEVEN		1	7	9	5	5	1028	296	0		1	1 9	9 2	2	7 9
DE LA GARZA SERVICING REP	TERRY		9	8	0	0	1	7760	4 1 9 6	0	1	() 9	9 9	€	5 7
DE NAPOLI DATA PROCESS N/A	BRENDA		5	3	8	7	4	0	0	0			5 ;	3 8	3	7 4

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SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more from your organization and any affilial (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	re than \$10,000 in total disbursements ates.) (if applicable)	Gro (befor other	re ta	axe duc	s a	nd		Allowand (E)	æs		Disbursements for Official Business (F)	Other Disbursements (G)			otal			
DE NAPOLI SERVICING REP N/A	PHILLIP		9	8	0 (0 1		7 9	4	0	4448	0	1	1	0 ;	3	8 9	•
DE PAROLIS STENOGRAPHER N/A	DEBORAH		5	2	1	5 0	7			0	1 5 0	0		5	2	3	0 ()
DE RUSH CLERK TYPIST N/A	SHERRY		4	8	9	6 3	3			0	0	0		4	8	9	6 :	3
DESMOND ASSIST DEP HEAD N/A	JOSEPH *		1	9	9	7 1	1	8	6	2	3 7 8	0		2	1	2	1	1
DI COSOLA SERVICING REP N/A	MICHAEL		9	7	8	4 (6	7 9	8	0	4924	0	1	1	0	7	5	ο

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ORGANIZATION NAME:	
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AUTO WORKERS AFL-CIO	
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(A) Name (List all employees who received in from your organization and any affil (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursoments llates.) (If applicable)	- (beto	re ta	uc!	alary ses and actions)		Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
DI GIORGIO SERVICING REP N/A	FRANK		2 !	5 (0 4	5	1616	461	0	27122
DI IACOVO SERVICING REP N/A	FRED		9	7	7 3	6	7560	6217	0	111513
DICKERSON ASSIST MINOR N/A	CARL *		5	6	6 5	5 5	2 1 2 1	1181	0	59957
DIEGEL SWITCHBOARD N/A	FRANCES		3	3	0 3	4	0	0	0	3 3 0 3 4
DIEGEL INT'L OFF SEC N/A	LISA		2	6	2 0	7	0	0	0	26207

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:

12/31/2004

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.) (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization (If applicable)	Gross Salary (before taxes and other deductions) (D)	Aliowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
DIFFIN RICHARD * SERVICING REP N/A	9952	8 0 2	480	0	1 1 2 3 4
DILLINGHAM GARY SECURITY N/A	75384	3300	1284	0	79968
DILLINGHAM MELANIE BOOKKEEPER A N/A	47924	0	0	0	47924
DITTES TERRENC SERVICING REP N/A	97851	7740	6635	0	112226
DODSON SHIRLEY STENOGRAPHER N/A	5 2 3 1 2	0	0	0	5 2 3 1 2

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ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2004	

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates.) (B) Position (Enter employee's job title.)		(before taxes and other deductions)			Allowances		Disbursements for Official Business		Other Disbursements		s			al								
(C) Name of Affiliated Organization	(if applicable)	(D)					(E)				(F)				(G)	(H)						
DOLAN	TERRI		9	8	0 (1	7	5	2	0	6	9	9	8	0		1	1	2	5	•	1 9
SERVICING REP											•											
N/A																						
DONAHUE	JAMES *		9	6	7 7	7 8	4	6	4	2	5	4	8	8	0		1	0	6	9) (8 0
SERVICING REP																						
N/A																						
DONOVAN	KEVIN		9	7	9 :	2 6	. 7	7	2	0	1 1	1	7	9	0		1	1	6	8	3 :	2 5
SERVICING REP																						
N/A																						
DOOLEY	PETER *		7	2	5	8 1	6	1	2	2	9	0	6	3	0	1		8	7	7	,	6 6
HEALTH-SAFETY																						
N/A																						
DOOLEA	TIMOTHY		5	4	2	5 9				0				0	0			5	4	2	2	5 9
UTILITY REPAIR																						
N/A																						

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ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	=
12/31/2004	

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates.) (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization (If applicable)		Gross Salary (before taxes and other deductions) (D)						Allowances (E)		Disbursements for Official Business (F)	Other Disbursements (G)		_	Total (H)			
DOUGLAS SERVICING REP N/A	DONNY		9	8	1 :	5 1	1	7600		8305	0	1		1	4 (0	5 6
DOWBLL SERVICING REP N/A	CARL		9	7	8	5 '	1	7980		9085	0	1	1	1	4	9	1 6
DOYLE BENEFIT REP N/A	SARAH		9	8	0	0	1	7940		7617	0	•	1	1	3	5	5 8
DREMER SERVICING REP N/A	DAVID		9	7	9	2 (6	7540		6091	0	•	1	1	1	5	5 7
DREW SERVICING REP N/A	JOHN		1	7	9	5	5	1 1 4 8	3	107	0			1	9	2	1 0

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ORGANIZATION NAME:		
AUTO WORKERS AFL-CIO		
ENDING DATE OF PERIOD COVERED:		

(A) Name (List all employees who received me from your organization and any affilial (B) Position (Enter employee's job title.)	ero than \$10,000 in total disbursements ates.)	Gross Salary (before taxes and other deductions)			and		Allaumana	Disbursements for Official Business	Other			.	tal			
(C) Name of Affiliated Organization	(if applicable)			D)		,		Allowances (E)	(F)	Disbursements (G)			(t	_		
DRUDI SERVICING REP N/A	GREGORY		9	7	8	5	1	7980	4609	0	1	1	0	4	•	4 0
DRUGACH MAINTENANCE N/A	DERBK		4	8	0	0	3	0	0	0		4	8 8	3 0		0 3
DRUGACH SERVICING REP N/A	MICHAEL		9	7	9	2	6	7960	3501	0	1	C) 9	3	3 3	8 7
DUERKOP STENOGRAPHER N/A	САТНҮ		5	2	5	6	2	0	0	0		5	5 2	2 5	5 (6 2
DUFFEY CLERK TYPIST N/A	LISA		1	8	7	7	3	0	0	0		1	1 8	3 7	,	7 3

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FILE NUMBER:	0	0	0	-	1	4	9

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

(A) Name (List all employees white from your organization) (B) Position (Enter employee's justice) (C) Name of Affiliated Organization		Gr (befo	r de	axe	ıs a	ind		Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)		Γota (H)			
DUFFY PHOTO LAYOUT	KOLLEEN		4	9	3	7 7	7	0	0	0	4	9	3	7 7	7
DUNCAN SERVICING REP N/A	JAMES *		9	1	4	3 (0	4702	8201	0	1 0	4	3	3 :	3
DUNMORE ASSIST MINOR N/A	тімотну	1	0	2	4	2	2	7960	3969	0	1 1	4	3	5	1
DUNNING BOOKKBEPER A N/A	KAREN		5	0	9	5	5	0	0	0	5	0	9	5	_ 5
DUNNING AUDITOR N/A	LONNY		9	7	8	5	1	7980	7940	0	1 1	3	7	7	1

ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2004	

(A) Name (List all employees who received a from your organization and any affiliated Organization (C) Name of Affiliated Organization	nore than \$10,000 in total disbursements iliates.) (if applicable)	Gi (befo othe	r de	axe	3S 8	and		Allowan	ce:	5	Disbursements for Official Business (F)	Other Disbursements (G)			ota (H)			
DUNN SYS ANALYST N/A	ANDREW		9	7	9	2 6	6	7 8	4	0	8036	0	1	1	3	8	C	2
DUNN SERVICING REP N/A	DAVID		9	7	9	2 (6	7 9	8	0	9301	0	1	1	5	2	(7
DUNN CLERK TYPIST N/A	MARY		5	1	5	3 1	7		-	0	0	0		5	1	5	•	3 7
EASON SERVICING REP N/A	CARROLL		9	7	8	5	1	7 9	8	3 6	12200	0	1	1	8	0	,	3 7
EBERLE CITIZENSHIP REP N/A	RUTH *		7	1	2	7	1			0	277	0		7	1	5	•	4 8

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received from your organization and any (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	d more than \$10,000 in total disbursements affiliates.) (if applicable)	Gro (before other	de	axe	:S &	and		Α	voll.	⁄and E)	ces			urse Off usin (F	icia e ss	ıl	Other Disbursement (G)	s		•	To (H			
ECKBERG MISC 2 N/A	glen		3	4	1	8	1					0				0				3	4	1	8	3 1
ECKBERG SUPERVISOR N/A	SUSAN		2	5	7	6	5		• • • • • • • • • • • • • • • • • • • •			0				0)		2	5	7	•	S 5
ECKLER SERVICING REP N/A	ELSON		9	7	9	2	6		7	5	6	0	1	1	2 4	4 3		0	1	1	6	7		2 9
EDEN SERVICING REP N/A	LINDA	1	0	3	6	3	7	1	0	4	1	1		3	9 :	2 6		0	1	1	7	9	, -	7 4
EDING EDUCATION REP N/A	RANDY		9	7	9	2	6		7	9	6	0		4	2	8 1		0	1	1	() 1	•	6 7

Form LM-2 (Revised 2000)

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ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
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ENDING DATE OF PERIOD COVERED:	
112/31/200 <i>4</i>	

(A) Name (List all employees who received me from your organization and any affill (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	re than \$10,000 in total disbursements stos.) (if applicable)	Gr (befo othe	r de	tax	es ctic	and		Allowances (E)		Disbursements for Official Business (F)	Other Disbursements (G)		•	Tol (H			
elledge grant n/a	SHERROD	1	0	3	7	1	3	7834		1 1 0 5 5	0	1	2	2	6	(2
ELLINGTON ADMIN SECRETARY N/A	CAROL		2	9	7	5	8	0		0	0		2	9	7	•	5 8
ELLIOTT MAINTENANCE N/A	WILLIAM		5	1	7	7	2	0	,	0	0		5	1	7		7 2
ELLWOOD TECH AID I N/A	CAROL		5	3	8	6	0	0	•	0	0	:	5	3	8		6 0
ELLWOOD HVAC OPERATOR N/A	DONALD		1	0	5	7	7	ď)	0	0		1	0	5	,	7 7

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ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2004	

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received m from your organization and any affilial (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements lates.) (if applicable)	Gi (befo	r de	tax	es a ctio	and		Allowance (E)	9 S		Disbursements for Official Business (F)	Other Disbursements (G)			otal		
EMBRY TIME STUDY N/A	JERRY		9	7	9	2 (6	798	8 0	,	16445	0	1 :	2	2 3	3	5 1
EMERSON SECURITY GUARDS N/A	JAMES L		4	8	9	5 (6		5 7	7	1 0	0		4	9 ()	2 3
ENGEL ATTORNEY N/A	BETSEY	1	1	9	4	5	2	7 9	2 ()	2687	0	1	3	0 ()	5 9
ENGLAND STENOGRAPHER N/A	HBLEN		5	2	2	2	7		(0	0	0		5	2 :	2	2 7
ENGLAND ORGANIZER N/A	JAMES		9	7	9	2	6	7 9	6 (0	15593	0	1	2	1 4	4	7 9

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ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

(A) Name (List all employees who received m from your organization and any affiliate) (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	iore than \$10,000 in total disbursements liates.) (if applicable)	Gr (befo	r de	axe	s ar	nd	Alic	war (E)		\$		urso r Of usir (F	fici: 1es	al	Other Disbursemen (G)	ts			To (F		_	
engle organizer n/a	SANDRA		9	8 (0 0	1		7 9	6	0		7	1	0 3		0	1	1	3	0	€	§ 4
ENGRAM STENOGRAPHER N/A	VERNELL		5	1	0 1	1 7				0				O		0		5	1	0	1	1 7
ERHARDT CLERK TYPIST N/A	JUDI		5	0	7 5	5 9				0				C		0		5	0	7		5 9
ESTRADA SERVICING RBP N/A	CYNTHIA		9	8	0 (0 1		7 7	7 9	3		3	1	5 4		0	1	0	8 8	9	4	4 8
EVANS SERVICING REP N/A	ROBERT	1	0	1	6	1 5		7 9	9 4	0	1	0	1	5 5	5	0	1	1	9	7		1 (

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ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2004	

(A) Name (List all employees who received from your organization and any at (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements filiates.) (If applicable)	Gn (befo other		ixes luct	and		Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)				otal H)		
EVANS BOOKKEEPER BI N/A	ROSALIN		5 () (3	6	0	(0		5	5 0	0	3	3 6
EVERETT P/R REP N/A	EMILY		9	7 9	9 2	6	7540	221	0		1 (7	7 6		7 7
EWING ASSIST - REGION N/A	LINDA	1	1	3 (0 0	8	7960	370	2 0		1 2	2 4	4 6	3	7 0
FALCONE-SULL SERVICING REP N/A	NANCY		9	8 (0 0	1	7940	595	0	1 .	1	1 '	1 8	3 :	9 4
FALCONE SERVICING REP N/A	NEIL		9	7 :	9 2	6	7720	884	3 0		1	1 4	4 4	1	9 4

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

(A) Name (List all employees who received in from your organization and any affiliate) (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements liatos.) (if applicable)	Gro (befo other	r de i	axe	s a	and		Allow (!	an E)	ice:	5	Disbursements for Official Business (F)	Other Disbursements (G)			Tota (H)			
FARRADAY SERVICING REP N/A	SCOTT		9	7	9	2 (ô	7	6	6	0	8330	0	1	1	3	9	1	6
FARRELL ORGANIZER N/A	LAUREN		9	7	9	2 (6	7	9	6	0	9859	0	1	1	5	7	4	5
PASCIA SERVICING REP N/A	DAVID		9	7	9	2 (6	7	9	6	0	3966	0	1	0	9	8	5	2
FAUST SERVICING REP N/A	BILLY		9	7	8	5	1	8	O	0	0	4109	0	1	0	9	9	6	0
FAVAZZA SERVICING REP N/A	THOMAS *		3	4	4	4 9	9	1	4	. 7	' 0	1751	0		3	7	6	7	0

ORGANIZATION NAME: **AUTO WORKERS AFL-CIO** ENDING DATE OF PERIOD COVERED:

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received in from your organization and any aff (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	nore than \$10,000 in total disbursements iliates.) (if applicable)	Gr (befo	r de	ахе	es a	and		Allowances (E)		Disbursements for Official Business (F)	Other Disbursements (G)				otal H)		
FEATHERSTON SERVICING REP N/A	STEVE		9	7	7	7	6	8000		11934	0	1	1	7	7 7	•	1 0
FEDAK ASSIST MINOR N/A	GREGORY	1	0	2	3	4	7	7580		3 2 2 7	0	1	1	3	3 1	j :	5 4
PEDEWA SERVICING REP N/A	JOHN		9	7	1	0	1	5 1 5 3		3 2 8 7	0	1	O) 5	5 5	5	4 1
FELTON SERVICING REP N/A	DAVID		9	8	0	0	1	7940		4327	0	1	1	1 (0 2	2	68
FENG ORGANIZER N/A	THEODOR		9	7	8	5	1	7980)	13134	0	1	1	1	B 9	9	6 5

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12/31/2004

ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
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(A) Name (List all employees who received from your organization and (B) Position (Enter employee's job tit (C) Name of Affiliated Organization		Gro (befor other	re ta dec	axe	s a	and		Allowances (E)	C	Disbursements for Official Business (F)	Other Disbursements (G)				ota (H)			
FERRELL SERVICING REP N/A	MARK	!	9	7	8	5	1	7980		4810	0	i i	1	1	0	6	4	1
FEYERS SERVICING REP N/A	ANTHONY		9	7	9	9	6	7940		2646	0		1	0	8	5	8	2
FIELDER SERVICING REP N/A	MARK		9	8	0	0	1	7540		2907	0		1	0	8	4	4	8
FIBLDS-JACOB ADMIN ASSISTANT N/A	MENDY	1	1	7	5	0	4	7940		6010	0		1	3	1	4	5	4
FIJALKOWSKI SERVICING REP N/A	HENRY		9	9	2	0	4	7520		9618	0		1	1	6	3	4	2

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more from your organization and any affiliate (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization (iii)		Gross Salary (before taxes and other deductions) (D)	Aliowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
FISHER SERVICING REP N/A	JERRY *	5 5 8 3 2	3 4 0 1	2754	0	61987
FISHER CLERK TYPIST N/A	SHERRY	15367	0	0	0	15367
FISHER STENOGRAPHER N/A	SUSAN	5 1 1 4 5	0	0	0	5 1 1 4 5
FLEMING SERVICING REP N/A	TED	97776	8000	3 4 4 4	0	109220
FLORES RETIREE REP N/A	MICHABL *	95037	6853	14738	0	116628

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ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

	nore than \$10,000 in total disbursements ਘੋates.)	(befo		axe	s a	nd					Disbursements for Official	Other							
(B) Position (Enter employee's job title.)		othe			tior	is)	Allo			S	Business	Disbursements	ŀ			ota	1		-
(C) Name of Affiliated Organization	(if applicable)		(1) 				(E)			(F)	(G)	ļ		(H)			_
PLORES	RUBEN	1	0	0	0 (8 0	7	9	6	0	7362	0	1	1	1 :	5 3	3	3 (٥
ASSIST MINOR																			١
N/A																			
FLOREZ	RUDY	1	0	1	7 :	 9 1	7	7 8	2	3	9073	0	1	<u> </u>	1 1	8 (— 6	8	7
SERVICING RBP		1																	
N/A		:																	
FLOYD	ERVENA		4	9	7	7 7				0	0	0	-	4	4	9	7	7	7
BOOKKEEPER C													l						
N/A																			
FLOYD	KENNETH		9	8	0	0 1	,	7 5	5 0	0	5833	0	ļ .	1	1	1	3	3	4
TRAINING REP																			
N/A																			
FLOYD	SALLY	 	5	0	7	6 4				0	0	0			 5	0	7	6	4
CLERK TYPIST																			
N/A																			

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ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

(A) Name (List all employees who received from your organization and a (B) Position (Enter employee's job title (C) Name of Affiliated Organiza		Gi (befo othe	r de	ах	es ctic	and		Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)				ota (H)			
FLOYD AUDITOR N/A	WILLIAM		9	8	0	7	6	7920	22324	0		1 :	2	8 :	3	2	0
FLUKE SERVICING REP N/A	LARRY		9	7	8	5	1	7980	10863	0	: :	1	1	6	6	9	4
FLYNN CLERK TYPIST N/A	PHYLLIS		5	2	3	8	4	0	0	0			5	2	3	8	4
FOOTE-WALKER SECRETARY	LAVERNE		5	1	1	5	6	0	0	0			5	1	1	5	6
FORD-WATSON ADMIN SECRETARY N/A	KATHARI		5	2	9	6	9	0	0	0			5	2	9	6	9

ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
NDING DATE OF PERIOD COVERED:	····
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SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

	ved more than \$10,000 in total disbursements by affiliates.)	(befo		ax	es.	and				•		Disbursement for Official	3	Other		•					
(B) Position (Enter employee's job title.		othe		du D)		ons)	١	Allowa		es		Business		Disbursements				Tot			
(C) Name of Affiliated Organizat	tion (if applicable)						_	(E))			(F)		(G)				(H)	<u> </u>	_	
FORD	FLOYD	1	0	1	6	9 (이	7 8	3	0 (0	743	5	0		1	1	6	9	2	5
TRAINING REP																					
N/A																					
FORD	THOMAS		9	7	8	5	1	7 5	 5	4	0	1322	3	0		1	1	8	6	1	4
SERVICING REP																					
N/A																					
FORREST	JEFPREY		7	5	1	5	9	3 3	3	0	0	128	4	0			7	9	7	4	3
SECURITY																					
N/A																					
FORTE	ANTHONY		9	9	1	7	6	7 9	— 9	6	0	1231	- 7	0	T	1	1	9	4	- 5	5 3
CITIZENSHIP REP																					
N/A		ļ																			
FOSTER				7	. A	5	1	7 (8	<u> </u>	2582	 Զ		╁	1	3	1	6	-	5 9
	LAWRENC		3	•	U	, ,	•	'`	J	U	v	2 3 0 2	.		1	'	J	•	J	•	, 3
SERVICING REP																					
N/A																					
L.,								<u> </u>	_						1_					_	

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(101)

ORGANIZATION NAME: AUTO WORKERS AFL-CIO		
ENDING DATE OF PERIOD COVERED: 12/31/2004		

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(B) Position (Enter employee's job title.)	more than \$10,000 in total disbursements filiates.)	Gr (befo	r de	axe	s a	nd		Allowan	ce	S	Disbursements for Official Business	Other Disbursements			Fota			
(C) Name of Affiliated Organization	(if applicable)						4	(E)			(F)	(G)			(H)			
FOSTER	MIGUEL		1	7	9	5 5	5	1 0	2	8	790	0		1	9	7	7	3
ORGANIZER							-				<u> </u>							
N/A																		
FOWLER	CHRISTI		4	8	9	3 5	<u></u>			0	0	0		4	8	9	3	5
SECRETARY							١											
N/A																		
FOWLER	JAMES		7	5	3	0 9	3	3 3	0	0	1461	0		8	0	0	7	7 0
SECURITY							1											
N/A																		
FOX	BRETT		9	7	7	3 6	6	7 9	8	3 0	8279	0	1	1	3	9	9	9 5
SERVICING REP							١											
N/A																		
FOX	DENISE		5	2	7	4 2	2	_		0	0	0		5	2	7	4	1 2
ADMIN SECRETARY																		
N/A																		

S - 10

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received a from your organization and any aff (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	nore than \$10,000 in total disbursements illates.) (if applicable)	Gro (befo other	de	ахе	s a	ınd		Allowano (E)	es		Disbursements for Official Business (F)	Other Disbursements (G)				otal H)	!		
FRANKLIN SERVICING REP N/A	SHERRY		9	7	7 :	2 1	1	7 9	8	0	4980	0	1	1 1	1 (0 6	3	8	1
FRASER SECRETARY N/A	JEANNE		5	2	4	1 7	7			0	0	0			5 :	2 4	1	1	7
FRASURE SERVICING REP N/A	EARL *		7	3	4	7 9	9	4 6	2	2	3957	0		1	В	2 (o	5	8
FRAZER SERVICING REP N/A	ELDON		9	8	0	7 (6	5 7	9	7	2705	0		1 (0	6 :	5	7	8
FRAZIER SERVICING REP N/A	TYRONE		9	7	8	4 :	2	7 9	8	0	7739	0		1	1	3	5	6	1

S - 10

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received from your organization and any (B) Position (Enter employee's job title.)	d more than \$10,000 in total disbursements effiliates.)	Gr (befo other	r de	axe duc	3S 8	and		Allowa	ane	ces	 i	Disburse for Of Busin	fici	al		Other Disbursements					tal			
(C) Name of Affiliated Organization	n (if applicable)		(1	D)			┙	(E	<u>:)</u>			(F)			(G)	<u> </u>			(1	1)			
FREEMAN	BILLY		9	8	0	0	1	7	5	2	0	3	6	2	6	o		1	0	9	1	•	4	7
SERVICING REP							١																	
N/A																								
FREEMAN	MARY		9	8	0	7	6	7	4	1	7	2	0	2	8	0		1	0	7	· 5	5	_ 2	1
AUDITOR																								
N/A																								
GABRIEL	LAWRENC	1	0	2	3	4	7	7	5	6	0	2	1	8	3	0	T	1	1	2	2 ()	9	0
ASSIST MINOR																	İ							
N/A																								
GAFA	JOSEPH	1	0	6	2	9	2	7	5	2	0	4	7	5	0	0	†	1	1	8	3 :	5	6	2
ASSIST - MAJOR																								
N/A																								
GALINDEZ	MARIA		5	3	3	4	7				0				0	0	T		5	5 3	3 3	3	4	7
BOARD SEC																	1							
N/A																								

(104)+

12/31/2004

ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2004	

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received m from your organization and any affilial (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements liates.) (if applicable)	Gr (befo	r de	axı	es a	and		Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)			ota H)			
GALLO BOARD SEC N/A	MARIA		5	3	2	7	6	0	0	0	Ę	5 :	3 2	2	7	6
GANATRA ATTORNEY N/A	NIRAJ		8	7	0	0	5	7580	7837	0	1 ()	2	4	2	2
GARCIA ASSIST MINOR N/A	MICHAEL	1	0	2	5	7	2	7500	5918	0	1	1	5 '	9	9	0
GARDNER LEGAL SEC N/A	VENUS		4	8	6	2	6	0	0	0	•	4	8	6	2	6
GARDNER STENOGRAPHER N/A	VICTORI		5	1	4	3	0	0	0	0		5	1	4	3	0

(10G)+

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

(A) Name (List all employees who received in from your organization and any affiliated Organization (C) Name of Affiliated Organization	nore than \$10,000 in total disbursements illates.) (If applicable)	Gr (befo other	r de	axe) 	and		Allowances (E)		Disbursements for Official Business (F)	Other Disbursements (G)				Fota (H)			
GARMON SERVICING REP N/A	FLORRIN		9	7	9	2	6	7980	,	4 4 8 7	0	•	1	1	0	3	9	3
GARNER CLERK TYPIST N/A	PHYLLIS		4	4	1	8	6	O	,	0	0			4	4	1	8	6
GARVEY ORGANIZER N/A	JOHN		9	9	4	2	6	7960)	16964	0		1	2	4	3	5	5 0
GARVIN INT'L OFF SEC N/A	REGINA		5	2	6	4	3	C)	0	0			5	2	6	4	3
GARVIN SERVICING REP N/A	ROBERT		9	5	3	7	4	7885	5	13587	0		1	1	6	8	4	l 6

ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2004	

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who receive from your organization and any (B) Position (Enter employee's job title.)	d more than \$10,000 in total disbursements affiliates.)	Gr (befo		tax	es :	and						Disbursements for Official Business	Other					•	
(C) Name of Affiliated Organization	 On (il applicable)	Oute		D)	cuc	msj		Allow (rar E)		S	(F)	Disbursements (G)			Fota (H)			
GAVETTI SERVICING REP	ALBERT		9	7	8	5	1	7	7	4	0		0	1	1	4	2	2	1
N/A																			
GAYNEY DEPART HEAD N/A	CHARLES	1	1	9	0	5	5	7	9	2	2 0	2 5 1 1	0	1	2	9	4	8	6
GAYNOR SERVICING REP N/A	DAVID		9	7	9	2	6	7	5	5 4	1 0	4094	0	1	0	9	5	6	0
GEE SERVICING REP N/A	YING		9	7	8	5	1	7	9	9 8	3 0	7926	0	1	1	3	7	5	7
GEIGER ASSIST MINOR N/A	MICHAEL	1	0	0	2	5	8	7	5	5 4	‡ 0	5 4 2 7	0	1	1	3	2	2	5

(in)+

ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2004	

(A) Name (Ust all employees who received in my your organization and any at (B) Position (Enter employee's job title.)	noro than \$10,000 in total disbursements fillates.)	Gn (befo		3X65	ane		Allowances	L.	Disbursements for Official Business	Other Disbursements			Tota	31		
(C) Name of Affiliated Organization	(if applicable)		(0				(E)		(F)	(G)			(H)			
GEIS-LAFATA BOOKKEEPER BI N/A	CYNTHIA		5	5 9	8 6	9		0	0	0		5	5	9	8	9
GERASIMOVICH HVAC OPERATOR N/A	JOSEPH		6	6 2	2 0	2		0	0	0		6	6	2	0	2
GEROMIN ASSIST - MAJOR N/A	KIMBERL	1	0	6 3	3 6	7	7 9 2	0	3 5 9 9	0	1	1	7	8	8	6
GILLIAM ATTORNEY N/A	PHILLIP	1	1	9 :	2 2	7	794	9	7833	0	1	3	5	0	0	9
GLENN ASSIST - MAJOR N/A	DECORIS	1	0	6	2 1	7	7 5 4	0	5659	0	1	1	9	4	1	6

ORGANIZATION NAME:		
AUTO WORKERS AFL-CIO		
ENDING DATE OF PERIOD COVERED:	" 	
12/31/2004		

(A) Name (List all employees who received m from your organization and any affilial (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements istes.)	Gr (befo	r de	axe	9S 8	and		Allow	an E)	ces	•	Disbursements for Official Business (F)	Other Disbursements (G)			Γota (H)			
GODDARD SERVICING REP N/A	SUSAN		9	7	8	5	1			6	0	3 3 0 6	 	1	_		_	1	7
GOLDBETTER SERVICING REP N/A	CORA		9	8	1	5	1	7	8	2	9	3 6 1 4	0	1	0	9	5	9	1 4
GOMEZ SERVICING REP N/A	RODOLFO		9	7	9	2	6	7	9	6	0	9827	0	1	1	5	7	1	3
GONZALEZ TECH AID I N/A	DONNA		5	1	3	7	7				0	0	0		5	1	3	7	7 7
GORMLEY MAINTENANCE N/A	PATRICK		5	3	8	4	5				0	0	0		5	3	8	4	1 5

ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2004	

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received from your organization and any at (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements fillates.) (if applicable)	other deductions) (D)		Allowances (E)				Disbursements for Official Business (F)	Other Disbursements (G)			Tol (H		_					
grabowski sys analyst n/a	ARTHUR		9	9	5	0	1	7 !	5	2	0	2845	0	1	0	9	8	6	6
GRACE ORGANIZER N/A	GRANT		9	8	0	7	6	7 !	9	0	0	3670	0	1	0	9	6	4	6
GRAF ACTUARY N/A	DENNIS	1	1	6	1	2	3	7	9	6	0	4728	0	1	2	8	8	1	· 1
GRAHAM SBRVICING REP N/A	RONALD		9	7	7	7	6	7	5	6	0	2970	0	1	0	8	3	() 6
GRAIM CITIZENSHIP REP N/A	RICHARD		2	1	9	7	3				0	4 0 1	0		2	2	3	-	7 4

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ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2004	

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (Ust all employees who received from your organization and any all (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements filiates.)	Gro (before other		xe: luci	s an	ιd		Allow (I	and E)	æs		Disbursements for Official Business (F)	Other Disbursements (G)				ital 1)		
GRANDERSON INT'L OFF SEC	BARBARA		1	7 3	3 3	3 6					0	0	0		1	7	3	3	3 6
GRAYER STENOGRAPHER N/A	EVELYN		1	7 :	7 7	7 7	,				0	0	0		1	1 7	7		7 7
GRAY EDUCATION REP N/A	JERRY		9	8 (0 (0 1		7	9	8	0	9235	0		1 '	1 5	5 2		1 6
GREATHOUSE SERVICING REP N/A	PAUL		9	7	8	5 1		7	9	8	0	6170	0	i	1 -	1 2	2 0) (0 1
GREENFIELD SERVICING REP N/A	RICHARD		9	7	8 :	5 1		7	9	8	0	5 2 2 9	0		1	1	1 0)	6 0

FILE NUMBER:	0	0	0	-	1	4	9

ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2004	

(A) Name (List all employees who received a from your organization and any aff (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	nore than \$10,000 in total disbursements fillates.) (if applicable)	Gr (befo	r de	axe	es a	and		Allowances (E)	l	Disbursements for Official Business (F)	Other Disbursements (G)	(H)						
GREENLEY COORDINATOR N/A	DARWIN	1	0	2	7	2	2	7 4 8 0		5002	0		1	1	5	2	0	4
GREEN ASSIST MINOR N/A	MOSES		9	8	3	7	6	7516	•	3272	0		1	0	9	1	ē	4
GREEN BOARD SEC N/A	YESMAIN		5	4	8	5	4	0)	0	0			5	4	8	5	5 4
GREGORY SERVICING REP N/A	DAVID		9	7	9	2	6	7960	,	5008	0		1	1	0	8	•) 4
GREGWAY SWITCHBOARD N/A	LORI		5	0	1	0	0	0)	0	O			5	0	1	(0 0

ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2004	

(A) Name (List all employees who reconstruction and a form your organization and a (B) Position (Enter employee's job title (C) Name of Affiliated Organization		Gi (befo	r de	ахе	s a	nd	Allow (an E)	ces			ursor Of usir (F	ficia 1088	ıl	Other Disbursements (G)	(H)						
GRIFFIN TECH AID I N/A	Charlen		5	1	6 (8 (_	0				0	0			5	1	6	0	8
GRIFFIN SERVICING REP N/A	ROGER		9	8	0 (0 1	7	9	2	6	1	6	3	 5	0		1	2	2	2	8	3 0
GRIMES ORGANIZER N/A	JOHN	1	0	0	7 8	8 8	7	1	9	5		5	5 :	2 4	0		1	1	3	5	C	7
GRIMES ASSIST MINOR N/A	MICHAEL	1	0	2	4	1 4	7	5	2	0		8	9	5 1	0	'	1	1	8	8	ε	3 5
GROSS SERVICING REP N/A	CHARLIE		9	7	8	5 1	7	5	0	6		4	2	7 7	0		1	0	9	6	3	3 4

			_				
FILE NUMBER:	0	0	0	-	1	4	9

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

	(befo	ore (axe	es a	ınd		Allowan	re	<i>n</i>	for Officia)	Other Disbursements			Tr	ntal		
n (if applicable)							(E)		.	(F)		(G)						
RICHARD		3	1	6	4	1	1 4	4	9	150	2	0		3	} 4	1 5	5	9 2
]						
GERALDI	<u> </u>	5	2	3	3	9			0		0	0		5	5 2	2 ;	3	3 9
MARK		9	8	0	7	6	7 9	2	2 0	2194	l 5	0	1	2	2	7 9	9	4 1
STEVEN	1	1	6	1	9	8	7 9	2	2 0	60	9 3	0	1	3	3 (0 :	2	1 '
CINDY		5	2	7	0	0			0		0	0			5 :	2	7	0 (
	RICHARD GERALDI MARK STEVEN	(betto other	(before to other de strengthen) RICHARD GERALDI MARK 9 STEVEN 1 1	(before taxe other deduce (D) RICHARD 3 1 GERALDI 5 2 MARK 9 8 STEVEN 1 1 6	(D) RICHARD GERALDI MARK 980 STEVEN 1161	(before taxes and other deductions) (D) RICHARD GERALDI STEVEN (D) 3 1 6 4 5 2 3 3	(before taxes and other deductions) (D) RICHARD GERALDI STEVEN (before taxes and other deductions) (D) 3 1 6 4 1 5 2 3 3 9 1 1 6 1 9 8	(before taxes and other deductions) (D) RICHARD GERALDI STEVEN Allowan (E)	(before taxes and other deductions) RICHARD GERALDI MARK 98076 792 STEVEN 116198 792	Competition Competition	Defore taxes and other deductions Allowances (E) To Official Business (F)	Defore taxes and other deductions Allowances E F	Defore taxes and other deductions Allowances (E) To Official Business (G)	Defore taxes and other deductions Allowances For Official Business CF	Celtor taxes and other deductions CD CD CE CE CE CE CE CE	(before taxes and other deductions) (D) (E) (E) (F) (G) (G) (G) (G) (G) (G) (G) (G) (G) (G	Cher Competence Competenc	Control taxes and other deductions (D)

ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,0 from your organization and any affiliates.)	00 in total disbursaments	Gross Salary (before taxes and other deductions)					Disb	urs r Of			Other										
(B) Position (Enter employee's job title.)			ded	luct			Allow	/an	ces	;		usir			Disbursement	s			tal		
(C) Name of Affiliated Organization (if applicable)			(C)) 			(E)				(F)		(G)	<u> </u>		(H	1)		
HALKIBWICZ	JOSEPHI		5 :	2 1	1 2	2 8				0				0			5	5 2	: 1		2 8
SWITCHBOARD																					
N/A																					
HALLIBURTON	LESLIE		9	В (0 7	7 6	7	5	0	0		8	5	9 1		,	1 1	4	1	_	6 7
TRAINING REP																					
N/A																					
HALL	MICHAEL		7	9 9	9 7	7 6	5	1	1	5	1	0	0	5 8	(ç	9 5	5 1	-	4 9
SERVICING REP																					
N/A							:														
HALL	MILDRED		5	0 :	9 :	3 4				0				0		,		5 () 8)	3 4
SECRETARY																					
N/A																					
HALL	YVONNE	\top	4	9	7 (6 4				0				C	,	7		4 9	9 7	7	6 4
STENOGRAPHER																					
N/A																					

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ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
AOTO WORKERO ALE-OIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2004	
12/01/2007	

(B) Position (Enter employee's job title.)	nore than \$10,000 in total disbursements liates.)	Ga (befo othe	r de	axe	s a	nđ		Allowances		Disbursements for Official Business	Other Disbursements				otal			
(C) Name of Affiliated Organization	(if applicable)	 					4	(E)		(F)	(G)	Ļ		(H)_			
HAMBLIN	RICHARD		1	5	2	1 1	1		0	0	0	 	•	1 :	5 2	2	1	1
INTERN							١											
N/A																		
HAMILTON	CHRISTO		9	8	0	0 1	1	7 7 6	0	4711	0		1	1 () 4	ļ	7	2
TRAINING REP							1					ļ						
N/A																		
HAMILTON	DORA		9	7	9	2 6	6	7 9 8	0	17750	0		1 :	2	3 6	3	5	6
AUDITOR							١											
N/A																		
HAMILTON	RANDY		5	2	4	1 5	5		0	0	0		į	5	2 4	4	1	5
MAINTENANCE							ı											
N/A																		
HAMMER	FRANK		9	8	0	7 (6	7 5 0	0	4128	0		1	0	9 7	7	0	4
SERVICING REP																		
N/A										!								



ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/21/200 <i>1</i>	

(A) Name (List all employees who receive from your organization and any (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	d more than \$10,000 in total disbursements affiliates.) On (If applicable)	Gr (befo other	r de	axe	es a	and		Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)					otal H)	1		
HAMMOND P/R REP N/A	JOHN		9	8	0	0	1	7940	4003	0		1	0	9	9 9	9	4	4
HARDEN ADMIN ASSISTANT N/A	JUDY	1	1	1	6	3	8	7960	2004	0		1	2	. 1	_ (6	0	2
HARDY SERVICING REP	JAMES		9	7	6	6	1	8000	6115	0	į	1	1	•	1	7	7	6
HARKINS CLERK TYPIST N/A	TINA		2	9	7	5	7	0	C	0			2	2 9	9	7	5	7
HARPER ATTORNEY N/A	CONNYE	1	1	9	1	5	2	7540	3767	0		1	3	3 (0	4	5	9

ORGANIZATION NAME: **AUTO WORKERS AFL-CIO**

ENDING DATE OF PERIOD COVERED:

12/31/2004

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(B) Position (Enter employee's job title.)	more than \$10,000 in total disbursements fillates.)	Gr (befo other	dec	axe duc	ıs a	nd		Allowa		ces		Disbur for C Bus	Offi	cia	1	Other Disbursements			•	Tot			
(C) Name of Affiliated Organization	(if applicable)		(L)				(E	<u>:)</u>			(F)			(G)	┖			(H	1)		
HARRELL BENEFIT REP	Synnomo		9	2 :	2 (6 9		7	9	8	0	2	4	} 7	7 7	0		1	0	2	7	-	2 6
n/a							1																
HARRINGTON SERVICING REP	MICHARL		9	8	0	0 1	1	7	9	4	0	4	. 5	5 3	3 6	0		1	1	0	4		7 7
N/A																							
HARRISON CLERK TYPIST	LYNNETT		5	1	8	7 1	1				0				C	0			5	1	8	} '	7 1
N/A							ļ																
HARRIS SERVICING REP	CLINT		9	7	8	5 ′	1	8	0	0	0	2 4		5 2	2 3	0		1	3	0	3	}	7 4
N/A																							
HARRIS SERVICING REP	DARWIN	-	9	7	6	6	1	7	8	2	0	() ;	3	3 7	0		1	1	4	8	3	1 8
N/A																							

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

(A) Name (List all employees who receive from your organization and any (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization		Gro (befo other	de	axe	es a	and		Allowances (E)	isbursements for Official Business (F)	Other Disbursements (G)			ota (H)			
HARRIS BOOKKEEPER BI N/A	DENISE		5	2	5	4 8	В	0	0	0		5	2	5	4	8
HASENJAGER SERVICING REP N/A	JOSEPH		9	7	8	5	1	8000	3 5 2 5	0	1	0	9	3	7	6
HASER AUDITOR N/A	DEBORAH		9	8	0	0	1	7940	12036	0	1	1	7	9	7	7
HAWORTH SERVICING REP N/A	RODERIC		9	7	8	5	1	8000	15069	0	1	2	0	9	2	0
HAYES SERVICING REP N/A	WILLIAM *		7	5	3	3	7	4622	4338	0		8	4	2	9	7

DRGANIZ	ATION NAME:	
OTUA	WORKERS AFL-CIO	

ENDING DATE OF PERIOD COVERED: 12/31/2004

(A) Name (Ust all employees who received in from your organization and any aft (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	nore than \$10,000 in total disbursements fillates.) (if applicable)	Gr (befo	r de	axe	3S 8	and		Allowances (E)		Disbursements for Official Business (F)	Other Disbursements (G)				ota (H)		
HAYNES SERVICING REP N/A	CARRIE		9	7	9	2	6	7917		4951	0	1	1	1	0	7	9 4
HEAD CIVIL RIGHTS REP N/A	NATHANI		9	8	2	2	6	7880		5 1 5 0	0	1	1	1	1 :	2	5 6
HEATH KEYPUNCH N/A	STELLA		4	8	0	2	4	0)	0	0		,	4	8	0	2 4
HECKER SERVICING REP N/A	JAMES	1	0	3	3	5	8	7940		14289	0	,	1	2	5	5	8 7
HEIDELBERGER BOARD SEC N/A	JUDY		5	4	9	6	0	0)	0	0			5	4	9	6 0

ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	-
12/31/2004	

(A) Name (List all employees who receive from your organization and any (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ed more than \$10,000 in total disbursements affiliates.) On (if applicable)	Gro (befor other	re ta	exe Sut		nd		Allowances (E)	(Disbursements for Official Business (F)	Other Disbursements (G)				ota (H)		
HELMS SERVICING REP N/A	WENDELL		9	7	8	5 1		8000		22435	0	1	i :	2	8 2	2	8 6
HENDRIX SERVICING REP N/A	RONALD		9	7	9 :	2 €	6	7986		14488	0	1	1 :	2	0 4	4	0 0
HENNINGER CLERK TYPIST N/A	CHRISTI		5	0	9	6 <i>′</i>	1	0		0	0	i		5	0 :	9	6 1
HERNANDEZ ORGANIZER N/A	JOE		9	7	8	5	1	7980		22636	0	1	1	2	8	4	6 7
HILL INT'L OFF SEC	LA DON		5	7	9	4 4	4	0		2 7	0			5	7	9	7 1

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

(A) Name (List all employees who received mon from your organization and any affilial (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization (o than \$10,000 in total disbursements tes.) if applicable)	Gr (befo	r de	taxe	9S 8	and		Allowai (E)		98	D	isbur for C Bus)ffic	lak 88		Other Disbursements (G)			Tot (H			
HILL SERVICING REP N/A	THOMAS *	1	2	2	2	2 9	9	8 2	? (6 2		1 8	1	6	2	0	1	4	8	6	5	5 3
HINDENACH CLERK TYPIST N/A	КАТНҮ	:	4	9	6	8	7			0			2	5	3	0		4	9	9	4	1 0
HIRSCHLAND ADMIN ACCNTNT N/A	MERYL	1	0	5	4	9	7	7 4	.	8 6	3	3	1	5	8	0	1	1	6	1	4	1 1
HOFFMAN ASSIST - MAJOR N/A	RICHARD	1	0	6	2	9	2	7 9	9	6 (5	7	7 2	2 0	0	1	1	9	9	, ,	7 2
HOLDER SERVICING REP N/A	KENNETH		9	7	8	5	1	7 4	4	8 6	5	3	, C) 3	3 2	0	1	0	8	3	. (6 9

ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO_	_
ENDING DATE OF PERIOD COVERED:	
12/31/2004	

(A) Name (List all employees who received from your organization and any to (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	I more than \$10,000 in total disbursements affiliates.) (If applicable)	G (befo	er de	tax	es Ictic	and		Allowand (E)	ces		Disbursements for Official Business (F)	Other Disbursements (G)				ota (H)			
HOLIEFIELD ADMIN ASSIST N/A	GENERAL	1	1	5	9	8	6	7 5	6	0	6 4 1 3	0	1	1 :	2	9	9	5	9
HOLLAND ORGANIZER N/A	KENNETH		9	8	0	0	1	7 9	6	0	9102	0	1	1	1	5	0	6	3
HOLLEY SERVICING REP N/A	RANDAL		9	7	8	5	1	7 5	6	0	3 6 5 6	0	1	1	0	9	0	6	7
HONBYCUTT ADMIN SEC N/A	LYNNE		5	4	5	1	7			0	0	0			5	4	5	1	7
HONIGMANN STENOGRAPHER N/A	LINDA		5	0	5	8	1			0	0	0			5	0	5	8	1

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

(A) Name (List all employees who received from your organization and any at (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements filiates.) (if applicable)	Gr (befo	r de	axe	8 \$ 8	and		Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)				ota (H)			
HOSKINS ADMIN ASSISTANT N/A	CHARLES	1	1	4	8	2	9	7500	4818	0	1	1 :	2	7	1	4	7
HOUSER INT'L OFF SEC	DEBRA		5	4	5	0	7	0	0	0			5	4 :	5	0	7
HOWARD SERVICING REP N/A	BRENDA		9	7	9	2	6	7897	6005	0		1	1	1	8	2	8
HOWELL CLERK TYPIST N/A	KELLI		5	0	5	6	5	0	0	0			5	0	5	6	_ 5
HOWELL AUDITOR N/A	MARTIN		9	7	9	2	6	7960	5479	0		1	1	1	3	6	5

ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2004	

(A) Name (List all employees who received me from your organization and any affilial (B) Position (Enter employee's job title.)	re than \$19,000 in total disbursen ates.)	 Gro (befor	re t	axe	s a	nd						burs or O Busi	ffic	ial	ts	Other						
(C) Name of Affiliated Organization	(if applicable)	Outei))	JUÇII	13)		Allowar (E)		S	"		F)	33		Disbursements (G)			ota (H)			
HOWE ASSIST DEPT HEAD	JAMES +	1	2	5 8	8 6	5 9)	6 8	1	3		8	1	0	8	0	1	4	0	7	9	0
N/A																						
HOYLES STENOGRAPHER N/A	BARBARA		5	0	9 :	5 0	,			0					0	0		5	0	9	5	0
HROVATIN ORGANIZER N/A	DIANA		9	7	8	5 1		7 8	3 () 0	1	6	0	1	2	0	1	2	1	6	6	3
HUGHES DEPT HEAD N/A	RONALD *	1	2	2	0 :	2 4		6 1	. 4	1 2		5	0	5	5	0	1	3	3	2	2	2 1
HUI INTERN N/A	AARON	:	3	4	1	3 3	3			0			6	1	9	0		3	4	7	5	5 2

ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2004	

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received m from your organization and any affilial (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements lates.) (if applicable)	Gro (befo other	r de	axe	s a	nd		Allow:		ces		Disbu for (Bus	Off	lcia ess	ıf	Other Disbursements (G)			ota (H)			
HUNGERFORD ASSIST - MAJOR N/A	WAYNE		9	7	8	5 1	1	7	9	8	0	1 5	5 7	7 8	3 1	0	1	2	1	6	1	2
HUNTER SERVICING REP N/A	DONALD		9	7	7	7 6	6	7	8	2	0	4	1 4	4 (6 6	0	1	1	0	0	6	2
HYATT STENOGRAPHER N/A	NORMA		5	3	2	4 3	3				0				0	0		5	3	2	4	3
HYDE ASSIST MINOR N/A	DIANE	1	0	2	4	9	7	7	5	4	0	,	5	1	6 9	0	1	1	5	2	0	6
HYDE SERVICING RBP N/A	JIMMY		1	2	4	1 :	3		9	8	0			2	4 7	0	_	1	3	6	4	0

Form LM-2 (Revised 2000)

(126)+

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

(A) Name (List all employees who received mo from your organization and any affilial (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	re than \$10,000 in total disbursements stes.) (If applicable)	Gro (before other	de	axe	es a	and		Allowances (E)	fc	bursei or Offik Busine (F)	SS	Other Disbursements (G)			otal H)		
IDB CLERK TYPIST N/A	LINDA		5	0	8	9 2	2	0			0	0		5 (0 8	3	9 2
INNES BOOKKEEPER BI N/A	SUSAN		2	7	5	0 4	4	0			0	0	-	2	7 !	5	0 4
IRVIN P/R REP N/A	GWYNNE		9	8	0	0	1	7 5 4 0		3 0	03	0	1 (0	8 :	5	4 4
ISAACSON ASSIST - MAJOR N/A	RICHARD	1	0	6	2	1	7	7960		6 8	3 0 1	0	1	2	0 1	9	7
ISA TRAINING REP N/A	монамме		9	2	0	4	3	4078		1 5	5 2 6	0		9	7	6	4

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received in from your organization and any affil (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	nore than \$10,000 in total disbursements diates.) (if applicable)	Gro (befo other	de	axe	s a	and		Allow:		ces	5	Disbursements for Official Business (F)	Other Disbursements (G)			Fota (H)			
JACKSON SERVICING REP N/A	DON		9	8	0	7 6	6	7	8	6	0	4187	0	1	1	0	1	2	3
JACKSON SERVICING REP N/A	MATHEW		9	7	8	5	1	8	0	0	0	9097	0	1	1	4	9	4	8
JACKSON INT'L OFF SEC N/A	YVONNE		3	9	7	4 :	5				0	O	0		3	9	7	4	5
JACOBS SERVICING REP N/A	WENDELL		9	7	9	2	6	7	5	4	0	4945	0	1	1	0	4	1	1
JAHA ASSIST MINOR N/A	BAHATI	1	0	1	0	0	7	7	5	4	0	6281	0	1	1	4	8	2	8

Form LM-2 (Revised 2000)

(129)+

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received from your organization and any at (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements filiates.) (if applicable)	Gr (befo	r de	axe	s a	ınd		Allowances (E)	ursei Offici isine (F)	cial :ss		Other Disbursements (G)			ota (H)			
JAKUBOWSKI SERVICING REP N/A	JOSEPH		9	8	0	7 6	5	7620	4 7	0	8	0	1	1	0	4	0	4
JANKOWSKI BOARD SEC N/A	ROBERTA		5	3	4	0 9	9	0			0	0		5	3	4	0	9
JEFFREY ASSIGNMENT N/A	MAX ROB		9	9	3	5 ·	1	7889	5 1	6	9	0	1	1	2	4	0	9
JENKINS STOCKROOM N/A	TAMMY		2	7	4	9 2	2	0			0	0		2	7	4	9	2
JENSBN SERVICING REP N/A	JAMES		9	8	0	7 (6	7920	5 9	9 3	3 9	0	1	1	1	9	3	5

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

(A) Name (List all employees who receifrom your organization and at (B) Position (Enter employee's job title. (C) Name of Affiliated Organization	<u> </u>	Gr (befo other	r de	axe	es e	and		Allowand (E)	æs		Disbursements for Official Business (F)	Other Disbursements (G)		,	To (H				
JEWELL SERVICING REP N/A	NORWOOD		9	7	8	5	1	7 9	6	0	6046	0	1	1	1	8	3	5	7
JIVIDEN SERVICING REP N/A	DONALD		9	7	9	2	6	7 9	6	0	4538	0	1	1	0) 4	I	2	4
JOHNSON SERVICING REP N/A	BRIAN		9	7	8	5	1	7 9	8	0	4837	0	1	1	C) 6	3	6	8
JOHNSON SERVICING REP N/A	CYNTHIA		9	2	6	5	4	7 0	5	8	3 0 4 6	0	1	0	2	2 7	7	5	8
JOHNSON SECURITY GUARDS N/A	HOMER		3	7	8	9	1		4	2	0	0		3	7	7 \$	9	3	3

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO

ENDING DATE OF PERIOD COVERED: 12/31/2004

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received from your organization and any (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	d more than \$10,000 in total disbursements effiliates.) On (if applicable)	G (befo	r de	axe	9S 8	and		Allowa (E		es		Disbursements for Official Business (F)	Other Disbursements (G)				otal H)			
Johnson Organizer N/A	NANCY		9	7	9	2 6	6	7 9	9	6	0	5695	0	1	1	i 1	1 :	5	8	1
JOHNSON SERVICING REP N/A	PHYLLIS		9	7	8	5 '	1	7 9	9	8	0	4088	0	1	C) (9 9	•	1	9
JOHNSON LEGISLATIVE REP N/A	SYLVIA		9	7	9	2 (6	7 !	9	7	2	13051	0	1	1	1 8	8 9	•	4	9
JOHN P/R REP N/A	JENNIFE		9	8	0	0	1	7	5	4	0	3 3 1 3	0	1	C) {	8 8	3	5	4
JONES MAINTENANCE N/A	ALFREDA		5	1	6	4	4				0	O	0		5	5	1 (3	4	4

ORGANIZATION NAME: AUTO WORKERS AFL-CIO

ENDING DATE OF PERIOD COVERED:

12/31/2004

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received me from your organization and any affilial (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements lates.) (if applicable)	Gros (before other d	tax	es : ctic	and	Allowa (E		S	Disbursements for Official Business (F)	Other Disbursements (G)	-	To (F			
JONES ADMIN SEC N/A	BEVERLY	5	5 5	3	6 4			0	0	0	5	5	3	6	4
JONES STENOGRAPHER N/A	COLLEEN	3	3	1	4 9			0	154	0	3	3 3	3	0	3
JONES SERVICING REP N/A	DENNIS	g	8 (0	0 1	7	9 6	0	6733	0	1 1	2	6	9	4
Jones Board Sec N/A	EVELYN	5	5 6	2	1 7			0	0	0	5	5 6	2	1	7
JONES ASSIST - REGION N/A	GARY	1 (8 (8	7 9	7	5 4	0	30911	0	1 4	1 7	3	3	0

ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/21/2004	

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received mo from your organization and any affilial (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization		ursements	Gro (befo other	r de	axe	s ai	nd		Allowa (E		œs			r O lusi:	ffic	ial	S	Other Disbursements (G)				ota (H)			
JONES ASSIST - MAJOR N/A	STEPHEN	*	1	3	1 '	7 2	2 0		6	5	7	3	1	7	7	6	7	0	1	:	5	6	0	6	0
JORDAN ORGANIZER N/A	KEN	*		4	9	2 8	В О	,	1	4	5	0		6	8	6	3	0			5	7	5	9	3
JOYCE P/R REP N/A	FRANK	*	1	0	1	1 !	5 0	>	4	7	2	2	i.		8	8	0	0	,	1	0	6	7	5	2
JUARBE SERVICING REP N/A	FERNAND			9	8	1 :	2 6	3	7	9	6	0		6	0	8	0	0	,	1	1	2	1	6	6
JURACEK ASSIST - MAJOR N/A	JAMES		1	0	6	2	9 2	2	7	9	4	0		4	3	7	6	0		1	1	8	6	0	8

ORGANIZATION NAME:	"
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2004	

(A) Name (List all employees who received in from your organization and any after (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	nore than \$10,000 in total disbursements illates.) (if applicable)	Gr (befo	r de	axe	es e	and		Allowances (E)		Disbursements for Official Business (F)	Other Disbursements (G)			Γota (H)			
KAGELS SERVICING REP N/A	DAVID		9	7	8	5	1	7 5 6	0	5 4 7 7	0	1	1	0	8	8	8
KAPA SERVICING REP N/A	KENNY		1	7	9	5	5	1 1 4	8	3 2 9	0		1	9	4	- 33	3 2
KARIEM SERVICING REP N/A	GERALD		9	8	0	0	1	794	0	5842	0	1	1	1	7	-	3 3
KARTSISTARIS CLERK TYPIST N/A	ANN MAR		5	0	5	0	0		0	0	0		5	0	5	(0 0
KAUFMANN LAW CLERK N/A	MARK		1	9	4	2	8		0	4210	0		2	3	6	•	3 8

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

(A) Name (List all employees who received in from your organization and any affiliated Organization (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements listes.) (if applicable)	Gro (befor other	dec	axe	s a	nd		Allowanco (E)	es		Disbursements for Official Business (F)	Other Disbursements (G)			「ota (H)		_	
KEANE CLERK TYPIST N/A	CORRINE		4	9 9	9 2	2 1				0	8 5	0		5	0	0	0	6
KEARNEY ORGANIZER N/A	CHARLES		9	8 (0 (0 1		7 9	4	0	26428	0	1	3	2	3	6	9
KEATTS SERVICING REP N/A	FRANK		2	5	0 4	4 5	5	1 7	9	6	1 4 0 1	0		2	8	2	4	2
KECK CLERK TYPIST N/A	MARY		5	1	6	8 9	3			0	0	0		5	1	6	8	9
KEE STRIKE INS REP N/A	JAMESBL		9	7	9	2 6	3	7 9	6	0	12517	0	1	1	8	4	0	3

ORGANIZATION NAME:	· · · · · · · · · · · · · · · · · · ·	
AUTO WORKERS AFL-CIO		
ENDING DATE OF BEDIOD COVERED.		=

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received many from your organization and any affilial (B) Position (Enter employee's job title.)	ore than \$10,000 in total disbursements listes.)	Gi (befo othe	r de	axe duc	s a	nd		Al	low	anc	æs			01	em ficia tes	al	ł	Other Disbursements				Tot	tal			
(C) Name of Affiliated Organization	(if applicable)		(1	D) 			L		(E	Ξ)				(F)		⇃	(G)			_	(H	1)			╛
KELLEY	ROBERT	1	1	1	6	3 8	3		7	5	6	0		3	7	в 6	;	0	ļ	1	2	2	9	•	3 4	
EDUCATION REP																			İ							1
N/A		<u> </u>											l				Ì									
KELLY	JENNIFE		9	3	0	3 8	3		7	0	3	2		1	7	8 6	3	0		1	0	1	8	-	5 6	-
RESEARCH SPEC																			Ì							
N/A																										
KELLY	MARK	1	0	2	3	4 7	,		7	5	6	0		7	8	7 1	1	0	Ì	1	1	7	7	,	7 8	;
ASSIST MINOR		}					1																			ļ
N/A																										
KELSON	JUDITH		5	7	9	9 2	2					0				(5	0			5	7	 ') !	9 2	!
STENOGRAPHER																										
N/A																										
КЕМР	STEPHEN		9	7	8	5 1	1		7	9	8	0		5	6	7 8	8	0	1	1	1	1		,	0 9	,
SERVICING REP																										
N/A																										
							!											l	_L_			—		_		_

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Form LM-2 (Revised 2000)

12/31/2004

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO

ENDING DATE OF PERIOD COVERED: 12/31/2004

(A) Name (List all employees who received m from your organization and any affiliate) (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements liates.) (if applicable)	Gr (befo	r de	ax	es : ctic	and		Allow (var (E)		s	Disbursements for Official Business (F)	Other Disbursements (G)	·		otal H)			
KENDZIORSKI ORGANIZER N/A	DOUGLAS		8	6	2	1	1	7	5	5 2	2 0	4570	0	Ş	9 8	3	3 (0	1
KENNY SERVICING REP N/A	JEFFREY		9	7	7	7	6	7	9	8	3 0	5 8 0 3	0	1 -	1	1 5	5	5	9
KERSON ASSIST - MAJOR N/A	ROGER	1	0	6	2	9	2	7	5	5 2	2 0	2722	0	1	1 (6 5	5	3	4
KESSLER SERVICING RBP N/A	SHARON		9	7	9	2	6	7	ę		3 0	5 5 9 3	0	1	1	1 4	1	7	9
KETOLA ORGANIZER N/A	DIANA		9	8	1	5	1	7	4	1 (6 0	6536	0	1	1	2	1	4	7

ORGANIZATION NAME: AUTO WORKERS AFL-CIO

ENDING DATE OF PERIOD COVERED:

12/31/2004

(A) Name (List all employees who received from your organization and any a (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements (filiates.)	Gr (befo other	re t	axe			Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)				otal		
KIMBEL SERVICING REP N/A	GARY		9	7	8 5	5 1	7 9 2 0	4163	0	1	i (0 9	9 9);	3 4
KINARD ASSIST - REGION N/A	DENNIS	1	0	6	8 8	3 2	7 9 2 0	25764	0	1	1 4	4	0 5	5 (6 6
KING SERVICING REP N/A	EARNEST *		6	6	9 ′	1 8	0	0	0		,	6	6 9	•	1 8
KING SERVICING REP N/A	JAMES		9	7	9 2	2. 6	7 5 4 0	8685	0	,	1	1	4	l	5 1
KING CLBRK TYPIST N/A	MELISSA		3	7	8 :	2 3	0	0	0			3	7 8	3	2 3

ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2004	

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received in from your organization and any at (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements filiates.) (if applicable)	Gr (befo	r de	axe	es al	nd	Allowan (E)	ce	s	Disbursements for Official Business (F)	Other Disbursements (G)				ital		
KING ASSIST - MAJOR N/A	ROY		9	9	6 1	1 1	7 9	4	0	6443	0	1	1	3	3 9	•	9 4
KING ASSIST MINOR N/A	VIRDELL	1	0	0	7 (6 5	8 0	0	0 0	7880	0	1	l 1	 I €	6 6	-	4 5
KINMAN SERVICING REP N/A	THOMAS		9	7	9 :	2 6	7 5	4	l 0	8184	0	1	l 1	1 3	3 6	•	5 0
KIRIAKI ORGANIZER N/A	JOSEPH *		2	1	7 (0 4	1 2	8	3 7	3 1 1 8	0		2	2 6	3 1]	0 9
KIRKSEY SERVICING REP N/A	WILLIAM		9	7	9 :	2 6	7 7	' 8	3 0	5062	0		1 '	1 () 7	•	6 8

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

	more than \$10,000 in total disbursements filiates.)	(befo		axe	es 8	and	7		Disbursem for Offici		Other							
(B) Position (Enter employee's job title.)		othe			tio	ns)		Allowances	Busines	S	Disbursements				ota			
(C) Name of Affiliated Organization) (if applicable)			D)			⅃	(E)	(F)		(G)			_((H)			_
KLEA	LEON	1	0	6	1	4 :	2	7 5 6 0	5 8	5 8	0	1) .	1 :	9 :	5	6	0
ASSIST - MAJOR																		İ
n/a																		
KLEBICK	SUSAN		4	5	7	5 (6	0		0	0		4	4	5	7	 5	6
TECH AID I									İ									
N/A																		
KLEIN	GARY		9	8	0	7	6	7 9 2 0	6 8	3 8	0	1	1	1	2	 3	3	4
SERVICING REP							ŀ											
N/A																		
KLEPSER	CYNTHIA		5	2	6	3	7	0			0			5	2	— 6	3	7
STENOGRAPHER																		
N/A																		
KLINE	BILBEN		5	2	5	7	5	0		1 6	0			5	2	5	9	1
CLERK TYPIST																		
N/A							1											
									<u> </u>			<u>L_</u>						

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ORGANIZATION NAME:

AUTO WORKERS AFL-CIO

ENDING DATE OF PERIOD COVERED:

12/31/2004

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received a from your organization and any after (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	nore than \$10,000 in total disbursements fillates.) (if applicable)	Gri (befo other	r de	3Xe	s a	nd	Allov (var (E)		5		r C Bus	M	cia ISS	1	Other Disbursements (G)			Tota (H			
KLINGFUS ORGANIZER N/A	GEORGE		9	8 (0 () 1	7	9	6	0	1	3	1	4	0	0	1	1	9	1	0	1
KNOX SERVICING REP N/A	ANN		9	9 :	5 7	7 6	7	9	2	0		7	7	2	2 2	0	1	1	5	2	1	8
KOBB BOARD SEC N/A	CAROLE		5	4 :	2 8	3 7				0				_	0	0		5	4	2	8	7
KOMER INT'L OFF SEC N/A	TRACY		5	8	2 ;	3 0				0					0	0		5	8	2	3	0
KOPPLIN SERVICING REP N/A	JAY		9	9	4 :	2 6	7	9) 6	0		9	7	, 7	7 3	0	1	1	7	1	5	5 9



Form LM-2 (Revised 2000)

ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2004	

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received mo from your organization and any affilial (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	re than \$10,000 in total disbursements ites.) (If applicable)	Gr (befo	r de	axe	es a	ind		Allowances (E)		Disbursements for Official Business (F)	Other Disbursements (G)				ota (H)	1		
KOROLENKO SERVICING REP N/A	PETER	1	0	1	7	4	4	754	0	12560	0	•	1	2	1 (8	4 4	Į.
KOSCINSKI SERVICING REP N/A	DAVID		9	8	0	7 (6	7 1 9	8	7409	0	•	1	1	2	6	8 3	-
KRAMER SECRETARY N/A	MARILYN		5	2	4	8	7		0	3	0			5	2	4	9 ()
KRELL ADMIN ASSISTANT N/A	PAUL	1	1	0	8	6	5	796	0	3 4 0 8	0		1	2	2	2	3 :	3
KROHN BOOKKEEPER BI N/A	CHERYL		2	5	7	3	8		0	0	0			2	5	7	3 (3

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ORGANIZATION NAME:	·
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
40/04/0004	
12/31/2004	

(A) Name (List all employees who received m from your organization and any affilial (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements lates.) (if applicable)	Gro (befo other	de	axe	s a	ind		Allowar (E)		es		Disbursement for Official Business (F)		Other Disbursements (G)			Tot (H			
KRUMHOLZ ORGANIZER N/A	MICHAEL		9	8	0 (0 1		7 9)	4	0	3309	3	0	1	3	9	0	3	9
KUMASI-NAKUR INT'L OFF SEC N/A	FANINA		5	3	4	5 8	3				0		0	0		5	3	4	5	8
KURISH EDUCATION REP N/A	MICHELL		9	8	0	0 1	1	7 8	3	4	9	206	1	0	1	0	7	9	1	1
KUSHNER SERVICING REP N/A	JULIE	1	0	2	4	2 (6	7 \$	9	6	0	2016	6	0	1	3	0	5	5	5 2
LA CHANCE SERVICING REP N/A	DAVID		9	7	9	2 (6	7 9	9	6	0	422	5	0	1	1	0	1	1	1

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ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

(A) Name (List all employees who received more the from your organization and any affiliates (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization (if a			r dec	ахе	s and		Allowances (E)	Disburseme for Officia Business (F)	1	Other Disbursements (G)			Tota (H)		
LA COUR ASSIST - MAJOR N/A	MICHABL	1	0	1 :	5 3	2	7840	656	3	0	1	1	5	9	3 5
LACEY BOOKKEEPER BI N/A	JACQUEL		5	0	6 5	2	0	7	' 2	0		5	0	7	2 4
LACK SERVICING REP N/A	DANIEL *		5	8	9 0	6	8 2 8	6	1 8	0		6	0	3	5 :
LAFATA SECRETARY N/A	JANICE		5	6	2 3	7	0	1 !	5 0	0		5	6	3	8
LAGE INT'L OFF SEC N/A	MICHELL		5	8	7 2	1	0	1:	2 5	0		5	8	8	4



ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who receive from your organization and any	d more than \$10,000 in total disbursements affiliates.)	Gr (befo	oss							Disbursements for Official	Other							
(B) Position (Enter employee's job title.)		othe	r de	du	ctic		١	Ailowances		Business	Disbursements			T	ota	ıl		l
(C) Name of Affiliated Organization	ON (if applicable)		((D)				(E)		(F)	(G)	L		ţ	(H)			
LAKE	JAMES		9	7	9	2 (6	752	0	4159	0		1 (0	9	6	0	5
SERVICING REP																		
N/A																		}
LAMOTHE	DWAINE		9	7	7	2	8	800	0	4909	0	1	1	1	0	6	3	7
SERVICING REP												ļ						
N/A											i							
LANE	LYNNE		9	6	6	0	1	5 4 8	2	4113	0	t	1	0	6	1	9	6
ORGANIZER																		
N/A		•																
LANGAN	LISA		5	3	1	2	2		0	0	0	T		5	3	1	2	2
STENOGRAPHER																		
N/A																		
LANGE	JONATHA		6	2	4	8	8		0	0	0	1		6	2	4	8	8
UTILITY REPAIR																		
N/A																		
	·	1						<u> </u>		l	<u> </u>							



12/31/2004

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FILE NUMBER:	0	0	0	-	1	4	9

ORGANIZATION NAME:	<u>-</u>	_
AUTO WORKERS AFL-CIO		
ENDING DATE OF PERIOD COVERED:		=
12/31/2004		

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received from your organization and any at (B) Position (Enter employee's job title.)	more than \$10,000 in total disbursements fillates.)	Gr (befo		axe	s an		Allow				Disbursen for Offici Busines	al	Other Disbursements			To	bal.		
(C) Name of Affiliated Organization	(If applicable)))		-,	Allow (E		ces		(F)		(G)			(H			
LANG KEYPUNCH OPER N/A	PAMELA		5	0 4	4 0	9				0		0	0		5	i 0	4	0	9
LASH ASSIST - REGION N/A	LINDA	1	0	7 9	9 0	0	7	5	0	0	2 6	5 0	0	1	1	8	0	5	0
LATHEM SERVICING REP N/A	SAMUEL *		8	0 8	8 3	3 4	4	6	4	2	3 5	3 1	0		8	3 9	0	0	7
LAUBERT SKILLED TRADES R N/A	KENNETH	1	0	1	6 9	0	7	7	8	0	124	5 5	0		1 2	2 1	9	2	2 5
LAUKA AUDITOR N/A	STEPHEN		9	7	8 :	5 1	7	9	8	0	7 1	0 0	0		1 ′	1 2	2 9	3	3 1

(46)

ENDING DATE OF PERIOD COVERED:

12/31/2004

(A) Name (List all employees who received in from your organization and any affile) (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	nore than \$10,000 in total disbursements liates.) (If applicable)	Gr (befo	r dec	axe	s aı	nd		Allov (ran E)	ces	3	Disbursements for Official Business (F)	Other Disbursements (G)			otal H)			
LAUTENSCHLEG STENOGRAPHER N/A	BETTY		5	0 (5 (9					0	C	0		5 () 5	5 (0 9	•
LAY ASSIST DEP HEAD N/A	DAVID	1	0	2 -	4 2	2 2		7	9	6	0	7 3 4 9	0	1 '	1 7	7 7	7	 3 1	_
LE TOURNEAU SERVICING REP	RICHARD		9	7	8	5 1		7	9	8	0	8886	0	1	1 4	4 7	7	1 7	,
LEACH SERVICING REP N/A	EDWARD *		8	7	1 4	4 4		4	0	3	1	2249	0	,	9 ;	3 4	1	2 4	1
LEAKE ADMIN SEC N/A	MARY		5	4	6	3 8	3		•		0		0	;	5	4 (5	3 8	3



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ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received from your organization and any all	more than \$10,000 in total disbursements filiates.)	Gr (befo	OSS ore t									Dist	bur or C				Other								
(B) Position (Enter employee's job title.)		othe	r de	du	ctio			Allow	<i>r</i> ar	ıce:	S		Bus				Disbursements	l		•	Tot	al			
(C) Name of Affiliated Organization) (if applicable)		(D)				(1	E)				(F)			(G)				(H)			
LBE	BRUCE		9	7	9	2	6	7	9	8	0	1	0	5	1	1	0		1	1	6	4	1	1 7	
SERVICING REP								!																	ł
N/A								l																	
LBE	MICHAEL	1	0	3	6	3	8	7	8	- 5	4	1	3	4	5	6	0		1	2	4	9	_	1 8	-
GRANT												1													ļ
N/A								i																	
LEGG	JOHN		9	7	8	5	1	7	9	8	0		3	9	3	1	0		1	0	9	7	•	6 2	. –
SERVICING REP		•																							
N/A																	i								
LEGREE	MARY		3	6	3	4	7				0					0	0	T		3	6	3	, 4	4 7	,
SECRETARY																		-							
N/A																									
LEHR	RAY E		3	8	4	9	8			4	6					0	0	+		3	8	- 5	; 4	4 4	-
SECURITY GUARDS																									
N/A																									!



12/31/2004

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who receive from your organization and any (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	od more than \$10,000 in total disbursements affiliates.) On (if applicable)	Gro (befo other		axe Juc	s a	nd		Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)		•	Tot (H	-		
LENTZ BOOKKEEPER BI N/A	MARIE		5	2	8	5 3	3	0	138	0		5	2	9	ξ	1
LENTZ SERVICING REP N/A	RANDY		9	8	3	7	1	7540	3 2 9 8	0	1	0	9	2	(9
LEON BOARD SEC N/A	JOELYN		5	7	6	6	2	0	0	0		5	7	6	•	3 2
LESLBY ASSIST - MAJOR N/A	HELEN	1	0	6	2	9	2	7540	4 3 6 1	0	1	1	8	1	•	3
LESTER LEGAL SEC N/A	BRENDA		5	3	1	1	1	0	1 3 8	0		5	3	2		1 9

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ORGANIZATION NAME: AUTO WORKERS AFL-CIO

ENDING DATE OF PERIOD COVERED:

12/31/2004

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received m from your organization and any affil (B) Position (Enter employee's job title.)	ore than \$10,000 in total disbursements listes.)	(befo		эхе	s a	and						Disbui	Offi	cia	l	Other	_		_				
(C) Name of Affiliated Organization	(if applicable)	other)) (C	ZIOI	ns)]	Allow (I	<i>r</i> ar E)		S	Bus	iine (F)		•	Disbursements (G)			Cota (H)				
LETKOWSKI ASSIST - REGION	MICHABL		9	8	0	0	1	7	9	4	0				4	0	1 (0	9	7	3	3 5	;
N/A																							
LETTRE ORGANIZER	ROBERT *		7	6	5	2	3	3	4	0	1	3	3	3 9	 9 3	0		8	3	3	1	1 7	,
N/A								Ĭ															
LEVINSON SYS ANALYST N/A	MENAHEM		9	8	0	7	6	7	9	2	2 0	5	5 5	5 2	2 8	0	1	1	1	5	-	2 4	1
LEVY CITIZENSHIP REP N/A	SUSAN		9	7	8	5	1	7	9		3 0	1 1	<u> </u>	1 9	9 2	0	1	1	7	0		2 ;	3
LEWIS MAINTENANCE N/A	DEREK		5	0	7	4	1		_		0			2	1 6	0		5	0	9	• •	5	- 7

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ENDING DATE OF PERIOD COVERED:

12/31/2004

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than from your organization and any affiliates.)	\$10,000 in total disbursements	Gro (befo										ſ	Disbu for				Other							
(B) Position (Enter employee's job title.)		other	dec	duc			1	Allo	swa	nce	s	ł		ısin			Disburseme	ents			To	tal		
(C) Name of Affiliated Organization (# appl	(cable)		([)) 			<u> </u>		(E)				(F))		(G)				(1	1)		
LEWIS	LARRY *		7	2	4 :	9 5	;		5 6	3 4	1 3		;	5 9	9 4	9		0		8	3 4	1 0) (8 7
SERVICING REP							1					ı												
N/A																								
LICARI	PAMELA		5	0	0	3 1					()				0		0		5	5 () ()	3 1
CLERK TYPIST		ĺ																1						
N/A																								
LINDEMAN	VINCENT		9	8	0	0 1			7 9	9 4	4 (+		7 :	9 !	5 1		0	1	1	1 3	3 8	3	9 2
ORGANIZER																								
N/A												İ												
LOGAN	KARLA		9	7	8	5 1	1		7	9 8	B (,	1	2	7 (<u> </u>		0	1	1	1 8	3 5	5	3 2
SERVICING REP							ļ																	
N/A																								
LOINES	DWIGHT		9	7	8	5 ′	1		7	9	6 ()	1	5	8	2 0		0	1	1	2	1 (— 6	3 1
CITIZENSHIP REP																								
N/A																	ĺ							

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ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:

12/31/2004

(A) Name (List all employees who received m from your organization and any affil (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements intes.) (if applicable)	Gr (befo	r de	tax	es ctic	and		Allowa (E)		ces		Disbursements for Official Business (F)	Other Disbursements (G)			To (F	tal I)			
LONG ADMIN ASSISTANT N/A	RICHARD	1	1	6	9	8	1	7 5	5	4	0	7583	O	1	3	2	1	() 4	4
LONG SERVICING REP N/A	THOMAS		9	8	0	7	6	7 9	9	2	0	8 2 4 3	0	1	1	4	2	: ;	3 9	9
LONG SERVICING REP N/A	TONY		9	7	8	5	1	7 9	9	8	0	5239	0	1	1	1	· C)	7 (0
LOPICCOLO SECRETARY N/A	ALICE		5	1	7	' 1	6				0	0	0		5	5 1	1 7	,	1	6
LORTZ ASSIST - REGION N/A	KENNETH	1	0	8	8	7	9	7 9	9	4	0	8 5 9 4	0	1	2	2 5	5 4	I	1	3

RGANIZATION NAME:		
AUTO WORKERS AFL-CIO	<u></u>	
NDING DATE OF PERIOD COVERED:		
12/31/2004		

	ore than \$10,000 in total disbursements lates.)	(befo		3X6	s ar						sburs for O	ficia	al	Other	T					
(B) Position (Enter employee's job title.)		other		duc))	tion	s)	Allow		es		Busi		\$	Disbursements	\$			ota	1	
(C) Name of Affiliated Organization	(if applicable)		,,,	<i>''</i>			(E	<u>:)</u>		↓_	<u>(</u> F	•)		(G)	╀			(H)		
FOAE	THERESA		5	1 9	9 6	7			0				0	0		;	5	1 9	9	6 7
BOARD SEC		Ì]						
N/A																				
LYLE	ULYSSES		5	0	2 5	5 1			C	1			0	0	1		5	0	 2	5 1
MAINTENANCE										1										
n/A																				
MADORE	L ROBER	1	1	2	9 5	5 0	7	9	8 ()	2 5	1	5 2	C	十	1	4	6	0	8 2
ASSIST - REGION		l																		
n/A															ļ					
MAHN	TANYA		9	8	0 () 1	7	9	8 (<u>, </u>	2	7	9 9		1	1	0	8	 7	8 0
ORGANIZER							ļ			ļ										
n/A																				
MALLON	KAROL		5	4	5	7 4			(1	1	7	9 5	C	,	-	5	6	3	6 9
ADMIN SEC																				
N/A																				

ENDING DATE OF PERIOD COVERED:

12/31/2004

(A) Name (List all employees who received in from your organization and any af (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	nore than \$10,000 in total disbursements iliates.) (if applicable)	Gi (befo othe	r de	axe	s a	nd	Allowan (E)	ces	Disbursements for Official Business (F)	Other Disbursements (G)			ota (H)			
MALLORY SECURITY GUARDS	RICKIB	5 5 5 5 5 5 15 15	4	0	9 4	4 8		3 9	0	0		4	0 :	9	8	7
MANCEWICZ ORGANIZER N/A	LYNEE		9	9	4 2	2 6	7 9	6 0	9817	0	1	1	7	2	0	3
MANIAN SECRETARY N/A	BLIZABE		5	2	6	7 1		0	0	0		5	2	6	7	1
MANIAN MAINTENANCE N/A	STEVEN		4	9	6	2 2		O	0	0		4	9	6	2	2
MANN ORGANIZER N/A	DAVID *		6	0	0	2 7		C	299	0		6	0	3	2	6



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ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

(A) Name (List all employees who received from your organization and any a (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements filiates.)	Gro (before other	re ta dec	ахе	s a	ind		Allowance (E)	s	Disbursements for Official Business (F)	Other Disbursements (G)				To (H	tal I)		
MANZELLA EDUCATION REP N/A	FRANCIS		9	6	2	9 4	4	7 5 6	0	7 2 3 5	0		1	1	1	0) ;	8 9
MANZO ORGANIZER N/A	PATRICI		9	7	8	5	1	7 9 8	3 0	3829	0		1	0	9) 6	•	6 C
MARINO ORGANIZER N/A	BAXTER		9	8	0	0	1	5 8 7	' 6	2 2 3 2	0		1	0	6	5 1		0 9
MARKELL SERVICING REP N/A	BRAD		9	7	9	2	6	796	6 0	5033	0	i	1	1	C	9 9	•	1 9
MARKEY BOOKKEEPER BI N/A	JANET		4	7	4	5	4		0	0	0			4	7	7 4	Į.	5 4

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

(A) Name (List all employees who received in from your organization and any aff (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	nero than \$10,000 in total disbursements iliates.) (if applicable)	Gr (befo	r de	axe	3S 8	and		Allowances (E)	isbursements for Official Business (F)	Other Disbursements (G)			Tot				
MAROLLA CLERK TYPIST N/A	NANCY		5	2	2	0	3	0	0	0		5	2	2	()	3
MARSHALL SERVICING REP N/A	DONALD		9	8	0	7	6	7920	4 0 5 2	0	1	· 1	0	0		4	8
MARTIN-ZIMME SECRETARY N/A	CAROLYN		5	6	1	2	7	0	5643	0		6	3 1	7	•	7	0
MARTINEZ DE CLERK TYPIST N/A	RAQUEL		5	1	2	4	6	0	0	0		5	5 1	2	?	4	6
MARTINEZ CLERK TYPIST N/A	MYRIAM		5	1	8	5	7	0	0	0		5	5 1	8	}	5	7

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received me from your organization and any affilial (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	re than \$10,000 in total disbursements ates.) (if applicable)	Gr (befo othe	r de	tax	es Ictic	and		Allow (an E)		S	Disbursements for Official Business (F)	Other Disbursements (G)			ota (H)			
MARTIN AUDITOR N/A	FRANK		9	7	9	2	6	7	9	6	0	6782	0	1 1	1	2	6	6	8
MARTIN SERVICING REP N/A	JOHN	1	0	7	3	0	2	8	2	4	2	5014	0	1 2	2	0	5	5	8
MARTIN SECURITY N/A	MARK		7	5	5 5	3	4	3	3	0	0	1 3 1 5	0	ł	8	0	1	4	9
MARTIN ASSIST - MAJOR N/A	MICHELE	1	0	6	2	1	7	7	9	6	0	4873	0	1	1	9	0	5	0
MARTIN SERVICING REP N/A	NATHANI		9	7	7	' 3	6	7	9	3 (0	6 5 2 2	0	1	1	2	2	3	8

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ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received me from your organization and any affilial (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	re than \$10,000 in total disbursements stes.) (if applicable)	Gr (befo	r de	axe	es a ctio	and		Allow (I	an E)	ces	;	Disbu for Bu	Off	ici es	al	1	Other Disbursements (G)				tal			
MARTIN ASSIST MINOR N/A	RICHARD	1	0	0	7	4	9	7	9	4	0	4	1 8	B :	3	9	0	1	1	3	5		2	8
MASON ASSIST - REGION N/A	GARRY	1	0	8	8	7	9	7	9	6	0	1	3 :	5	3	3	0	1	2	5	5 3	•	7	2
MASSENBURG ORGANIZER N/A	MARY AN		9	8	0	7	6	7	9	2	0	:	2 ;	8	8	4	0	1	0	8	3 8	•	8	0
MASTROPIETRO SERVICING REP N/A	DANIEL		9	7	8	5	1	7	9	8	0	1	0	8	5	0	0	1	1	€	 6 6	}	8	1
MATHIS SERVICING REP N/A	MICHABL		9	7	8	5	1	7	9	7	4		9	4	5	6	0	1	1	8	5 2	2	8	1

S - 10

ORGANIZATION NAME: AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED: 12/31/2004	

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (Ust all employees who received from your organization and and (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization		Gro (before other	dec	axe	s ar	nd	Allow (ranc E)	es		Disburser for Offic Busine (F)	lsic		Other sbursem (G)	ents			Tot (H			
MATLAS UTILITY REPAIR N/A	MICHAEL		5	6 <i>'</i>	1 4	1 2			(D	3	6 1			0		5	6	5	C	3
MAURER INTERN N/A	JEFFREY		1	6 2	2 7	7 8			(0		()		0		1	6	2	7	7 8
MAYS SERVICING REP N/A	EARLIE		9	8 (0 () 1	7	9	6 (0	114	6			0	1	1	7	4	2	2 2
MC AFEE ASSIST MINOR N/A	FANNIE	1	0	2	4 9	9 7	7	5	6 (0	4 (6 5	5		0	1	1	4	. 1	-	2 2
MC ATTEE CITIZENSHIP REP N/A	BRUCE	1	0	1	7 '	1 6	7	9	4	0	6 8	0 (6		0	1	1	6	5 4	•	3 2

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ENDING DATE OF PERIOD COVERED: 12/31/2004

(A) Name (List all employees who received in from your organization and any affit (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	nore than \$10,000 in total disbursements iliates.) (if applicable)	Gr (befo other	r de	axe	s a	ind		Allowan (E)	ces	\$	Disbursements for Official Business (F)	Other Disbursements (G)			ota (H)	Ì		
MC CARTY DEPART HEAD N/A	PATRICK	1	0	6	2	1 7	•	7 9	6	0	8331	0	1 :	2	2 !	5	0	8
MC CLAIN ASSIST - MAJOR N/A	TIMOTHY	1	0	6	1	4 2	2	7 5	6	0	5789	0	1	1	9	4	9	1
MC DERMOTT CLERK TYPIST N/A	DONNA		5	1	6	5 7	7			0	1 5 0	0		5	1	8	0	7
MC DOWELL SERVICING REP	SAMUEL		9	9	5	0 '	1	7 9	4	6	15343	0	1	2	2	7	9	0
MC KENNA-DEC TECH AID I N/A	AUDREY		5	1	4	3 (6			0	4 5 3	0		5	1	8	8	9

ORGANIZATION NAME: AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED: 12/31/2004	

(A) Name (List all employees who received in from your organization and any after (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements fillates.) (if applicable)	Gi (befo	r de	tax	es ictic	and		Allowance (E)	es	Disbursements for Official Business (F)	Other Disbursements (G)				otal H)		
MC KIDDY MAINTENANCE N/A	MICHABL		4	7	8	3	2		0	0	0		4	1 7	7 8	;	3 2
MC KIDDY ASSIST MINOR N/A	RICKBY	1	0	2	5	7	2	7 5 (0 0	5 9 6 5	0	1	1	1 6	6 0) ;	3 7
MC NAMARA AUDITOR N/A	MICHAEL		9	7	8	5	1	7 9 (8 0	6635	0	1	1	1 2	2 4		6 6
MC NULTY SERVICING RBP N/A	BDWARD		9	7	. 8	2	6	7 5	4 0	6508	0	1		1	1 9	•	7 4
MCALLISTER ADMIN ASSISTANT N/A	DAVID	1	1	4	8	3 2	9	7 5	0 0	8954	0	1	;	3	1 2	2	8 3

ORGANIZATION NAME:

AUTO WORKERS AFL-CIO

ENDING DATE OF PERIOD COVERED:

12/31/2004

(A) Name (List all employees who received m from your organization and any affil (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements lates.) (if applicable)	(betore to other de	axi	es a ctio	and		Ailowances (E)	D	Disbursements for Official Business (F)	Other Disbursements (G)			Tot			
MCCALEBB MULTILITH OPER N/A	ELAINA	4	9	6	6 5	5	0		0	0		4	9	6	6	5
MCCALLUM HVAC OPERATOR N/A	KARL	6	9	2	5 5	5	0		0	0		6	9	2	5	5 5
MCCARTHY LEGAL SECRETARY N/A	KAREN	5	1	7	5 (٥	0		7 5	0		5	1	8	2	2 5
MCDONALD STENOGRAPHER N/A	SUZANNE	5	2	7	9 9	9	0		0	0		5	2	7	Ş	9
MCGBE SERVICING REP N/A	ARTHUR	9	8	0	0	1	7940		3778	0	1	0	9	7		1 9

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received from your organization and a (B) Position (Enter employee's job title. (C) Name of Affiliated Organization		Gi (befo	r de	ах	9S 8	and		Allowances (E)		Disbursements for Official Business (F)	Other Disbursements (G)			To (ŀ	tal I)			_
MCGHEE P/R REP N/A	REGINAL		9	8	0	0	1	7520)	4 3 5 3	0	1	0	9	8	-	7	4
MCGOWAN SERVICING REP N/A	EDWARD		9	7	8	5	1	774()	5532	0	1	1	1	1	_	2	3
MCHUGH SERVICING REP N/A	ROBERT *		9	4	9	9	6	4622	2	9206	0	1	O	8	8 8	3 :	2	4
MCKAY SWITCHBOARD N/A	JUDY		4	3	6	6	6)	0	0		4	3	3 6	,	6	6
MCLAREN MULTILITH OPER N/A	DAVID		5	3	0	6	8		0	0	0		5	5 3	3 0)	6	8

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12/31/2004

ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
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10 10 11011110110111 = 0.0	

ENDING DATE OF PERIOD COVERED: 12/31/2004

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received from your organization and any all (B) Position (Enter employee's job title.)	more than \$10,000 in total disbursements filiates.)	Gr (befo		axe	s ar		Allana				Disbursen for Offic Busines	ial	its	Other		_		•	
(C) Name of Affiliated Organization	(if applicable)))	uon	3,	Allow (I	and E)	ces	,	(F)	~		Disbursements (G)			ota (H)		
MCLIMANS	JERRY		7	6	5 9	8 (3	3	8	1	2 4	9	9	0	1	В	2 4	4	7 8
TRAINING REP																			
N/A																			
MCWILLIAMS	CHERYL		3	6	9 3	3 3				0			0	0	;	3	6	9	3 :
MAINTENANCE																			
N/A							 												
MEADOWS	SHARON	1	0	8	8	7 9	7	9	4	0	2 6	5	2	0	1	1	9	4	7
ACTUARY																			
N/A																			
MRANY	WILLIAM		9	7	8 !	5 1	7	9	8	0	4 1	0	8	0	1	0	9	9	3
SERVICING REP											ļ								
N/A																			
MBININGER	JUDITH	 	5	2	6	9 1				0	6	5	6	0		5	3	3	4
SECRETARY																			
n/a																			

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Form LM-2 (Revised 2000)

ENDING DATE OF PERIOD COVERED: 12/31/2004

(A) Name (List all employees who received m from your organization and any affilial (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursemer liates.) (if applicable)	— (bei	Fross fore for de	tax	9S 8	and		Allowances (E)	3	Disbursements for Official Business (F)	Other Disbursements (G)			otal H)			
MELARA EDUCATION REP N/A	JOSE		9	7	8	5	1	798	0	7797	0	1	1	3 6	3 :	2 (В
MESSER SERVICING REP N/A	JOHN *		6	7	3	8 (6	3 3 8	1	2904	0	•	7	3 6	6	7	1
METHNER STOCKROOM N/A	ROBERT		5	0	9	0 -	4		0	0	0	,	5	0 9	9	0	4
MICHALIK BOOKKEEPER BI N/A	CHRISTI		5	2	5	5	5		0	0	0		5	2 !	5	5	5
MICKENS SERVICING REP N/A	KEITH		9	7	9	2	6	796	0	8739	0	1	1	4 (6	2	5

ENDING DATE OF PERIOD COVERED:

12/31/2004

	vod moro than \$10,000 in total disbursements ry affiliates.)	(befo		эхе	s an			Disbursements for Official	Other				•			
(B) Position (Enter employee's job title.)		other		duc))	tions	s)	Allowances	Business	Disbursements				ota			
(C) Name of Affiliated Organizat	Lion (if applicable)		γ.	<u>" </u>			(E)	(F)	(G)			_(H)		_	_
MIKULAN	ROBERT		9	7 9	9 2	6	7 9 6 0	3 3 1 3	0	1	(0 9	9	1	9	9
RESEARCH SPEC		1							'							
N/A																
MILATZ	CHERYL		5	0	1 8	6	3 0	0	0		_ ;	5	0	1	8	6
STOCKROOM									r I							
N/A																
MILLER	ADAM	1	0	5	0 6	1	7940	7805	0	1	1 :	2	0	8	0	6
BENEFIT REP		!														
N/A																
MILLER	BLAKE		9	7	8 5	5 1	7 9 8 0	5941	0	,	1	1	1	7	7	2
AUDITOR										!						
N/A																
MILLER	JOHN *		7	4	2 1	6	6 4011	3 3 1 5	0			8	1	5	4	2
TRAINING REP																
N/A																
·									1	1						



ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	<u> </u>
12/31/2004	

(A) Name (List all employees who received mon your organization and any affill (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements ates.)	Gr (befo other	r dec	axe	es a	and		Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)			To:			
MILLER BOOKKEEPER BI	LYNDA		5	2	4	6 0	,	0	8 8	0		5	_		•	4 8
MILLER SERVICING REP N/A	MICHAEL		9	7	8	5 1		7 9 8 0	3 7 5 1	0	1	0	9	5		B 2
MILLER STENOGRAPHER N/A	TAMMIE		5	1	8	1 8	3	0	0	0		5	1	8	<u> </u>	1 8
MILLER TECH AID I N/A	VELMA		5	1	8	6 8	В	0	0	0		5	j 1	8	} (6 8
MILLS MAINTENANCE N/A	DORETHA		4	1	4	0 4	4	0	0	0		4	l 1	4	ļ ·	0 4

ENDING DATE OF PERIOD COVERED: 12/31/2004

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who receives from your organization and any (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	f more than \$10,000 in total disbursements affiliates.)	Gr (befo	r de	axe	es a ctic	and		Allow (rar E)		s		r O Jusi	ffic	ial		Other Disbursements (G)				ital H)			
MINNIS RETIREE REP N/A	ARTHUR		9	7	9	2	6	7	9	6	0	2	1	0	7	2	0	1	2	: 6	3 9) (5	8
MINOR SERVICING REP N/A	WILLIAM		9	7	8	5	1	7	9	8	0		6	0	1	4	O	1	1	1	. 8	3 .	4	5
MIRER HEALTH-SAFETY N/A	FRANKLI	1	1	8	1	6	6	7	9	0	0		6	0	3	5	0	1	3	3 2	2 1		0	1
MISURACA SERVICING REP N/A	DOMINIC		9	8	0	0	1	7	9	4	0		3	5	9	7	0	1	C) (9 5	5	3	8
MISZEWSKI SERVICING REP	ROBERT		9	7	8	5	1	7	9	3 (3 0		6	2	0	3	0	1	1	1 2	2 (_	3	4

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ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2004	

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more that from your organization and any affiliates.) (B) Position (Enter employee's job title.)	s \$10,000 in total disbursement	– (befi		tax	es :	and			D	isburse for Off	ici	al	Other							
(C) Name of Affiliated Organization (# exp	(icable)	othe		iau D)		ens)		Allowances (E)		Busin		8	Disbursements (G)				lota (H)			
(O) Name of Annated Organization (**							_	(-)	╄	(F	<u>, </u>		(0)	-	_		(11)			
MITCHBLL	BRIAN *		8	9	6	4	8	4562	l	8	7	7 0	0	'	1	0	2	9	8	0
SERVICING REP																				
N/A																				
MITCHELL	DEBORAH		4	9	7	7	4	0	T			0	0			4	9	7	7	4
TECH AID I																				
N/A								i												
MITCHELL	KEVIN		9	7	9	2	6	7540		2	6	5 5	6 0		1	0	8	1	2	1
SYS MANAGER																				
N/A							ļ													
MITCHELL	LINDA		9	7	8	5	1	8000		1 5	3	5 1	0	<u> </u>	1	2	1	2	0	2
AUDITOR																				
N/A																				
MITCHELL	MAURICE	1	10	1	6	9	0	7960	+	8	6	6 5	5 0	T	1	1	8	3	1	5
SERVICING REP																				
N/A																				

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FILE NUMBER:	0	0	0	-	1	4	9
	_	_	_			•	•

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:

12/31/2004

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who in from your organization and (B) Position (Enter employee's job (C) Name of Affiliated Organization		Gr (befo	r de	ахе	8S &	and		Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)			To (F			
MITCHELL CLERK TYPIST N/A	PAULINE		4	8	7	3 9	•	0	0	0		4	8	7		3 9
MITCHBLL ASSIST - MAJOR N/A	PAUL	1	0	4	1	1 3	3	7 5 6 0	7603	0	1	1	9	2	•	7 6
MITCHELL SERVICING REP N/A	SUSANNE		9	8	0	0	1	7 9 4 0	3 2 9 2	o	1	i C	9	2	! ;	3 3
MOCERI INTERN N/A	TONI		2	7	1	3 (В	0	6 2	0		2	? 7	7 2	· (0 0
MOCNIK STENOGRAPHER N/A	PATRICI		5	1	5	5 :	2	0	0	0		5	5 1	1 5	•	5 2

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ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

(A) Name (List all employees who received in from your organization and any aff (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	nore than \$10,000 in total disbursements mates.) (if applicable)	Gr (befo other	r de	axe	es a	ind		Allowances (E)		Disbursements for Official Business (F)	Other Disbursements (G)		ota (H)			
MOFFATT ASSIST - MAJOR N/A	LARRY	1	0	6	1	4 2	2	7980	,	10498	0	12	4 (6	2 ()
MOFFETT CLERK TYPIST N/A	CECELIA		5	1	2	0 8	8	0	,	0	0	5	1 :	2	0 8	3
MOHAN SERVICING REP N/A	јони		9	7	6	6	7	7660)	4 2 8 1	0	1 0	9	6	0 1	3
MONAGHAN SERVICING REP N/A	FRANCIS *		5	2	8	9	4	1 4 7 0)	1368	0	5	5	7	3 :	2
MONKEVICH MACHINE ROOM N/A	NICHOLA		6	5	5	4	7	C)	0	0	6	5	5	4	7

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:

12/31/2004

(A) Name (List all employees who received m from your organization and any affilial (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements lates.) (if applicable)	Gro (befor other	re ta	axe: duc	s ar	nd		Allowa (E		æs	,		ursi Offusir	ficia les:	al	Other Disbursements (G)	š			To (F			
MONK SERVICING REP N/A	RODNEY		9	8 (0 (0 1		7 9	9	4	0		3	3 (6 4	0		1	0	9	3	(5
MONROE MULTILITH OPER N/A	JUDITH		3	5 :	2 9	9 7				_	0			1	2 0	0			3	. 5	4		1 7
MONTANI SERVICING REP N/A	SCOTT		9	7 :	9 2	2 6		7	7	2	0	1	1	0	0 9	0		1	1	6	6		5 5
MOORE SERVICING REP N/A	CECIL *		9	2	2	7 8	3	4	6	4	2		2	1	4 3	3	,		9	9	0		6 3
MOORE ORGANIZER N/A	DERRICK		9	8	0	7 6	3	7	9	2	0		4	3	9 9		,	1	1	-) 3		9 (

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:

FILE NUMBER: 0 0 0 - 1 4 9

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more from your organization and any affiliate (B) Position (Enter employee's job title.)	than \$10,000 in total disbursements s.)	(bef		axe	s a	nd			ľ	Disbursements for Official Business	Other							
(C) Name of Affiliated Organization (#	nonlicable)	othe		auc D)	uor	15)		Allowances (E)		(F)	Disbursements (G)				otal H)			
(S) Italia S. Fallinatos S. Ballinasis II.							\dashv		╁	 -			_		_			ł
MOORE	JAMES	1	0	6	1 4	4 2	2	7980		18033	0	1	3	3 2	2 '	1	5 5	
ASSIST - MAJOR																		
N/A							ĺ											
MOORE	TERRY		1	0	2	5 :	3	0	†	0	0		1	1 (0 2	2	5 3	1
LOSS WAGES								i										١
N/A							ļ											
MORGAN	A VERON		5	2	5	1 (6	0		0	0		_	5	2 !	5	1 6	-
STENOGRAPHER		<u> </u>					-		ſ									
N/A																		
MOROSKI	CHRISTI	 	9	7	8	5	1	7 5 6 0	1	4 5 1 1	0	1	(0	9	9	2 2	Η.
P/R REP																		
N/A																		
MORRIS	JOHN	1	0	1	6	8	6	7760	1	10513	0	1	 '	1	9	9	5 9	-
SERVICING REP									1									
N/A																		

12/31/2004

FILE NUMBER: 0 0 0 - 1 4 9

ENDING DATE OF PERIOD COVERED: 12/31/2004

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

nore than \$10,000 in total disbursements liates.)	(befo	ore t	axe	s a	nd	Ī			Disbursements for Official	Other							
(if applicable)	Cure			AUQ1	15)		Allowance: (E)	5	(F)	Disbursements (G)							
KIM		5	2	5	7 9	,		0	0	0			5 2	2 5	5	7	9
																	I
										1							
DARRELL		9	8	0	0 1	1	7 9 4	0	7 4 8 9	0	_	1	1 :	3 4	-	3	0
											<u> </u>						
GLORIA		9	8	0	7 6	3	7 9 2	0	9061	0	-	1	1	5 ()	5	7
	ļ					ı											
						ļ											
KURT		6	0	2	3 2	2		0	0	0		(6	0 2	2	3	2
	·									Ŀ							
CARLENA	1	0	9	2	4 3	3	7 9 2	2 0	2970	0		1 :	2	0	1	3	3
	DARRELL GLORIA KURT	(if applicable) KIM DARRELL GLORIA KURT	(if applicable) KIM 5 DARRELL 9 KURT 6	(if applicable) KIM 5 2 DARRELL 9 8 GLORIA 9 8	(if applicable) KIM 5 2 5 DARRELL 9 8 0 KURT 6 0 2	(if applicable) KIM 5 2 5 7 9 DARRELL 9 8 0 0 1 KURT 6 0 2 3 2	(Happlicable) KIM 5 2 5 7 9 DARRELL 9 8 0 0 1 GLORIA 9 8 0 7 6 KURT 6 0 2 3 2	(before taxes and other deductions) (D) KIM 5 2 5 7 9 DARRELL 9 8 0 0 1 7 9 4 GLORIA 9 8 0 7 6 7 9 2	(d) applicable) (D) (D) (E) KIM 5 2 5 7 9 0 DARRELL 9 8 0 0 1 7 9 4 0 GLORIA 9 8 0 7 6 7 9 2 0 KURT 6 0 2 3 2 0	(before taxes and other deductions) (D) (E) (F) KIM 5 2 5 7 9 0 0 0 DARRELL 9 8 0 0 1 7 9 4 0 7 4 8 9 GLORIA 9 8 0 7 6 7 9 2 0 9 0 6 1	Cefore taxes and other deductions Allowances For Official Business Cither Disbursements	Ceffore taxes and other deductions Allowances For Official Business Ceffore taxes and other deductions Ceffore t	Competition Competition	Color Colo	Chefore taxes and other deductions of (D) Allowances (E) Chefore taxes and other deductions (E) Chefore taxes and other taxes (E) Chefore taxes (E) Chefor	Composition Composition	Compension Com

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ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received in from your organization and any affilial (B) Position (Enter employee's Job Utle.) (C) Name of Affiliated Organization	oro than \$10,000 in total disbursements lisies.) (if applicable)	Gro (befo other	de	axe	s a	and		Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)		•		ota (H)			
MURPHBY INTERN N/A	Brenan		1	4	3	7	0	0	0	0		•	1	4 :	3	7	0
MURRAY SERVICING REP N/A	BRIAN		9	7	9	2	6	7960	9272	0	1	1	1	5	1	5	8
MURT MAINT MANAGER N/A	DAVID		9	3	5	6	9	6600	3 4 4 6	0		1	0	3	6	1	5
MUSILLI INT'L OFF SEC N/A	SHARON		6	5	3	5	6	0	0	0			6	5	3	5	6
MUTCHLER ASSIST MINOR N/A	THOMAS	1	0	2	4	9	7	7940	3671	0		1	1	4	1	0	8

12/31/2004

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

(A) Name (List all employees who received m from your organization and any affiti (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements ates.)	Gr (befo othe	r de	axe	es a	and		Ailow	ran E)	ces	3	Disbursements for Official Business (F)		Other disbursements (G)				otal	•		
MUZZICATO SERVICING REP N/A	ARTHUR		9	8	0	0	1			4	0	594	3	0	1	•		1 8	3 (8	4
NAESS ACTUARY N/A	MARK	1	0	8	8	7	9	7	5	2	0	188	3	0	1	•	1 4	8 2	2	8	5
NANOS SYS ANALYST N/A	NICHOLA		9	8	0	0	1	7	8	2	0	487	8	0	1	'	1	0 (3	9	7
NAPIER INTERN N/A	SAMUEL		2	1	9	6	1				0			0	:		2	1 9	9	6	1
NAPLES BOOKKEEPER BI N/A	SANDRA		4	9	8	1	8				0			0			4	9 8	В	1	8



ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

(A) Name (Ust all employees who received m from your organization and any affil (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements listes.) (if applicable)	Gr (befo other	r de	ахє	s a	nd		Allowances (E)		Disbursements for Official Business (F)	Other Disbursements (G)		,	Tot (H			
NASSAR SERVICING REP N/A	CHARLES		9	9	4 :	2 6	Š	7960)	13610	0	1	2	0	9	9	6
NAUGLE SERVICING REP N/A	ROBERT		9	7	9	2 6	3	7960)	5031	0	1	1	0	9	1	7
NEAL STENOGRAPHER N/A	CHRISTI		5	6	7	3 4	4	(0	0	0		5	6	7	3	4
NEAL SERVICING REP N/A	WILBERT *		9	4	9	2 1	1	4762	2	4649	0	1	0	4	3	3	3 2
NEARGARDNER SERVICING RBP N/A	KEITH		9	7	8	5 1	1	798	0	7590	0	1	1	3	4	2	2 1

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:

FILE NUMBER: 0 0 0 - 1 4 9

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (Ust all employees who received from your organization and any at (B) Position (Enter employee's job title.)	more than \$10,000 in total disbursements fillatos.)	(bef		axe	es a	and						Disbi for	Ol	ffic	ial		Other								
(C) Name of Affiliated Organization	(if spolicable)	othe		đư D)		ns)		Allowa (E		æs		Bu	ısı F)		38		Disbursements (G)					otal H)			
	· · · · · · · · · · · · · · · · · · ·		_	_	_		1	7 :		_	_				4	2	†	╁	_	_	_		_	4	_
NECE	ROBERT		9	•	0	5	'	,	3	0	U		3	4	'	2	"		ı	U		9 4	٤	4 ()
ORGANIZER																									
N/A																									
NEIL	DAVID		9	8	0	7	6	7	9	2	0	1	5	7	0	8	0		1	2	1	1 7	7	0 4	- ŧ
CITIZENSHIP REP		1						!			1														
N/A																									
NELSON	DELBERT		9	9	4	7	2	7	2	6	0		2	9	3	0	0	\dagger	1	0) (9 6	— 6	6 :	_ 2
TRAINING REP																									
N/A																									
NELSON	GREGORY		9	7	9	2	6	7	5	2	3		8	_ 5	6	2	0	\dagger	1	1	4	4 ()	1	- 1
SERVICING REP																		1							
N/A																		į							
NELSON	LUGENE		9	7	8	5	1	7	9	8	0	1	2	5	2	0	0		1	1		8 :	3	5	- 1
SERVICING REP]																	
N/A																									

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ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2004	

(A) Name (List all employees who received m from your organization and any affil (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	nore than \$10,000 in total disbursements lilates.) (if applicable)	Gr (befo	r de	axe	es e	and		Ailowa (E		ces	•		r O Iusi	ffic	ial		Other Disbursements (G)			To (F			
NEUNDORFER AUDITOR N/A	LINDA		9	8	0	2	0	7 9	9	6	0		8	4	3	2	0	1	1	4	4	•	1 2
NEWTON TRAINING REP N/A	DONALD		9	7	8	5	1	7	5	6	0		4	2	4	8	0	1	0	9	6	. 4	5 9
NICHOLSON ATTORNEY N/A	MICHAEL *		8	0	2	5	6	4	6	4	2	1	0	3	3	1	0		9	5	2		2 9
NICK SECURITY N/A	DONALD		7	5	1	5	9	3	3	0	0		1	2	8	4	0		7	. 6	7	•	4 3
norello Bookkbeper a n/a	LUCILLE		5	4	8	6	2				0					0	0		5	4	8	,	6 2

ENDING DATE OF PERIOD COVERED:

12/31/2004

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates.) (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization (If applicable)		Gross Salary (before taxes and other deductions) (D)				Allowances (E)					Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)							
NORFLEBT SERVICING REP N/A	WILLIAM		9	8	0 () 1		7	5	2	0	5166	0		1	1	0	6	8	7
NOSAL SERVICING REP N/A	NADINE		9	8	0 (0 1		7	9	4	0	4057	0		1	0	9	9	9	8
NOVAK SERVICING REP N/A	ТІМОТНҮ		9	8	0 (0 1		7	9	4	0	7043	0		1	1	2	9	8	4
O BRIEN HEALTH-SAFETY N/A	DENNIS		9	8	0 (0 1		7	9	4	0	5 4 0 4	0		1	1	1	3	4	5
O'BRIEN SECRETARY N/A	SUSAN		5	1	4	4 7					0	0	0			5	1	4	4	7

ORGANIZATION NAME: AUTO WORKERS AFL-CIO

ENDING DATE OF PERIOD COVERED:

12/31/2004

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received mo from your organization and any affilial (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	re than \$10,000 in total disbursements ates.) (if applicable)	Gr (befo other	r de	ax	es a	and		Allowa (E		ces	,	Disbursements for Official Business (F)	Other Disbursements (G)		,	Tof			
O'CONNOR ASSIST MINOR N/A	SEAN	1	0	2	4	2	2	7 9	9	4	0	4311	0	1	1	4	6	7	' 3
OATES SERVICING REP N/A	VALERIE		9	7	8	5	1	7 !	5	5	3	8214	0	1	1	3	6	1	8
OCHOA SERVICING REP N/A	RICARDO		9	7	8	5	1	8 (0	0	0	6469	0	1	1	2	3	4	2 0
OCHOCINSKI CLERK TYPIST N/A	LINDA		4	9	8	7	6				0	0	0		4	9	8	7	7 6
OFRIA SERVICING REP N/A	VINCENT		9	7	8	5	1	7	9	8	0	7552	0	1	1	3	3		3 3

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ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

	nore than \$10,000 in total disbursements liates.)	(befo		axe	3S 8	ind						Disbui				Other							
(B) Position (Enter employee's job title.)		othe			ction	ns)		Allow		æs		Bus	sine	SS		Disbursements	3			ota			
(C) Name of Affiliated Organization	(if applicable)	ļ	- (D)			\perp	(1	<u>=)</u>			((F)			(G)	1_		(H)			
OKRAY	KATHIE		2	1	5	0 9					0		2	0	0	0		2	2	1 '	7	0	9
TECH AID I																							
N/A																							
OLDHAM	ARPATSY	1	0	2	3	4 7	7	7	5	6	0	4	1	7	7	0		1 1	1	4	0	8	4
ASSIST MINOR							١																
N/A																							
olson	CAROL		5	7	1	7 9	9				0	2	2 1	7	8	0		į	5	9	3	5	7
INT'L OFFICER'S																							
n/A																							
ORLANDO	JOSEPH *		8	0	9	7 6	6	3	4	0	1	2	2 6	6 0	4	C	1	1	8	6	9	8	1
SERVICING REP							ŀ																
N/A																	ŀ						
ORTIZ	ABIGAIL		5	1	3	0 3	3				0				0	-	,		5	1	3	0	3
SERVICING REP		1																					
N/A																							

ORGANIZATION NAME:	
	_
AUTO WORKERS AFL-CI	\wedge
MUTO MACKEUS WLF-CI	0

ENDING DATE OF PERIOD COVERED:

12/31/2004

(A) Name (List all employees who received more than \$10,000 in from your organization and any affiliates.)	total disbursements	Gi (bef	ross ore 1				T						Dist	urs r Ol			S	Other							
(B) Position (Enter employee's job title.)		othe	r de	duc			1	Al	low	and	:			usi			1	Disbursement	s			То	tal		
(C) Name of Affiliated Organization (# applicable)			(D)			<u> </u>		(E	<u>)</u>				(F)			(G)	_			(H	l)	_	
ORTIZ ANT	ONIO	1	0	6	3	6 7	7		7	5	0	0		9	2	1	5	(1	2	3	0	8	3 2
ASSIST - MAJOR																			١						
N/A																									
OSGOOD DEN	ISE		9	8	0	0 1	ı		7	5	2	0		4	4	0	4		5	1	0	9	9	1	2 5
SERVICING REP																									
N/A													· I												
OWENS DEI	INIS	1	9	8	0	0 1	1		7	6	8	1		6	7	0	9	(0	1	1	2	2 3		9 1
SERVICING REP																									
N/A																									
OWENS MI	Les *		9	6	7	7 8	в		4	6	4	2		4	3	1	8		0	1	0	5	5 7	· ;	3 8
SERVICING REP																									
N/A																									
owen kr	(S		9	7	8	5 '	1		7	5	6	0	1	3	6	3	1		0	1	1	9) () 4	4 2
SERVICING RBP																									
N/A																									

ORGANIZATION NAME: AUTO WORKERS AFL-CIO

ENDING DATE OF PERIOD COVERED: 12/31/2004

(A) Name (List all employees who received a from your organization and any at (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization		Gro (befor other	e ta	xe:	s a	nd		Allowances (E)	Disburse for Of Busir (F	ficial Iess	1	Other Disbursements (G)			Toi (F			
PADGETT UTILITY REPAIR N/A	JAMES		5 9) 1	1 6	6 9	9	0		1 7	7	0		5	9	1	8	3 6
PAGANO SERVICING REP N/A	VINCENT		9 7	7 8	B	5 1	1	7 9 8 0	5	6 8	1	0	1	1	1	5		1 2
PAGNUCCO INT'L OFF SEC N/A	CHRISTI	:	5 5	5	1 !	9 2	2	0		(0	0		5	5	1	•	9 2
PANCZYK ADMIN SEC N/A	BONNIE		5 2	2 (6	3 4	4	0		(0	0		5	2	6	;	3 4
PANCZYK CLERK TYPIST N/A	LISA		4 9	9	6	3 (6	0			0	0		4	g	6	•	3 6

FILE NUMBER:	0	0	0	-	1	4	9

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

(A) Name (List all employees who received from your organization and any at (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements diliatos.)	Gr (befo	r de	axe	3S 8	and		Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)				Tol			
PARAMO SERVICING RBP N/A	ROBERT		9	7	9	2	6	7540	4556	0		1	1	0	0	2	2 2
PARENTE SERVICING REP N/A	NICK		9	7	8	5	1	7980	3804	O		1	0	9	6	3	3 5
PARIS ASSIST - MAJOR N/A	DAVID	1	0	8	6	2	9	7940	2538	0		1	1	9	1	(7
PARKER BOARD SEC	CHRISTI		5	4	3	1	3	0	0	0			5	4	3		1 3
PARKS SERVICING REP N/A	JAMES		9	7	9	2	6	7520	4382	0	İ	1	0	9	8		2 8

FILE NUMBER:	0	0	0	-	1	4	9

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(B) Position (Enter employee's job title.)	more than \$10,000 in total disbursements fillates.)	Gr (befo	r de	axe	s a	ınd		Allowa		æs		Disbursements for Official Business	Other Disbursements			otal			
(C) Name of Affiliated Organization) (if applicable)						1	(E)			(F)	(G)			H)			_
PARRINO	PAULETT		5	2	8	9 3	3				0	0	0	!	5 3	2 8	3	9	3
SECRETARY							l												
N/A		1																	
PATTON	james	1	1	1	7	1 3	3	7 9	9	2	0	4 4 4 3	0	1 :	2	4 ()	7	6
ADMIN ASSISTANT							1												
N/A																			
PATTON	LINDA F	1	0	1	8	9 4	4	7 4	4	8	0	4 1 5 6	0	1	1	3 !	5	3	0
TRAINING REP																			
N/A																			
PAVLICK	DAVID		9	7	8	5 1	1	7	9	8	0	3683	0	1	0	9 :	5	1	4
SERVICING REP																			
N/A																			
PAYTON	CARL		9	8	0	0 .	1	7	9	4	0	9733	0	1	1	5	6	7	4
SERVICING REP		1																	
N/A																			j



12/31/2004

ORGANIZATION NAME:
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ENDING DATE OF PERIOD COVERED:
12/31/2004

(A) Name (List all employees who received in from your organization and any aff (B) Position (Enter employee's job title.)	nore than \$10,000 in total disbursements Mates.)	Gro (befor other	re ta	X6	s ar		A 11			1	Disbu for		cial		Other						
(C) Name of Affiliated Organization	(if applicable)	Outer	(D		u-01 s		Aliowa (E		æs			(F)			Disbursements (G)			ota (H)			
PEAKE CLERK TYPIST	RACHEL		5 (0 7	7 7	' 9			(0	0		5	0	7	7	9
N/A																					
PEARSON SERVICING REP N/A	VANCE	!	9 :	9 2	2 7	7 6	8	0	0 (D	1 (0 7	' 9	0	0	1	1	8	0	6	6
PECK PHOTO LAYOUT TYP N/A	MARGARE		5	5	1 2	2 1			•	0				0	0		5	5	1	2	1
PEDERSEN SERVICING REP N/A	JAMES		9	7 9	9 2	2 6	7	9	6	0	1:	2 (3	7	0	1	1	7	9	2	3
PENNY ORGANIZER N/A	BRUCE		9	7 :	9 2	2 6	7	9	6	0	1	4 :	5 1	0	0	1	2	0	3	9	6

FILE NUMBER:	2	n	n	_	1	4	g
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(A) Name (Ust all employees who received from your organization and any s (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements filiates.)	Gr (befo other	r de	axe	9 S 8	and		Allow (I	ran E)	ce	S	Disbursements for Official Business (F)	Other Disbursements (G)				otal H)		
PENN SERVICING REP N/A	TODD		9	7	8	5	1	8	0	0	0	9521	0	•	i 1		5 3	3	7 2
PENN SERVICING REP N/A	WILLIAM		9	8	0	7	6	7	9	2	: 0	5 6 4 3	0		1 1	•	1 6	5	3 9
PERRY SECURITY N/A	HAROLD		7	5	2	3	4	3	3	C	0	1765	0		8	3 (0 2	2	9 9
PERSINGER SERVICING REP N/A	VORITA		9	7	7	7	6	7	5	5 8	3 0	4 2 0 2	0		1 () :	9 (5	5 8
PETERSON ADMIN ASSISTANT N/A	WILLIAM	1	1	1	6	3	8	7	9) 6	5 0	4717	0		1 2	2 '	4 ;	3	1 5

FILE NUMBER:	0	0	0	-	1	4	9

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received a from your organization and any affice) (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	noro than \$10,000 in total disbursements filiates.) (if applicable)	Gi (befi othe	er de	tax	es ctic	and		Ailov (van (E)	ice	s	Disbursements for Official Business (F)	Other Disbursements (G)				ota (H)			
PETERS REGIONAL DIR N/A	Joseph	1	0	8	8	7	9	7	9	4	0	3606	0	1	1 2	2	0	4	2	5
PETER INTN'L AFFAIRS N/A	KRISTYN		2	2	2	9	9		8	6	2	3 0 6	0		•	2	3	4	6	7
PETER SERVICING REP N/A	ROBERT		9	7	8	5 5	1	7	9	8	3 0	8851	0	1	1	1	4	6	8	2
PETRO SERVICING REP N/A	DONALD		9	7	8	5	1	7	9	8	3 0	5604	0	1	1	1	1	4	3	5
PHILLIPS SWITCHBOARD N/A	LAURIND		5	0	8	3 2	4				0	0	0			5	0	8	2	4

(189)

ORGANIZATION NAME: AUTO WORKERS AFL-CIO

ENDING DATE OF PERIOD COVERED:

12/31/2004

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received m from your organization and any affilial (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements lates.) (if applicable)	Gr (befo	r de	axe	s a	ind		Allowa (E		ces	ì		urs r Of usir (F	fici nes	al		Other Disbursements (G)			Fota (H)			
PHIPPS ORGANIZER N/A	PAMBLA	1	0	2	3	4 7	,	7	5	4	0		4	9	4	8	0	1	1	4	8	3	5
PICCINI TRAINING REP N/A	PETER		8	8	3	3 9	•	4	7	4	2		4	8	7	4	0		9	7	9	5	5
PICKENS CLERK TYPIST N/A	PHYLLIS		4	8	6	5 6	5				0				1	6	0		4	8	6	7	2
PICKETT ASSIST - MAJOR N/A	DAVID	1	0	0	0	0 1		7	8	0	6	1	0	5	2	7	0	1	1	8	3	3	4
PIKE SERVICING REP N/A	ROBERT		9	7	9	2 6	5	7	7	2	0		9	2	4	1	0	1	1	4	8	8	7

(190)

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:

FILE NUMBER: 0 0 0 - 1 4 9

(A) Name (List all employees who received m from your organization and any affili (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements ates.) (If applicable)	Gi (befo	r de	tax	es Ictic	and		Allowa (E		>es	1	Disbursements for Official Business (F)	Other Disbursements (G)				otal			
PISCOPO P/R REP N/A	VINCENT	1	0	3	0	7	6	7 9	9	2	0	6625	0	•	1 1	1 7	7 6	5	2	1
PIVOVAR BOARD SEC N/A	SHERRIL		5	3	6	0	5				0	0	0		5	5 3	3 6	3	0	5
PLACKE INT'L OFF SEC N/A	PATRICI		6	2	7	5	6				0	3072	0		6	5 :	5 8	3	2	8
PLATZ CITIZENSHIP REP N/A	RONALD		9	7	9	2	6	7 :	9	6	0	7104	0		1 1	1 :	2 9	€	9	0
PODESZWA STENOGRAPHER N/A	LUANNE		5	3	9	1	8				0	0	0			5 :	3 9	9	1	8

							_
FILE NUMBER:	0	0	0	-	1	4	9

ORGANIZATION NAME: AUTO WORKERS AFL-CIO	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	

(A) Name (List all employees who received from your organization and any a (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements ffiliates.)	Gi (befo othe	r de	tax	es : ctic	and		Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)				otal H)		
POE ADMIN ASSISTANT N/A	MIRIAM	1	1	1	7	1	3	7 5 2 0	9592	0	1	1 2	2 (8 8	3 :	2 5
POHORENCE SERVICING REP N/A	MICHAEL *		5	2	3	9	4	0	600	0			5 2	2 9	•	9 4
POLING MAINTENANCE N/A	BRIAN		4	9	9	6	7	0	0	0	i	•	4 :	9 9	•	6 7
POLING SERVICING RBP N/A	SHIRLEY		9	8	0	0	1	7520	3 1 8 2	0		1 (0 7	8 7	7	0 3
POLSTON LEGAL SEC N/A	LISA		5	1	6	8.	4	0	0	0		į	5	1 (5	8 4

ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/21/2004	

(A) Name (List all employees who received in from your organization and any affil (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	nore than \$10,000 in total disbursements liates.) (if applicable)	Gr (befo other	r de	tax	es ctic	and		Allowa (E		ces		Disbursements for Official Business (F)	Other Disbursements (G)			To (ł			
PONTIA SERVICING REP N/A	BRUCE		9	8	7	4	1	7 9	•	8	6	34677	0	1	1 4	1	4	() 4
POOLE SERVICING REP N/A	LAWRENC	1	0	1	7	1	6	7 7	7	6	0	5 2 6 9	0	•	1 1	1 4	7		1 5
PORTER ORGANIZER N/A	KIMBERL		9	1	5	5	9	3 4	4	7	9	1828	0		Ş	9 6	8	•	3 6
PORTWOOD CLERK TYPIST N/A	JUANITA		5	1	8	1	3				0	C	0			5 1	8		1 3
POSEY ORGANIZER N/A	JAMES *		9	0	1	9	7	4	7	4	2	6611	0		1 () 1	5		5 0

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO

ENDING DATE OF PERIOD COVERED: 12/31/2004

(A) Name (List all employees who received in from your organization and any after (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements fillates.) (if applicable)	Gro (befor other		e: luci	s ar	nd	A	ilow (6	and	æs			ours r Oi usi (F	ffici: nes	al	Other Disbursements (G)	3			Tot (H			
POSTON ORGANIZER N/A	MARTHA		9 (В (0 0	1		7	9	4	0	2	0	2	7 0	0		1	2	6	2	1	1
POUFCAS ORGANIZER N/A	KAREN		9	9 ;	2 5	5 1		7	9	3	4	1	3	2	8 8	0		1	2	0	4	7	' 3
POWELL-FIELD SERVICING REP N/A	ВММА		9	8 (0 () 1		7	9	6	0		3	2	4 0	O		1	0	9	2	C) 1
POZZI DEPART HEAD N/A	ROBERT *		7	2	8 (0 0		4	7	4	2		1	9	8 4	0		•	7	9	5	2	2 6
PREISS ADMIN SEC N/A	JACQUEL		5	3	9 ;	3 1					0				C	0			5	3	9	3	3 1

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ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/200 <i>A</i>	

(A) Name (List all employees who receive from your organization and any (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	d more than \$10,000 in total disbursements affiliates.) On (if applicable)	Gr (befo	r de	axe	s ar	nd	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)			ota (H)			
PRICE SYS ANALYST N/A	ANTHONY		9	9 :	3 6	3 1	7820	3 2 6 3	0	1	1	0 4	4	4 4	1
PRICE BOOKKEEPER A N/A	CYNTHIA		5	3	3 () 4	0	0	0		5	3	3	0 4	4
PRICE TECH AID I N/A	JEANINE		5	1	6 2	2 7	0	0	0		5	1	6	2	7
PRIEST CARPENTER N/A	BRIAN		6	2	3 :	5 8	0	0	0		6	2	3	5 8	В
PRIEST LOSS WAGES N/A	THOMAS		1	0	4 (6 3	0	0	0		1	0	4	6	3

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO

ENDING DATE OF PERIOD COVERED: 12/31/2004

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received me from your organization and any affilial (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements lates.) (if applicable)	Gro (befo other	de	axe	2 S 8	and		Allowand (E)	ces		Disbursem for Offici Busines (F)	ai	Other Disbursements (G)		•	Tota (H)			
PRITCHARD STENOGRAPHER N/A	ELVA		1	6	1	3	5			0		0	0		1	6	1	3	5
PRYOR SERVICING REP N/A	BRENDA		9	7	8	5	1	7 9	8	0	6 2	0 8	0	1	1	2	0	3	9
PRZYBYSZ BOOKKEEPER BI N/A	ADRIENN		5	0	9	8	5			0	1	5 0	0		5	1	1	3	5
PRZYDZIAL SERVICING REP N/A	ALAN		9	7	9	2	6	7 9	8	0	5 1	6 9	0	1	1	1	0	7	' 5
PURCELL RETIREE REP N/A	THOMAS		9	7	8	5	1	7 9	8	0	121	2 9	0	1	1	7	9	6	0

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ORGANIZATION NAME:	
* · · • · · · · · · · · · · · · · · · ·	
AUTO WORKERS AFL-CIO	
AUTO WORKERS AFE-CIO	
ENDING DATE OF PERIOD COVERED:	
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12/31/2004	
12/3 1/2004	

	nore than \$10,000 in total disbursements liates.)	(befo		axe	es a	and							r O	ffic	ial	ıts	Other							
(B) Position (Enter employee's job title.)	Pd	othe		du D)		ns)	1	Allow	-	ces	\$	8	iusi		SS		Disbursements				Γot			
(C) Name of Affiliated Organization	(ii eppiicaore)						+		E)				(1	=)			(G)	<u> </u>			(H)	<u> </u>	_	
QUICK	PAUL	1	1	1	5	6 3	3	7	5	4	0	1	0	0	8	5	0		1	2	9	1	8	8
ADMIN ASSISTANT							ı											ĺ						
N/A																								
QUINN	GERALD *		7	2	8	3 9	,	3	4	0	1		2	2	4	4	0			7	8	4	8	4
SERVICING REP							١											l						
N/A																								
QUINTANA	ROSE		9	8	1	5 1	1	7	9	0	0		7	0	3	3	0		1	1	3	0	8	4
EDUCATION REP																								
N/A																								
RADLOFF	SHEILA		9	7	9	2 6	6	7	9	8	0		7	6	5	8	0	T	1	1	3	5	6	4
EDUCATION REP		ŀ															ļ							
N/A																								
RAFFA	NANCE		6	7	3	5 5	5				0					0	0	T		6	7	3	- 5	5
HVAC OPERATOR																								
N/A																								
		<u> </u>										<u> </u>												_

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO

ENDING DATE OF PERIOD COVERED: 12/31/2004

(A) Name (List all employees who received in from your organization and any afficient (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	nore than \$10,000 in total disbursements illates.) (if applicable)	Gr (befo	r de	axe	es a	and		Allow (I	ran E)		s	Disbursements for Official Business (F)	Other Disbursements (G)			ota H)			
RAICH SERVICING REP N/A	STEVE		9	7	8	5 1	1	7	5	6	0	3 4 3 8	0	1 0) ;	8 (В	4	9
RANDALL SERVICING REP N/A	CECIL		2	1	2	3 7	7	1	4	0	0	182	0	2	2 :	2	8	1	9
RAND INT'L OFF SEC	JULIE		4	4	6	5 (0				0	9 6	0	4	1	4	7	4	6
RAPSON CLERK TYPIST N/A	KRISTA		4	1	6	8 9	9				0	999	0	4	\$	2	6	8	8 8
RASMUSSEN STENOGRAPHER N/A	WANDA		3	4	4	2 8	8				0	0	0	3	3	4	4	2	2 8

ORGANIZATION NAME: AUTO WORKERS AFL-CIO FILE NUMBER: 0 0 0 - 1 4 9

ENDING DATE OF PERIOD COVERED: 12/31/2004

	nore than \$10,000 in total disbursements illates.)	Gn (befo	oss ire t				Î					Disbursements for Official	Other							
(B) Position (Enter employee's job title.)		other	r de	duc				Allow	an	ces	S	Business	Disbursements			T	ota	r)		
(C) Name of Affiliated Organization	(if applicable)		([D)			ļ	(1	E)			(F)	(G)	<u> </u>		_ ((H)			_
RASPBERRY SERVICING REP	FREDRIC		9	7	8	5 1	1	7	5	8	0	5 4 4 3	0		1 1	1	0	8	7	4
n/a																				
RATZLOFF TECH AID I	JANET		5	5	9	3 3	3				0	0	0			5	5	9	3	3 3
RAWLINGS MEI SERVICING REP	MARY JO		9	7	9	2 (6	7	9	6	0	5731	0		1	1	1	6	1	 7
N/A																				
RAYMOND SERVICING REP N/A	квітн		8	1	5	7	1	4	0	3	1	1953	0			В	7	5	•	5 5
RAY SECURITY N/A	CLAYTON		7	5	2	3 4	4	3	3	- C	0 0	1 3 4 4	0		•	7	9	8	7	 7 8

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more from your organization and any affilial (B) Position (Enter employee's job title.)	ore than \$10,000 in total disbursoments ates.)	Gr (befo	r de	axe duc	es a	and		Allow	an	ces		Disbursements for Official Business	Other Disbursements		ר	Γotε	al		
(C) Name of Affiliated Organization	(if applicable)		(1	D)				(E	≣)			(F)	(G)			(H)			
REASONS	STANLEY		9	7	8	5 1	ı	7	9	8	0	8636	0	1	1	4	4	6	7
SERVICING REP		ŀ																	
N/A																			·
REAUME	LINDA	1	0	3	7	8 7	,	1 0	2	5	1	15019	0	1	2	9	0	5	7
SERVICING REP							l												
N/A																			
RBEDER	LINDA		5	3	0	4 3	3				0	0	0		5	3	0	4	3
STENOGRAPHER							١					:							
N/A																			
REEL	EDITH		5	2	1	5 7	7				0	2 3 9	0		5	2	3	9	6
CLERK TYPIST																			
N/A																			
REESE	REBECCA		4	6	6	2 4	4				0	0	0		4	6	6	2	4
MAINTENANCE																			
N/A																			



12/31/2004

ORGANIZATION NAME:		
AUTO WORKERS AFL-CK	<u> </u>	
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SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

	d more than \$10,000 in total disbursements affiliates.)	(befo		taxe	s a	nd					Disbursements for Official	Other							\bigcap
(B) Position (Enter employee's job title.)	· · · · · · · · · · · · · · · · · · ·	othe			tio	ns)	Allov			S	Business	Disbursements				otal			
(C) Name of Affiliated Organization	On (if applicable)	<u> </u>	- (D)			1	(E)			(F)	(G)	_		_((H)			_
REFFITT	BONNIE		9	8	0	7 6	7	5	0	0	4242	0	1	(0	9 8	3	1	8
SERVICING REP		ļ					ļ						l						- [
N/A												:							
REICHLE	LAWRENC		9	7	8	5 1	7	8	0	0	9437	0	1	<u> </u>	1	5 (0	8	8
SERVICING REP																			i
N/A													 						
REICHWAGE	ROBIN		5	0	2	9 5				0	8	0		-	5	0 :	3	0	3
SECRETARY																			
N/A																			
REIDT	ROBERT	1	0	2	4	2 2	7	5	- 4	0	1654	0	1	1	1	1 (6	1	6
DEPART HEAD																			
N/A																			
REILLY	WILLIAM		9	7	8	5 1	7	, g	5	9	3695	0	-	1	0	9	5	0	5
SERVICING REP																			,
N/A																			
		<u>L</u> .										<u></u>	1			_		_	

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12/31/2004

	
ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	,
12/31/ <u>2004</u>	

(A) Name (List all employees who received more than \$10,000 in total disbut from your organization and any affiliates.)	rsements	Gro (befo	088			. A				Ĭ	Disbursen for Offic		Other						
(B) Position (Enter employee's job title.)		other	ded	uct			Allov	vano	ces		Busine		Disbursements			To	otal		
(C) Name of Affiliated Organization (if applicable)			(D)			(E)		\Box	(F)		(G)			(H)		
RENKIBWICZ CYNTHIA			5	1 (8 (7				0		1 6	0		5	5 '	1 1		0 3
TECH AID I		!												ļ					
N/A																			
RESTIVO MICHELL		 -	5	1 ;	3 8	9	_			0	1	5 0	0		- 5	5 '	1 5	 5	
TECH AID I																			
N/A																			
REUTHER ALAN		1	3	5 :	3 4	1	7	5	4	0	5 7	3 4	0	1		1 1	B 6	 6	1 :
LEGISLATIVE DIR										1									
N/A							 												
REYES ARTURO	*		9	3 :	2 1	 I 3	4	5	8	2	3 4	5 4	0	1	()	1 2	2	4 9
SKILLED TRADES R																			
N/A																			
REYNOLDS CAROL			3	0	2 9	9 3				0		0	0		•	3	0 :	_ 2	9 ;
CLBRK TYPIST																			
N/A																			

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IORGANIZATION NAME:	FILE NUMBER: 0 0
	FILE NOMBER. JU U
AUTO WORKERS AFL-CIO	<u>. </u>
TO TO TO THE COLO	

ENDING DATE OF PERIOD COVERED: 12/31/2004

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who rece from your organization and a (B) Position (Enter employee's job title (C) Name of Affiliated Organiza		Gro (befor other	re ti dec	axe	s a	nd		Allov	van (E)		•	Disbursements for Official Business	Other Disbursements (G)			ota (H)			i
REYNOLDS SERVICING REP N/A	WAYNE	,	_		8	5 1					0	(F) 4 8 5 4	 	1		_	•	8	5
RHODES SERVICING REP	JOHN		9	7	8 !	5 1		7	9	8	0	5 4 1 0	0	1	1	1	2	4	1
RICHTER CLERK TYPIST N/A	DOVEY		5	0	5	8 4	, 				0	1 0 5 9	0		5	1	6	4	3
RIGGS ASSIST MINOR N/A	MICHAEL	1	0	2	2	7 2	2	7	4	 8	6	3 2 7 1	0	1	1	3	0	2	9
RINGMAN SERVICING REP N/A	RICK		9	7	8	5 1		7	· g	8 (0	4965	0	1	1	0	7	9	6

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ORGANIZATION NAME:		
AUTO WORKERS	AFL-CIO	

ENDING DATE OF PERIOD COVERED: 12/31/2004

(A) Name (List all employees who received from your organization and any a (B) Position (Enter employee's fob title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements filiates.)	Gr (befo other	r de	lax	es ctic	and		Allowances (E)	כ	Disbursements for Official Business (F)	Other Disbursements (G)			Tot (H			
RIORDAN ADMIN ASSISTANT N/A	MARY	1	1	1	7	8	8	7920		14026	0	1	3	3	7	3	3 4
RIOUX ASSIST - MAJOR N/A	JOSEPH		9	7	9	2	6	7960		3213	0	1	0	9	0	•	9
RIVERA CLERK TYPIST N/A	CARMEN		4	6	3	4	0	0		0	0		4	6	3		0
RIVERA ORGANIZER N/A	EDWIN		9	8	1	2	6	7960		1 4 0 5 6	0	1	2	0	1	4	1 2
RIVERA SERVICING REP N/A	LORENZO		9	7	8	3 5	1	7560		7660	0	1	1	3	0		7 1

ANIZATION NAME:	FILE NUMBER: 0 0 0 - 1 4
TO WORKERS AFL-CIO	

ENDING DATE OF PERIOD COVERED:
12/31/2004

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (Ust all employees who received in from your organization and any affil (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	nore than \$10,000 in total disbursements iliates.) (if applicable)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
RIVERA CLERK TYPIST N/A	MARITZA	5 2 2 2 1	0	0	0	5 2 2 2 1
ROBERTSON INT'L OFF SEC	WINIFRB	5 2 5 1 2	0	0	0	5 2 5 1 2
ROBERTS STENOGRAPHER N/A	ANGELA	5 2 8 9 1	0	0	0	5 2 8 9 1
ROBERTS BOOKKEEPER BI N/A	CHRISTI	39860	0	0	0	39860
ROBERTS SERVICING REP N/A	DANIEL *	77119	4642	2573	0	8 4 3 3 4

(205)+

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:

FILE NUMBER: 0 0 0 - 1 4 9

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received me from your organization and any affilial (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements ates.) (if applicable)	Gr (befo othe	r de	tax	es Ictic	and		Allow (I	an E)		\$		or (Bus	sei Offici ine (F)	cial ss		Other Disbursements (G)		•	Tol (H			
ROBERTS SERVICING REP N/A	Hershel *		9	6	7	7	8	4	6	4	2		2	9	4	2	0	1	0	4	3	•	3 2
ROBERTS ASSIST MINOR N/A	JAY *	1	1	1	8	2	1	6	7	9	3	1	0	3	0	1	0	1	2	8	9	_	1 5
ROBERTS SERVICING REP N/A	RUDY		9	6	6	3	6	7	9	8	0		6	4	. 8	5	0	1	1	1	1	•	1 1
ROBINSON PHOTO LAYOUT N/A	DEBRA		5	4	. 5	5 7	2				0					0	0		5	4	5		7 2
ROBINSON SERVICING REP N/A	BDWARD		9	7	' 8	3 5	1	7	9	8	0	1	() 4]. 4	9	0	1	1	6	2		8 0

12/31/2004

ORGANIZATION NAME:		
ALITO MODICEDO AEL OIO		
AUTO WORKERS AFL-CIO		
ENDING DATE OF PERIOD COVERED:		
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12/31/2004		
12011201		

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

than \$10,000 in total disbursements es.)													Other							
		r de	duc				Allowance	8 S								Т	ota	ıl		
(eppticable)		(1	D) 				(E)		<u> </u>	(F)		(G)			((H)	_		
Joseph		9	7	8	5	1	77:	3 7	·]	8	1 9	0	0	1	1	1	3	7	7	8
MARIA		3	2	2	4	2	-	C	1			0	0			3	2	2	4	2
ANN		5	1	1	3	6	_		,			0	0			5	1	1	3	6
DIANA	<u> </u>	9	7	8	5	1	7 5	6 (,	3	8 :	3 7	0		1	0	9	2	4	8
SHARON		5	1	0	0	9		(,			0	0			5	1	0	C	9
	JOSEPH MARIA ANN DIANA	(befoothe) JOSEPH MARIA ANN DIANA	(before to other de other de (l) JOSEPH 9 MARIA 3 ANN 5 DIANA 9	(before taxe other deduction (D) JOSEPH 9 7 MARIA 3 2 ANN 5 1 DIANA 9 7	(before taxes other deduction (D) JOSEPH 9 7 8 MARIA 3 2 2 ANN 5 1 1 DIANA 9 7 8	(before taxes and other deductions) (D) JOSEPH 9 7 8 5 MARIA 3 2 2 4 ANN 5 1 1 3	(before taxes and other deductions) (D) JOSEPH 9 7 8 5 1 MARIA 3 2 2 4 2 ANN 5 1 1 3 6	(before taxes and other deductions) (C) JOSEPH 9 7 8 5 1 7 7 MARIA 3 2 2 4 2 ANN 5 1 1 3 6 DIANA 9 7 8 5 1 7 5	(before taxes and other deductions) (D) Allowances (E) JOSEPH 9 7 8 5 1 7 7 3 7 MARIA 3 2 2 4 2 DIANA 9 7 8 5 1 7 5 6 0	(before taxes and other deductions)	(before taxes and other deductions) (D) (E) (F) (F) (Allowances (E) (F) (F) (F) (F) (F) (F) (F) (F) (F) (F	(before taxes and other deductions) (D) Allowances (E) JOSEPH 9 7 8 5 1 7 7 3 7 8 1 9 MARIA 3 2 2 4 2 0 ANN 5 1 1 3 6 0 DIANA 9 7 8 5 1 7 5 6 0 3 8 3	(before taxes and other deductions) (D) (E) (F) JOSEPH 9 7 8 5 1 7 7 3 7 8 1 9 0 MARIA 3 2 2 4 2 0 0 ANN 5 1 1 3 6 0 0 DIANA 9 7 8 5 1 7 5 6 0 3 8 3 7	(before taxes and other deductions) (D) Allowances (E) (F) Official Business (G) (G) JOSEPH 9 7 8 5 1 7 7 3 7 8 1 9 0 0 MARIA 3 2 2 4 2 0 0 0 0 ANN 5 1 1 3 6 0 0 0 0 DIANA 9 7 8 5 1 7 5 6 0 3 8 3 7 0	Composition Composition	Chefore taxes and other deductions Allowances (E) Go official Business (F) Chefore taxes and other deductions (E) Topplicable (E	(before taxes and other deductions) (D) Allowances (E) (F) (G) (G) (G) JOSEPH 9 7 8 5 1 7 7 3 7 8 1 9 0 0 1 1 MARIA 3 2 2 4 2 0 0 0 0 3 ANN 5 1 1 3 6 0 0 0 5 DIANA 9 7 8 5 1 7 5 6 0 3 8 3 7 0 1 0	(before taxes and other deductions) (D) Allowances (E) (F) (G) (G) (H) JOSEPH 9 7 8 5 1 7 7 3 7 8 1 9 0 0 1 1 3 MARIA 3 2 2 4 2 0 0 0 0 3 2 ANN 5 1 1 3 6 0 0 0 5 1 DIANA 9 7 8 5 1 7 5 6 0 3 8 3 7 0 1 0 9	Chefore taxes and other deductions CD CE CE CE CE CE CE CE	Defore taxes and other deductions) (D) Allowances (E) Growth Cother Disbursements (F) Cother Disbursements (H) Cother

600+

ORGANIZATION NAME: AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more than \$10,000 in total disburseme from your organization and any affiliates.) (B) Position (Enter employee's job title.)	Gross Salary (before taxes and other deductions) (D)	Allowances	Disbursements for Official Business	Other Disbursements	Total
(C) Name of Affiliated Organization (if applicable)	(0)	(E)	(F)	(G)	(H)
ROGERS JAMES	97851	7980	15740	0	121571
CITIZENSHIP REP					
N/A					
ROGERS NANCY *	7 5 0 4 4	4 0 3 1	3035	0	82110
ORGANIZER					
N/A					
ROMANIK LINDA	98001	7940	3 2 5 6	0	109197
SERVICING REP					
N/A					
ROMERO MANUEL	97851	7980	8637	0	114468
AUDITOR					
N/A					ļ
RONNING THOMAS *	120743	5 8 8 2	4837	0	1 3 1 4 6 2
ASSIST - MAJOR		<u> </u>			
N/A					

208+

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

	ore than \$10,000 in total disbursements iates.)	Gr (befo	oss ore t				1		Dist)U r				Other							
(B) Position (Enter employee's job title.)		othe	r de	duc				Allowances		us				Disbursements				ota			
(C) Name of Affiliated Organization	(if applicable)		(1	D)				(E)		(F)			(G)				(H)		_	
ROSADO	MILTON	1	0	1	7	1	6	7980	1	2	4	(9	0		1	2	2	1	0	5
SERVICING REP									l												
N/A																					
ROSEBRUGH	DEBRA	 	4	7	9	8	3	0		_			0	0			4	7	9	8	3
CLERK TYPIST																					
N/A																					
ROSE	PHILLIP *	 	6	2	4	3	2	2 1 2 1		1	3	3 (7	0			6	5	8	6	0
ASSIST MINOR														1	1						- {
N/A																					
ROSSI	CHARLOT	1	0	7	9	3	4	7560		6	, 4	1	4 5	5 0		1	2	1	9	3	9
ADMIN ASSISTANT															1						i
n/A																					
ROSS	KIMBERL		5	3	8	1	2	0					6 3	3 0			5	3	8	7	5
BOARD SEC																					
N/A																					}
		1			_			<u> </u>	<u> </u>	_									_	_	

ORGANIZATION NAME:	FILE NUMBER: 0 0 0 - 1	4 9
AUTO WORKERS AFL-CIO	1 12 11011105.	
ENDING DATE OF PERIOD COVERED:		

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

	ore than \$10,000 in total disbursements liates.)	Gr (befo	oss ore t							-		Disbursement for Official	в	Other				_	-
(B) Position (Enter employee's job title.)		othe	r de	duc				Allo	war	ice:	S	Business	-	Disbursements	•	Tot	al		
(C) Name of Affiliated Organization	(if applicable)		([) 				_	(E)		_	(F)	╛	(G)	_	(H)	_	
ROULEAU LEGISLATIVE REP	MARY		5	6 :	2 8	3 4		3	3 4	4	4	177	3	0	6	1	5	C) 1
N/A																			
ROWLAND STENOGRAPHER N/A	JOYCE		5	2	5 8	3 2					0		0	0	5	2	5	8	B 2
ROY SERVICING REP N/A	BROCK		2	5	0 4	4 5	5		1 7	9	6	120	8	0	2	8	0		4 9
RUBLE BOOKKEEPER A N/A	TERRY		5	4	1	5 8	3	 			0	1 0	0	0	5	4	2		5 8
RUCINSKI TECH AID I N/A	TRACEY		4	8	4	2 9	3				0		0	0	4	8	4		2 9

610+

12/31/2004

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more from your organization and any affiliate.) (B) Position (Enter employee's job title.)	than \$10,000 in total disbursoments i.)	Gi (befo		axe	s s	ınd		Atla			_)ffic	lsk	its	Other Disbursements				T .	tal		
(C) Name of Affiliated Organization (#	applicable)	Ou ic		D)				Allo	(E)		S 			F)			(G)				(H	_		
RUCKER	JOHN *	1	3	6	3	1 3	3	•	8	3	3	1	3	7	4	6	0		1	5	6	8	3 9	9 2
ADMIN ASSISTANT																								
N/A																	}							
RUDZINSKI	JOHN *	 	8	0	6	4 4			1 6	4	2		7	9	9	7	0	1		9	3	2	 !	В 3
ASSIST MINOR																								
N/A																								
RUIZ	RAY	1	0	1	8	1 9	9	-	7 9) 2	0		7	7	4	1	0	,	1	1	7	 ' 4	-	8 0
SERVICING REP																								
n/a																								
RUPLE	RANDY		9	7	9	2 (3		7 9) 1	4	1	3	1	3	7	C	,	1	1	. 8	3 9)	7 7
SERVICING REP																								
n/A																								
RUPPERT	RICHARD	1	1	4	7	5 4	4	•	7 7	7 (0 (1	7	' 8	7	6	0	†	1	4	١ () 3	 }	3 0
ADMIN ASSISTANT																		ļ						
N/A																								

(211) +

ORGANIZATION NAME: AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received from your organization and any at (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements fillates.)	Gn (befo other		axe Juc	s a	nd		Allow	ran E)	ces	3	Disbursements for Official Business	Other Disbursements (G)			Γot:		_	
RUPP	JOHN		_		9 2	2 6		_		4	0	(F) 6 9 6 5	<u> </u>	1				3	1
SERVICING REP		: :																	
RUSHING LOSS WAGES N/A	DON		1	0	6 :	5 5	,				0	0	0	-	1	0	6	5	5
RUSHLAU SERVICING REP N/A	GORDON		9	7	9 :	2 6	3	7	5	4	0	4345	0	1	0	9	8	1	1
RUSSAW SERVICING REP N/A	ESTERVE		9	7	8 :	5 1		7	7	0	0	7845	0	1	1	3	3	9	6
RYPKOWSKI EDUCATION REP N/A	ЈОЅЕРН		9	7	9	2 6	5	7	9	8	0	1 2 2 2 9	0	1	1	8	1	3	3 5



12/31/2004

ORGANIZATION NAME:

AUTO WORKERS AFL-CIO

ENDING DATE OF PERIOD COVERED:

12/31/2004

	Ned more than \$10,000 in total disbursements ny affiliates.)	Gr (befo	oss ore t									or O		ents al	Other							
(B) Position (Enter employee's Job title.		othe	r de	duc				Allowa		S	€	Busi	nes	S	Disbursemen	ts			To			
(C) Name of Affiliated Organiza	tion (# applicable)		(ı) 				(E)			(F	•)		(G)			_	(H	l)		
RYS	JACQUBL		5	4 (3 0	3 5				0				0		٥		5	4	0	8	3 5
SECRETARY																						
N/A																						
SAFFOLD	DEANNE		5	2 :	2 -	1 4	T			0				0		0		5	2	2	1	1 4
BOOKKEEPER BI							1]							
N/A																						
SAGGAU	MICHAEL	1	1	9	3 () 2		7	5 (0 0		2	7	2 0		0	1	2	9	5	2	2 2
ATTORNEY											1					1						
N/A																						
SAKSEWSKI	DAVID		9	7	9 :	2 6	-	7	9 (5 0	1	2	1	4 3		0	1	1	8	0	- 2	2 9
SERVICING REP											Į .											
N/A																						
SANBORN	JAMES *		3	6	6	0 1	\dagger	1	4	7 0	 	4	5	0 3		0		4	2	: 5	7	7 4
SERVICING REP							ı															
N/A																						
		<u> </u>									<u> </u>				<u></u>							



ORGANIZATION NAME: AUTO WORKERS AFL-CIO

ENDING DATE OF PERIOD COVERED:

12/31/2004

(A) Name (List all employees who received from your organization and any a (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements filliates.)	Gr (befo other	r de e	axe	3S &	and		Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	,	,	Tota (H)			
SANDERS STENOGRAPHER N/A	MATTIE	5 -5 -5 -5 -5 -5 -5 -5 -5 -5 -5 -5 -5 -5	2	4	1	7	7	0	0	0		2		_	7	7
SANGSTER SERVICING REP N/A	JOHN		9	8	1	5	1	7900	15238	0	1	2	1	2	8	9
SANGSTER STENOGRAPHER N/A	SHIRLEY		5	0	9	5	6	0	0	0		5	0	9	5	6
SANTIMAN BOARD SEC N/A	KELLY		5	3	4	1	7	0	7 4 6	0		5	4	1	6	3 3
SANTOS SERVICING REP N/A	JOSEPH		9	7	8	5	1	7980	8693	0	1	1	4	5	2	2 4

ORGANIZATION NAME: AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED: 12/31/2004	

(A) Name (List all employees who received more from your organization and any affiliate (B) Position (Enter employee's job litte.)	than \$10,000 in total disbursements es.)	Gr (befo		axe	s a	ınd		Allow	<i>r</i> an	^		Disbursements for Official Business	Other Disbursements			Tο	tal		
(C) Name of Affiliated Organization (A	(applicable)			D)					E)	003		(F)	(G)_			(H			
SARKESIAN	DONALD	1	1	1	6	3 8	3	7	9	4	0	3461	0	1	2	3	0) ;	3 9
ADMIN ASSISTANT		1																	
n/a																			
SARKISSIAN	SUSAN		5	3	5	5 9	1				0	8	0		5	- 3	5 5	5	6 7
ADMIN SECRETARY																			
n/A																			
SARTIN	JANET		5	6	0	3 6	3	<u>. </u>			0	0	0		5	6	6 0)	3 6
STENOGRAPHER		1					1												
n/a																			
SAUCEDA	ENEDELI		3	9	1	3 7	7	-		3	2	0	0		3	. 9) 1		6 9
SECURITY GUARDS																			
N/A																			
SAULSBERRY	DELORES	1	0	1	6	4 1	1	7	9	6	0	4219	0	1	1	3	3 8	3	2 (
ORGANIZER																			
n/a																			

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received m from your organization and any affilial (B) Position (Enter employee's job title.)	oro than \$10,000 in total disbursements ates.)	Gr (befo		axe	3S 8	and		Allowa		200			or (Offi	me icia ess	d	Other Disbursement				Ta	tal		
(C) Name of Affiliated Organization	(if applicable)			D)				Allowa (E		<i>J</i> C3				(F)			(G)					H)		
SAVAGE	THOMAS		9	7	6	6 7	7	7 9	9	4	0	1	6	3	3 :	5 9	0		1	2	1	9) (6 6
ORGANIZER							İ																	
n/A							l																	
SAVAGE	WILLIAM		9	7	8	5 1	1	5	9	0	9		2	2 () (5 1	C	,	1	C) {	5 8	3	2 1
SERVICING REP																								
N/A																								
SAVALLE	FRANK *	1	1	0	9	4 8	8	5	9	2	2		7	, ;	7 8	8 4		,	1	2	2 4	1 6	3	5 4
ASSIST MINOR																								
N/A																								
SAYLOR	JAMES		3	3	9	1.8	8	2	1	2	1		3	3 :	2 4	4 1	()		3	3 9	9 2	2	8 0
SERVICING REP																								
N/A																								
SCHIPPANI	MICHABL	1	0	0	9	2	6	7	9	6	0	Γ	4	1 4	4	7 () (1	1	•	 ;	3 3	3	5 6
RESEARCH SPEC																								
n/A																								

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ORGANIZATION NAME:	-	
AUTO WORKERS AFL-CIO		
AUTO MONNENS AFE-CIO		

ENDING DATE OF PERIOD COVERED: 12/31/2004

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received from your organization and any (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	d more than \$10,000 in total disbursements affiliates.)	Gi (befo othe	r de	axe	s a	nd		Allo	wan (E)		\$		or (Bus	Offic	cial ISS	1	Other Disbursements (G)			Toi (H			
SCHNELL SERVICING REP N/A	TIMOTHY		9	8	1 :	5 1		7	' 9	0	0		6	8	8	0	0	1	1	2	9	3	3 1
SCHNUR SERVICING REP	DONALD		9	7	9 :	2 6		7	7	8	0	1	0	1	0	0	0	1	1	5	8	(0 6
SCHOLLENBERG SECRETARY N/A	NOVA		5	1	0	9 4					0					0	0		5	1	0		9 4
SCHRAMM SERVICING REP N/A	MICHAEL		9	7	9	2 6	5	7	7 9	6	0	1	1 3	3 () 1	 8	0	1	1	8	9		0 4
SCHUH SERVICING REP N/A	PAUL		9	8	0	0 1		1	3 0) C	0	2	2 1	1 9	9 9	9 4	0	1	2	2 7	7 9	, ,	9 5

(217)+

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:

12/31/2004

(A) Name (List all employees who received m from your organization and any affil	ore than \$10,000 in total disbursements liates.)	G (bef	ross ore 1				Î	-				Disbursements for Official	Other							
(B) Position (Enter employee's job title.)		othe	r de	du			١	Allowa	an	ces	;	Business	Disbursements			1	Γota	al		
(C) Name of Affiliated Organization	(if applicable)	<u> </u>	(D)			┙	(E	<u>=)</u>	_		(F)	(G)				(H))		
SCHULZ	JANET		9	7	9	2 (6	7	9	6	0	4282	0		1	1	0	1	6	8 6
ORGANIZER							ĺ													
N/A																				
SCHULZ	KRISTIB		5	2	2	2	1				0	0	0			5	2	2	2	2 1
BOOKKEEPER BI														ļ						
N/A																				
SCHUTTE	RENE		9	7	8	5	1	7	5	8	0	8775	0		1	1	4	2	(0 6
SERVICING REP							i													
N/A																				
SCIOTTI	ROBERT		9	8	0	0	1	7	9	4	0	4657	0		1	1	0	5	Ş	9 8
SERVICING REP														ı						
N/A																				
SCOTT	BARBARA	1	1	1	6	3	8	7	5	2	0	6043	0	1	1	2	5	2	(0 1
ADMIN ASSISTANT																				
N/A								!												



ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2004	

(A) Name (List all employees who received from your organization and any at (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements filiates.)	Green (before other		axe luc	s a	nd		Allow (I	an E)	ces	;	Disbursements for Official Business (F)	Other Disbursements (G)			Fota (H)			
SCOTT SERVICING REP N/A	KENNITH		9	7 9	9 :	2 6	Š	7	9	6	0	3 3 3 1	0	1	0	9	2	1	7
SCOTT SERVICING REP N/A	NED		9	8	0	0 1	1	7	9	6	0	7627	0	1	1	3	5	8	3 8
SCOTT TECH AID I N/A	ROSEANN		5	1	2	6 9	9				0	0	0		5	1	2	E	6 9
SCRASE TRAINING REP N/A	REBECCA		9	8	0	7 6	6	7	4	6	3	8 2 1 2	0	1	1	3	7		5 1
SCRASE SERVICING REP N/A	WILLIAM		9	8	2	2 (6	7	5	5 0	0	3938	0	1	0	9	6	•	3 4

(219)+

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (Ust all employees who received from your organization and any at (B) Position (Enter employee's job title.)	more than \$10,000 in total disbursements fillates.)	Gros (before	tax	es	and						Disbursements for Official	Other							
		other d	edu (D)		ons)	'	Allow		Ces	3	Business	Disbursements	ł			otal			1
(C) Name of Affiliated Organization	(it abbricable)		_			4	(1	<u>E)</u>	_		(F)	(G)			(1	H) 			4
SCRIBNER	PATRICI	9	8	0	0	1	7	5	0	0	6271	0	1	1	1	7	, .	7 2	
WOMENS REP																			
N/A																			
SCRUSE	BETTY J	5	2	4	6	8				0	0	0			5 2	2 4	-	6 8	-
BOOKKEEPER A																			
N/A																			
SEELY	TRACI	5	2	5	4	8				0	0	0			5 2	2 5	5	4 8	
BOARD SEC							į												l
N/A																			
SELBY	DAVID	9	7	· 9	2	6	7	5	6	0	4005	0	1	1 (9 4	.	9 1	1
SERVICING REP]							
N/A																			
SELBY	PAULETT	9	7	' 9	2	6	7	9	6	0	4 4 0 3	0	Τ,	1	1 (0 2	2	8 9	-
SERVICING REP																			
N/A																			
L		l			_		<u> </u>				<u> </u>		1						لـ

(220)+

	_						
FILE NUMBER:	0	0	0	-	1	4	9

ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
NDING DATE OF PERIOD COVERED	· · · · · · · · · · · · · · · · · · ·

(A) Name (List all employees who received from your organization and any a (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements ffiliates.)	Gi (befi othe	r de	axe	es a	nd		Allowances (E)		Disbursements for Official Business (F)	Other Disbursements (G)		•	Tot (H			
SELVIG SERVICING REP N/A	ROGER	5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	9	8	0 1	0 1	1	7940		6013	0	1	1	1	9	5	5 4
SHELL AUDITOR N/A	MATTHEW *		6	1	5	5 5	5	2 1 2 1		1856	0		6	5	5	3	3 2
SHELTON COORDINATOR N/A	HAROLD	1	0	6	3	4 9	9	7540	'	4900	0	1	1	8	7		3 9
SHELTON SERVICING REP N/A	STEVEN	1	0	0	1	6 :	3	7980	,	4939	0	1	1	3	0	• 4	3 2
SHEPARD GRANT N/A	STEVEN	1	0	3	7	1 :	3	7834		7141	0	1	1	8	6	i (3 8

(22)+

12/31/2004

(A) Name (List all employees who received more than \$10,000 in total from your organization and any affiliates.) (B) Position (Enter employee's jeb title.)		Gro (befo other		e: iuc	s a	nd		Allow		ces	5		or (Bus	offi ine	cia ess	1	Other Disburseme	ents				ota			
(C) Name of Affiliated Organization (if applicable)				<u>" </u>			1	(1	<u>E)</u>				((F)			(G)					(H)			
SHEPHERD GARY			9	8 (0 (0 1	1	7	9	4	0	1	1	3	3 7	8 '		0	1	J	1	7	3	1	9
CITIZENSHIP REP							ı					l					Ì								
N/A																									
SHEPPARD SAMUE	:L	1	0	6	4 :	2 4	4	7	5	0	0		3	, 4	 {	5		0	-	1	1	7	4	1	9
DEPART HEAD							1																		
N/A																									
SHERRICK DAN		1	3	5	3	4 ′	1	7	5	2	0		3	3 6	3 4	1 2		0	,	1	4	6	5	0	3
ATTORNEY							١																		
N/A																	<u> </u> 								
SHIELDS BERNI	CE		9	8	0	7 (6	7	5	0	0		4		 9 (3 0		0		1	1	0	5	3	6
TRAINING REP							-																		
N/A																									
SHINGLER BARBA	ARA		5	1	2	9 2	2				0					0		0			5	1	2	9	2
STENOGRAPHER	i	i																							
N/A																		i							



ORGANIZATION NAME: AUTO WORKERS AFL-CIO

ENDING DATE OF PERIOD COVERED:

12/31/2004

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who receive from your organization and an (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization		Gi (befo othe	r de	tax	es ctic	and		Allowances (E)		Disbursements for Official Business (F)	Other Disbursements (G)		•	Tot (H			
SHOEMAKER COORDINATOR N/A	DAVID	1	0	2	4	9	7	7 5 2 0)	7186	0	1	1	7	2	C	3
SHOEMAKER SYS ANALYST N/A	MICHAEL		9	8	0	0	1	7797	7	3685	0	1	0	9	4		3 3
SHOEMAKER SECRETARY N/A	SUSAN		5	1	9	7	5	()	0	0		5	1	9	7	7 5
SHRADER ASSIST MINOR N/A	LARRY		9	9	0	1	7	7806	6	13291	0	1	2	0	1		1 4
SHROAT ASSIST - MAJOR N/A	JAMES	1	0	6	2	9	2	7 5 4 (0	5510	0	1	1	9	3	. 4	1 2

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ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received mirrom your organization and any affilial (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements ates.) (if applicable)	Gr (befo other	r de	axe	es a	and		Allowai (E)		es		Disbursements for Official Business (F)	Other Disbursements (G)			Tot (H			
SIMMONS ATTORNEY N/A	BLAIR	1	0	6	8	9 2	2	4 6	5	8 4	1	2178	0	1	1	3	7	5	5 4
SIMPSON SECRETARY N/A	DEBORAH		5	1	8	6	1			(ס	0	0		5	1	8	•	3 1
SINDLINGER SERVICING REP N/A	RICHARD *		8	0	2	1 (0	4 7	7	2	7	10037	0		9	4	9	-	7 4
SINNI SERVICING REP N/A	JOSEPH		9	7	8	5	1	7 7	7	4	0	5775	0	1	1	1	3		6 6
SIVIN HEALTH-SAFETY N/A	DARIUS		8	1	6	2	3	6 4	4	1	1	4782	0		g	9 2	2 8	}	1 6

S - 10

ORGANIZATION NAME:	
ALLES MACRICERS ASI ALS	
AUTO WORKERS AFL-CIO	
710 10 11 <u>014 21 10 14 2 010</u>	
ENDING DATE OF PERIOD COVERED:	
ENDING DATE OF PERIOD COVERED.	
12/31/2004	
12/3/1/2004	
. — •	

(B) Position (Enter employee's job title.)	re than \$10,000 in total disbursements ates.)	Gro (befor	dec	axe: fuct	s an		Allowances	Disbursements for Official Business	Other Disbursements		Tota			
(C) Name of Affiliated Organization	(if applicable)		(0	" —			(E)	(F)	(G)		(H)			_
SIZEMORE	JOANN		5	1 1	1 5	1	o	0	0	5	1	1	5	1
INT'L OFF SEC]						
N/A														
SIZEMORE	TISHAUN		1	7 (8 8	5 5	0	0	0	1	7	6	8	5
MAINTENANCE									[ĺ				-
N/A														
SKOTNES	KEITH		9	8 (0 7	' 6	7 9 4 0	10176	0	11	6	1	9	2
EDUCATION REP							†							
N/A										k 				
SKUDLAREK	LEON	1	0	2 4	4 9	7	7 5 4 0	6963	0	11	7	0	0	0
ASSIST MINOR														
N/A														
SLAUGHTER	HENDERS *		9	7	5 5	5 6	4622	3511	0	1 0	5	6	8	9
ADMIN ASSISTANT														
N/A														

ORGANIZATION NAME: AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED: 12/31/2004	

(A) Name (Ust all employees who received in from your organization and any aff. (B) Position (Enter employee's job title.)	nore than \$10,000 in total disbursements illates.)	Gr (befo		axe	es a	and		A (1					oun or C	Mic	lsk		Other				•	1		
(C) Name of Affiliated Organization	(if applicable)))	, COC)			Allowa (E		ces				F)	-33		Disbursements (G)				To (H			
SMITH	ALVIN		9	7	8	5 1	1	7 9	9	8	6	1	2	8	5	3	0		1	1	8	6	: {	9 0
SERVICING REP							l											ļ						
N/A							Ī																	
SMITH	BELINDA		5	2	4	4 2	2				0			1	4	4	0		<u> </u>	5	2	5	. (<u> </u>
BOARD SEC							l																	
N/A																								
SMITH	DARCY		5	3	9	7 (0			7	8	4	0			5	4	7	<u> </u>	5 4
BOARD SEC							-					1						1						
N/A		i I																						
SMITH	DARRELL		9	8	0	7 (6	7	5	0	0		4	3	1	9	0	T	1	0	9	8	} !	9 5
TRAINING REP							١																	
N/A																								
SMITH	GAYE		5	2	2	6	6	_			0					0	0			5	2	2 2)	6 6
BOOKKEEPER BI							Ì																	
N/A																								

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ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2004	

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who receive from your organization and any	d more than \$10,000 in total disbursements affiliatos.)	Gre (befo	oss re t			nd					Disb	urs Of			Other							
(B) Position (Enter employee's job title.)		other	r de	duc			Allo	var	nces	3		usir			Disbursements	3		7	Γota	al		
(C) Name of Affiliated Organization	n (if applicable)		(()				(E)				(F)		(G)	<u> </u>			(H))	_	
SMITH	HOLLIB		5	2 (0 9	8 (0			•	7 5	0			5	2	1	7	3
BOOKKEEPER BI																						
n/a															1							
SMITH	JOHN		9	9 (4 2		7	9	6	0	1	2	8	6 9	0		1	2	0	2	5	0
SERVICING REP																						
N/A																						
SMITH	LAWRENC	1	0	2	6 '	1 5	7	5	5 4	0		6	6	8 5	0		1	1	6	8	4	0
ASSIST - REGION																						
N/A																						
SMITH	LESLIE	1	0	6	3 () 4	7	· 5	5 0	0		2	3	4 7	0		1	1	6	1	5	1
ASSIST MINOR											Ì					1						
N/A																						
SMITH	LULA		9	7	8 :	5 1	7	' (2	8 (0		4	5	5 3	C		1	1	0	3	8	4
RETIRES REP											Ì											
N/A																						
SMITH ASSIST MINOR N/A SMITH RETIRES REP		1																				

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ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2004	

(A) Name (List all employees who received m from your organization and any affilial (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements ates.) (if applicable)	Gr (befo	r de	ахе	28 a	and		Allowances (E)	\$	Disbursements for Official Business (F)	Other Disbursements (G)				ital 1)			
SMITH SERVICING REP N/A	MERRY		9	7	8	5	1	798	0	6104	0	1	1	1	9) ;	3 (5
SMITH CIVIL RIGHTS REP N/A	MILDRED		9	8	0	7	6	7 9 2	0	6836	0	1	1	1 2	2 8	3 ;	3 :	2
SMITH MAINTENANCE N/A	VERNA		4	5	8	9	4		0	0	0		4	.	5 8	3 :	9	4
SMITH MAINTENANCE N/A	WENDELL		6	1	2	0	2		0	268	0		•	3 ′	1 4	1	7	0
SMRCHEK ADMIN SEC N/A	CAROL		4	7	8	5	0		0	0	0		4	4 7	7 8	3	5	0

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ORGANIZATION NAME:	•	
AUTO WORKERS AFL-CIO	<u>.</u>	
ENDING DATE OF PERIOD COVERED:		
12/31/2004		

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received from your organization and any at (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements fillates.)	Gr (befo	r de	axe	s a	nd		Allowances (E)	1	Disbursements for Official Business	Other Disbursements (G)				otal H)		
SNELL SNELL	FRANCIS				9 :	2 6	5	7 9 6 0	+	(F) 7 7 6 6	0	1		Ť	_		5 2
SERVICING REP																	
SNOW LAW CLERK N/A	JOHN		2	0	3	0 5	5	0		1 2 4 0	0		•	2 ′	1 5	5 4	4 5
SNOW SKILLED TRADES R N/A	JOHN *		5	6	1	0 2	2	2 1 0 1		2064	0		(6 (D 2	2 (6 7
SNYDER SERVICING REP N/A	RICHARD	1	0	3	4	1 :	5	7880		16209	0		i :	2 :	7 5	5 (0 4
SOBCZYNSKI SERVICING REP N/A	MARY FR	1	0	3	0	0	1	7520		3064	0		1	1 :	3 5	5 (8 5

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ORGANIZATION NAME: AUTO WORKERS AFL-CIO

ENDING DATE OF PERIOD COVERED:

12/31/2004

(A) Name (List all employees who received m from your organization and any affil (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements listes.)	Gi (befo othe	r de	tax	es : ctic	and		Allowances (E)		Disbursements for Official Business (F)	Other Disbursements (G)				「ota (H)			
SODKO ATTORNEY N/A	JEFFREY	1	0	5	3	5 9	5	7 5 4 0	,	4504	0	,	1				9	9
SOMMER SERVICING REP N/A	SCOTT		9	7	9	2	6	7960)	8721	0		1	1	4	6	0	7
SOMSON LEGISLATIVE REP N/A	BARBARA	1	0	4	4	9	7	754()	3016	0		1	1	5	0	5	5 3
SORRELL ASSIST - REGION N/A	GARY *		8	7	0	2	8	3 4 0	1	4111	0			9		5		10
SOUZA SERVICING REP N/A	PRANK		9	7	7	' 7	6	8000	0	6266	0		1	1	2	0	4	1 2



ORGANIZATION NAME: AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED: 12/31/2004	

(A) Name (List all employees who received from your organization and any (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	f more than \$10,000 in total disbursements affiliates.) In (if applicable)	Gr (befo	r de	axe	es a ctio	and		Allowand (E)	ces	3	Disbursements for Official Business (F)	Other Disbursements (G)			Tota (H)			
SPANGLER UTILITY REPAIR N/A	STEVEN		6	0	7	9	2			0	C	0		6	0	7	8	2
SPINDLEMAN SERVICING REP N/A	ROBERT	1	1	2	3	9	2	6	4	8	107	0		1	3	1	4	7
SPRING ADMIN ASSISTANT N/A	JOSEPH	1	1	1	7	1	3	7 5	0	0	6236	0	1	2	5	4	4	9
SPURLOCK SERVICING REP N/A	RONALD		9	8	0	7	6	7 9	2	0	12626	0	1	1	8	6	2	2 2
STACKPOOLE ASSIST - MAJOR N/A	JOSEPH	1	0	6	2	1	7	7 8	8	9	4399	0	1	1	8	5	() 5

ORGANIZATION NAME:

AUTO WORKERS AFL-CIO

ENDING DATE OF PERIOD COVERED:

12/31/2004

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who receive from your organization and any (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	d more than \$10,000 in total disbursements affiliates.) On (if applicable)	Gr (befo other	r de	axe	s a	ind		Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)		Tot (H			
STAFFORD TECH AID I N/A	CHRISTI		4	9	6	6 :	5	0	0	0	4	9	6	6	5
STAFFORD STENOGRAPHER N/A	KATHLEE		5	1	8	2	1	0	0	0	5	i 1	8	2	2 1
STAGNER SERVICING REP N/A	LOUIS		9	8	0	0	1	7700	8041	0	1 1	3	7	4	1 2
STALLINGS ASSIST MINOR N/A	JOHN		9	9	7	5	8	7540	8 1 7 7	o	1 1	5	4	7	7 5
STANFORD INT'L OFF SEC	CAROLYN		4	5	0	5	8	0	0	0	4	5	0		5 8

Form LM-2 (Revised 2000)

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SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received in from your organization and any affilial (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements ilates.) (if applicable)	Gr (befo othe	r de	tax	es : ctio	and		Allowances (E)		Disbursements for Official Business (F)	Other Disbursements (G)			Γota (H)			
STARK P/R REP N/A	SAMUEL		9	8	0	0	1	7 5 2	0	2097	0	1	0	7	6	1	8
STATEN ASSIST MINOR N/A	MAURICE	1	0	2	5	7	2	7 5 2	0	5689	0	1	1	5	7	8	1
STEELE ASSIST MINOR N/A	DONALD	1	0	2	4	9	7	7 9 4	0	4806	0	1	1	5	2	4	3
STEELE ASSIST - MAJOR N/A	LARRY	1	0	6	3	6	7	792	0	20175	0	1	3	4	4	6	2
STEEVES SERVICING REP N/A	BRUCE *		1	8	4	4	8	1 2 8	7	9 7 2	0		2	0	7	0	7

12/31/2004

ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2004	

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received mo from your organization and any affilial (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	re than \$10,000 in total disbursements stes.) (if applicable)	Gn (befo other	de:	axe	s a	nd		Allowances (E)		Disbursements for Official Business (F)	Other Disbursements (G)			-	otal H)			
STEMPNIK MAINTENANCE N/A	WILLIAM		6	2 (6 (8 8	3	0	,	0	0		e	3 3	2 6	5	В 8	
STEPHEN AUDITOR N/A	WILLIAM		9	7	9 ;	2 6	5	7 9 6 0	,	10413	0	1	. 1	1 (6 2	2	9 9	T
STEVENSON ADMIN ASSISTANT N/A	WILLIAM *		6	2	7	4 2	2	3 3 8 1	1	1917	0			6	8 ()	4 0	T. T.
STEVERS STENOGRAPHER N/A	WANDA		5	1	5	1 9	9	C		0	0		-	5	1 :	5	1 9	,
STEWART SERVICING REP N/A	BETTY		9	7	8	5	1	8000	D	22015	0	1	 :	2	7 (В	6 6	;

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ORGANIZATION NAME: AUTO WORKERS AFL-CIO	 ·
ENDING DATE OF PERIOD COVERED: 12/31/2004	

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received from your organization and any a (B) Position (Enter employee's job title.)	more than \$10,000 in total disbursements filiates.)	(befo	ross ore t	axe	es a	ind	Ī				Disbursements for Official	Other						_	
(C) Name of Affiliated Organization	(if applicable)	othe		auc D)	TUOI	ns)	ł	Allowar (E)		s	Business (F)	Disbursements (G)				ota (H)	ļ		
STEWART SERVICING REP N/A	GWENDOL	!	9	8	0	7 6	5	7 6	(0	2583	0	1	1 (0	8 2	2	5	9
STEWART STENOGRAPHER N/A	RUTH		5	1	0	4 2	2			0	0	0			5	1 (0	4	2
STILLMAN LEGISLATIVE REP N/A	DON		1	6	3	5 (0	7	· (6 2	3 4 3 0	0			2	0	5	4	2
STOKER SERVICING REP N/A	STANLEY		9	7	9	2 6	6	7 6	 ; {	В О	5998	0		1	1	1	6	0	4
STOKES ADMIN ASSISTANT N/A	EUNICE	1	1	1	6	3 8	В	7 9) 4	4 0	4314	0		1	2	3	8	9	2

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ORGANIZATION NAME:		
AUTO WORKERS AFL-CIO		
ENDING DATE OF PERIOD COVERED:		
12/31/2004		

(A) Name (List all employees who received m from your organization and any affilial (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements lates.) (if applicable)	Gr (befo other	r de	axe	9S 8	and		Allowar (E)	_	es	Disbursements for Official Business (F)	Other Disbursements (G)			ota (H)			
STONE SERVICING REP N/A	MICHAEL		9	7	9	2	6	7 9)	8 0	4 4 0 2	0	1	1	0	3	0	8
STOREMSKI SERVICING REP N/A	BENEDIC *		9	0	1	2	2	4 7	•	6 2	6 1 0 6	0	1 (0	0	9	9	0
STRIBLING SERVICING REP N/A	MADALEN		9	7	8	5	1	7 5	5	6 0	6735	0	1	1	2	1	4	6
STRONG TECH AID I N/A	VERNITA		5	2	4	7	6			0	8 2	0		5	2	5	5	8
STROUD INT'L OFF SEC	DONNA		5	8	4	1	5			C	2 7	0		5	8	4	4	2

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:

12/31/2004

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received from your organization and any (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	I more than \$10,000 in total disbursements affiliates.)	Gro (befo other	r de	axe	s a	ind		Allow (I	ran E)	ICE:	S	Disb for Br		fici 1 e s	al	ts	Other Disbursements (G)		•	Tol (H				
STROUD SERVICING REP N/A	JIMMY		9	7	9	2 6	3	7	9	6	0	1	3	8	6	2	0	1	1	9	7	~	4	8
STROUD KEYPUNCH OPER N/A	KELLI		5	2	3	5 (5				0			1	4	2	0		5	2	4	•	9	2
STRUCKMAN SERVICING REP N/A	THOMAS		9	7	8	5 1	1	7	5	6	0		6	5	3	7	0	1	1	1	9) •	4	8
STUGLIN SERVICING REP N/A	FRANK		9	8	5	4 (6	7	9		3 0		4	9	9	2	0	1	1	1	5	•	1	8
STYERS ADMIN ASSISTANT	DEBRA	1	1	1	6	3 8	8	7	9) 4	1 0		5	1	0	0	0	1	2	: 4		· ·	7	8

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(232) +

ORGANIZATION NAME:
AUTO WORKERS AFL-CIO
ENDING DATE OF PERIOD COVERED:
12/31/2004

(A) Name (List all employees who received from your organization and any at (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements filiates.)	Gr (befo	r de	axe	9S 8	and		Allowance (E)	es		Disbursements for Official Business (F)	Other Disbursements (G)		To (ŀ	tal 1)		
STYERS BOOKKEEPER BI N/A	KENDALL		5	2	0	6	4			0	0	0	5	5 2	2 0	•	3 4
SUEMNICK ASSIST - REGION N/A	ALLAN	1	0	8	8	7	9	79	4	0	4891	0	1 2	2 1	 7	•	1 0
SUEMNICK ASSIST - MAJOR N/A	CINDY	1	0	4	1	8	8	7 5	0	0	8740	0	1 2	2 () 4	-	2 8
SULLIVAN SERVICING REP N/A	REBECCA		9	7	8	5	1	7 9	6	0	4205	0	1 1	1 () ()	1 6
SULLIVAN SERVICING REP N/A	WILLIAM		9	7	9	2	6	7 5	6	0	5786	0	1 ′	1 1	1 2	2	7 2

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received more from your organization and any affiliate: (B) Position (Enter employee's job title.)	han \$10,000 in total disbursements L)	Gross Salary (before taxes and other deductions) (D)		Allowances		Disbursements for Official Business	Other Disbursements			To	tol.		•				
(C) Name of Affiliated Organization (#	applicable)					,		(E)		(F)	(G)				1)		
SUTTON	DONNA		5	1	3	1	5	0)	0	0		5	5 1	3	} '	1 5
MAINTENANCE		ĺ					1		ı								
n/A																	
SWBENBY	CHRISTI		9	7	9	2	6	7960	5	2904	0	1	(3 (3 7	<u> </u>	9 0
SERVICING REP																	
N/A																	
SWEET	CRICKET *		6	7	3	1	1	3 4 0 1	1	2095	0		7	7 2	2 8	3	0 7
SERVICING REP																	
N/A											}						
SWIFT	KARLA	1	1	1	7	1	3	7940	5	3946	0	1	2	2 3	3 5	5	9 9
ADMIN ASSISTANT																	
N/A												•					
SYPNIEWSKI	DANNY		9	7	9	2	6	7960	0	3011	0	1	(3 8	3	9 7
SERVICING REP									- [
N/A																	

12/31/2004

ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF BERIOD COVERED:	

(A) Name (List all employees who received m from your organization and any affilial (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements ates.) (if applicable)	Gi (befo othe	r de	axe	es a	ind		Allow:		ces	3	Disburseme for Official Business (F)	ļ	Other Disbursements (G)			ota (H)		
SZCZEPANIAK RESEARCH SPEC N/A	TED		9	8	0	0 1		7	9	4	0	297	' 8	0	1 (0	8 9	9	1 9
SZUMAL ASSIST MINOR N/A	EDWARD	1	0	2	4	9 7	7	7	5	2	0	770	3	0	1	1	7	7	2 0
TAFFE STOCKROOM	JEAN		5	1	2	4 6	3				0		0	0		5	1	2	4 6
TALIK SERVICING REP N/A	JOHN		4	9	9	3 2	2	3	5	4	6	2 3 :	2 5	0		5	5	8	0 3
TARPEY TECH AID I N/A	KELLY		5	1	0	5 8	В				0		0	0		5	1	0	5 8

ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	<u> </u>
12/31/2004	

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received in from your organization and any afficient (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	nore than \$10,000 in total disbursements iliates.) (if applicable)	Gr (befo	r de	ахе	es a	and		Allow (var E)		5		r O Busi	ffic	ial		Other Disbursements (G)			To (F			
TATE CITIZENSHIP REP N/A	CAROLYN		9	7	8	5 1	1	7	9	8	0	1	0	4	4	4	0	1	1	6	2	7	7 5
TATE LEGISLATIVE REP N/A	EULA	:	9	8	0	0 -	1	7	9	6	0		3	7	8	4	0	1	0	9	7	•	4 5
TATE SERVICING REP N/A	JAMES		9	7	9	2 (6	7	9	6	6	1	4	8	7	8	0	1	2	. C	7		7 (
TAYLOR-LEWIS ORGANIZER N/A	LYNDA		9	8	0	0	1	7	9	1	. 0		3	2	5	4	0	1	0) 8) 1	•	9
TAYLOR SERVICING REP N/A	AARON	1	0	1	6	8	6	7	9) 4	0		5	7	1	2	0	1	1		5 3	}	3 8

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FILE NUMBER:	$\overline{\Lambda}$	Λ	Λ		4	4	$\overline{}$
LIFE MOMBEL	v	U	U	-	•	*	J

ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2004	

(A) Name (List all employees who received m from your organization and any affiliated (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements lates.)	Gr (befo	r de	axe	3S 8	and		Allowances (E)		Disbursements for Official Business (F)	Other Disbursements (G)			Tof		_	
TAYLOR INT'L OFF SEC	CAROLYN		6	9	7	0	5	0		0	0		6	·	_	0	5
TERRELL WOMENS REP N/A	AUDREY		9	6	5	1	6	7 4 1 5	;	1 1 8 0 2	0	1	 1	5	7	3	3
TERRY STENOGRAPHER N/A	WONNIE		4	5	3	4	7	0)	0	0		4	5	3	4	7
TERZIAN SYS ANALYST N/A	THOMAS		9	8	0	7	6	7 5 0 0	,	2691	0	1	1 0	8 (2	€	7
THARP SERVICING REP N/A	JAMES		9	7	8	5	1	7980)	11562	0	1	1 1	1 7	3	9	3

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who receive from your organization and any (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	d more than \$10,000 in total disbursements affiliates.) On (If applicable)	Gr (befo othe	r de	tax	es ctic	and		Allowances (E)	[Disbursements for Official Business (F)	Other Disbursements (G)		ļ	To:			
THIERY ASSIST MINOR N/A	DEREK	1	0	2	4	2	2	7540		4900	0	1	1	4	8		6 2
THOMAS CITIZENSHIP REP N/A	ARTHUR		9	7	7	7	6	8000		15758	0	1	2	1	5	<u> </u>	3 4
THOMAS CLERK TYPIST N/A	DARLENE	<u> </u>	5	1	1	9	5	0		0	0	•	5	1	1		9 5
THOMAS SERVICING REP N/A	JOHNNY		9	7	8	5	1	7980		4676	0	1	1	O) 5	5	0 7
THOMAS SYS ANALYST N/A	MILTON		9	8	7	7	0	7820		2137	0	1	0	8	3 7	7	2 7

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FILE NUMBER:	0	0	0	-	1	4	9

ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2004	

(A) Name (List all employees who received from your organization and any (B) Position (Enter employee's job title.)	more than \$10,000 in total disbursements affiliates.)	Gross Salary (before taxes and other deductions) (D)	Δι	llowa	ncc	.	1	burs or O Busi	ffici	al		Other Disbursements			7	otal	1						
(C) Name of Affiliated Organization	n (if applicable)					•	7	(E				(1	F)			(G)				(H)			
THOMPSON	DOUGLAS *		6	7	7 5	5 7		4 (6 (0 7		3	9	0 7	7	0		•	7	6 2	2	7	1
TRAINING REP																							
THOMPSON BOARD SEC N/A	FRANCEN		5	3	9 7	7 0				0				(0	0			 5	3 9	9	7	0
THOMPSON KEYPUNCH N/A	WANDA		5	2	0 8	3 1				0				(0	0			5	2 (0	8	1
THORNTON ADMIN ASSISTANT N/A	STANLEY	1	1	0	3 :	2 1		7	5	0 0		2	4	0	3	0	+	1	2	0 :	2	2	4
THURMAN SERVICING REP N/A	CONNIE		9	8	0	0 1		7	9	4 ()	4	1	4	8	0		1	1	0 4	0	8	9



	_		_			_	_
FILE NUMBER:	0	0	0	-	1	4	9

ORGANIZATION NAME:		•
AUTO WORKERS AFL-CIO		
ENDING DATE OF PERIOD COVERED:	_ 	
12/31/2004		

	ore than \$10,000 in total disbursements ates.)	Gr (befo	ross ore t				Ī				Disbursements for Official	Other]
(B) Position (Enter employee's job title.)		othe	r de	duc			Ì	Allowance	es	Ì	Business	Disbursements	1			otal			Ì
(C) Name of Affiliated Organization	(if applicable)		(1	D)			\perp	(E)			(F)	(G)			(1	H)	_		╛
TIBBS ORGANIZER	ROSETTA *		8	1	9	9 3	3	474	4 2	2	11037	0		Ş	9 7	7	,	7 2	:
n/A																			
TINNIN BOOKKEEPER C N/A	LAURIB		5	3	7	4 2	2		()	0	0		(5 3	3 7	,	4 2	-
TOMASKO TRAINING REP N/A	BLIZABE		9	8	0	7 (6	7 5	2 (0	4240	0		1 (0 9	 8	3 :	 3	
TORLONE UTILITY REPAIR N/A	MICHAEL		4	7	5	1	1		(0	0	0		•	4 7	7 5	<u> </u>	1 1	
TORRES ORGANIZER N/A	MARIA		9	7	9	2	6	7 9	6 (0	9 4 0 8	0		1	1 :	5 2	2	9 4	-



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FILE NUMBER:	0	0	0	-	1	4	9

ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2004	

(B) Position (Enter employee's job title.)	B) Position (Enter employee's job title.) C) Name of Affiliated Organization (if applicable)		Gross Salary (before taxes and other deductions) (D)			Allowances (E)			s	Disbursements for Official Business (F)	Other Disbursements (G)	Tota (H)						
TRAFTON ATTORNBY N/A	CATHERI		9	5 :	2 3	3 2	7	5	2	2 0	6018	0	1	•	0	8	7	7 0
TRAMMELL TECH AID I	SHARON		2	8	0 ′	1 4				0	0	0			2	8 ()	1 4
TRENT SERVICING REP N/A	EDDIE		9	8	0 7	7 6	7	5	S C	0	4814	0		1	1	0 :	3	9 0
TRIMM MAINTENANCE N/A	ANTHONY		1	1	3 :	2 8				0	0	0			1	1	3	2 8
TROCKLEY SERVICING REP N/A	ROBERT *	1	2	8	0	7 2	7	7	' (2	8210	0		1	4	3	9	8 4

(246)+

FILE NUMBER:	0	0	0	-	1	4	9
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ORGANIZATION NAME: AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED: 12/31/2004	

(A) Name (List all employees who received from your organization and any after (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursaments fillates.) (if applicable)	Gros (before other o	ta	xes uct	s and		Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	s Tota					
TROUP CLERK TYPIST N/A	antoine	5	5 0) 5	5 5	7	0	0	0		5	0	5	5	5 7
TRULL TIME STUDY N/A	DANNY	Ş	8 6	3 (0 7	6	7940	12051	0	1	1	8	0	•	 -
TRUSS SECURITY GUARDS N/A	AUBREY		5 C) 7	7 3	6	5 2	0	0		5	0	7	•	8 8
TUOMEY TECH AID I N/A	VERONIC		5 2	2 (0 4	9	0	0	0		5	2	0) 4	4 9
TURNER STENOGRAPHER N/A	DELLA		2 2	2	7 4	9	0	7	0		2	2 2	7	· ;	5 6

246)+

ORGANIZATION NAME: AUTO WORKERS AFL-CIO		
ENDING DATE OF PERIOD COVERED: 12/31/2004		

(B) Position (Enter employee's job title.)			Gross Salary (before taxes and other deductions) (D)				Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
TURNER CLERK TYPIST	JEANEEN	4	+ 0	4	10	6	0	0	0	40406
TURNER SERVICING REP N/A	REUBEN *		 6 8	5 5	5 6	8	4031	2129	0	74728
TWISS SERVICING REP N/A	DANIEL		9 7	7 8	3 5	1	7980	4118	0	109949
TYLER STOCKROOM N/A	KENNETH		2 7	7 (0 2	6	0	0	o	27026
TYSON SECURITY GUARDS N/A	ROBERT		2 3	3 :	5 7	2	5 4	0	0	23626

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FILE NUMBER:	0	0	0	-	1	4	9

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.) (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization (if applicable)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
UNDERWOOD SHIRLEY * SERVICING REP N/A	96928	4602	9 4 5 4	0	110984
UNRUH KAREN CLERK TYPIST N/A	43595	0	0	0	43595
UPCHURCH BRENDA RETIREE REP N/A	98001	7 9 4 0	12830	0	118771
URAM JOHN SERVICING REP N/A	97926	7960	3906	0	109792
URBAN SANDRA SERVICING REP N/A	98001	7700	3 1 2 5	0	108826

(749)+

(B) Position (Enter employee's job title.)		Gross Salary (before taxes and									Disbursements for Official	Other							
		other	r deductions)				Allowa	an	ces	,	Business	Disbursements		٦	Γota	3			
(C) Name of Affiliated Organization	n (if applicable)		(C)) 				(8	Ξ)			(F)	(G)			(H)	_	3 6 1 0 5 9	
UTENDORF SERVICING REP N/A	САТНУ	[9 '	7 :	9 :	2 6		7	5	2	0	2920	0	1	0	8	3	6	6
VALDEZ MAINT LEADER N/A	SHARON		2	1	1 (0 7	· 				0	0	0		2	1	1	C	7
VAN BUREN TECH AID I N/A	LINDA		5	1	5	9 1					0	0	0		5	1	5	ç	9 1
VAN DE VELDE SERVICING REP N/A	ROBERT		9	7	8	5 1		7	5	6	0	4427	0	1	0	9	8	3	3 8
VAN HORN SERVICING REP N/A	KENNETH		9	7	7	7 6	3	7	5	8	0	8384	0	1	1	3	7	4	4 0



FILE NUMBER:	0	0	0	-	1	4	9
	_	_	_		-	•	•

(A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates.) (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization (if applicable)		Gross Salary (before taxes and other deductions) (D)					Allowances (E)			Disbursement for Official Business (F)		Other Disbursements (G)	Total							
VANDER HYDE BOARD SEC N/A	MARY	:	5	4 (6 9	0				0		0	0		5	5 4	- } 6	;	9	0
Vasquez Maintenance N/A	CLAUDIA		5	0 (0 0	7				0		0	0			5 () 0) 1	0	7
VASQUEZ KEYPUNCH N/A	YOLANDA		5	2	1 2	2 5				0		0	0			5 2	2 1		2	5
VAZQUEZ GRANT N/A	Luis	1	0	3	8 6	3		7	7 9	4	8 5 5	7	0		1 2	2 (0 2	2	1	4
VAZUR SERVICING REP N/A	KENNETH		9	7	7	7 6		7	5 8	0	409	1	0		1 (0 9	9 4	1	4	7

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

		Gross Salary (before taxes and other deductions) (D)						Allowance	for 6 Bus	Disbursements for Official Business		Other Disbursements			Tota (H)				
(C) Name of Affiliated Organization	n approaut)	-					+	(E)			(F)		(G)			(17,	<u> </u>		
VEGA	CAROLIN	1	5	3	9 () 6	•		C	\		5 3	0		5	3	9	5	9
INT'L OFF SEC							ı												
N/A																			
VENERI	PHILIP		5	3	4 (9 6	;					0	0		5	3	4	0	8
LEADER MAINT																			
n/a																			
VERNIER	PATRICK		7	5	2 :	3 4	†	3 3	0 0	, ,	2	8 4	0	<u> </u>	7	9	8	1	8
SECURITY																			
N/A																			
VINSON	CARYLON		9	7	8	5 1	1	7 9	8 () {	3 2	1 4	0	1	1	4	0	4	 - - 5
SERVICING REP																			
N/A																			
VOCINO	JUDY	<u> </u>	5	6	3	1 2	2					1 2	0		5	6	3	2	2 4
LEGAL SEC														1					
N/A																			

12/31/2004

(A) Name (List all employees who received m from your organization and any affil (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements liates.)	Gr (befo other	r de	axe	s a	and		Allowance (E)	s		Disbursements for Official Business (F)	Other Disbursements (G)			To (ŀ	tal 1)		
VUJEVICH SERVICING REP N/A	JOEL		9	8	0	0 '	1	794	1 (3 1 5 7	0	1	0	9	0	\$	8
WADE TECH AID I N/A	BILEEN		6	1	3	4 :	5		()	0	0		6	5 1	3	_	1 5
WAGNER CALL-IN N/A	MARIA		1	2	3	8	6		(P	0	0		1	1 2	2 3		3 6
WAINAINA ASSIST DEP HEAD N/A	DAN	1	0	1	2	5	7	756	6 (0	8387	0		1 1	1 7	7 2	! (0 4
WALDROP SERVICING RBP N/A	E. DWAY		9	7	8	5	1	7 4 7	7 :	2	3 3 5 9	0		1 (3 (3 6	i ;	8 2

ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	

12/31/2004

A) Name (List all employees who received more than \$10,000 in total disbursement from your organization and any affiliates.) B) Position (Enter employee's lob title.)	Gn (befo	oss ore t				T		_			Disburseme for Officia		Other								
(B) Position (Enter employee's job title.)		other	r de	duc			-	Allowa	nc	es	ļ	Business		Disbursements			Т	ota	!		
(C) Name of Affiliated Organization	(if applicable)		([)) 				(E)			(F)		(G)			((H)	_		
WALGRAEVE	CHERYL		5	2 (0 !	5 5	5				0	4 0	7	0		:	5	2	4	6	2
SECRETARY							١														1
N/A																					
WALKER	DENNIS		9	7	7	7 6	3	8 (0	0	0	870	9	0		1	1	4	4	8	5
SERVICING REP															ł						
N/A																					
WALKER	JAMES		9	7	8	5 1	1	8	0	0	0	460	6	0		1	1	0	4	5	7
SERVICING REP							1														
N/A																					
WALKER	RONALD		9	7	9	2 6	Б	7	5	4	0	407	7 9	0		1	0	9	5	4	5
SERVICING REP							١														
N/A							1														
WALLACE	THOMAS		9	7	9	2 6	6	7	9	6	0	96	7	0		1	1	5	5	8	3
SERVICING REP																					
N/A																					



ORGANIZATION NA	ME-	
AUTO WORK	CDQ AEL CL	\smallfrown
AUIU WURP	パニハン メトド・ハル	v

ENDING DATE OF PERIOD COVERED:

12/31/2004

(B) Position (Enter employee's job title.)	nore than \$10,000 in total disbursements illates.)	G (befoothe	r de	tax	BS 8	and	Al	lowa		s		r Ofi usin	ficia less	al	Other Disbursements				ota			
(C) Name of Affiliated Organization	(if applicable)			<u>, , , , , , , , , , , , , , , , , , , </u>				(E))			(F)		(G)	<u> </u>			(H)			
WALSH	THOMAS	1	0	6	2	9 2		7 5	5 4	1 0		5	1 4	4 7	0	}	1	1	8	9	7	9
ASSIST - MAJOR		ļ																				
n/a																						
WALTON	WILLIAM		9	8	1	5 1	<u> </u>	7 9		1 0		5	4	7 6	0		1	1	1	5	6	7
SERVICING REP																ł						
N/A																						
WARFIELD	DAWN		5	2	6	5 3				0				0	0	 		5	2	6	5	3
STENOGRAPHER		l					l				1					ł						
N/A																						
Washington	JOHN		9	7	8	5 1		8 (0 (0 6		4	9	2 2	2 0		1	1	0	7	7	9
SERVICING REP											ŀ											
N/A																						
WASHINGTON	NANCY L	 	5	3	6	0 7				0	\dagger			C				5	3	6	0	7
BOOKKEEPER BI															1							
N/A																						



	A) Name (List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates.) B) Position (Enter employee's job title.)	(befo		axe	s a	ind					Disbursements for Official	Other							
		othe			tior	ns)	١	Allowance	es		Business	Disbursements				otal			
(C) Name of Affiliated Organization	(if applicable)	ļ	(1	D) 			ightharpoons	(E)		_	(F)	(G)			(1	H)_	_		4
Wasylenko	LINDA		4	4	4	6 (5		(0	150	0		4	1 4	1 6	;	1 (,
STENOGRAPHER																			
N/A																			
WATKINS	PHILLIP		9	7	7	6 7	7	7 7	1 2	2	9111	0	1	1	4	4 5	_ ; ;	—- 9 ())
SERVICING REP																			ĺ
N/A																			
WEBER	WALTER		9	8	0	7 6	6	7 9	2 (0	2323	0		1 () (B 3	}	1 9	→
SERVICING REP																			
N/A								6											
WEBSTER	WILLIAM		9	7	8	5 '	1	7 9	8	0	7063	0		1	1 2	2 8	3	9 4	4
SERVICING REP							١												
N/A																			
MEEKTEA	THOMAS	1	1	2	8	6 4	4	7 5	2	0	12142	0	 	1 ;	3 2	2 5	5	2 (ō
ADMIN ASSISTANT																			
N/A																			
											L	1	1						



ORGANIZATION NAME: AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED: 12/31/2004	

(A) Name (List all employees who received m from your organization and any affiliate) (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements liates.)	Gro (befo other	re t de	axe	s a	and		Allowances (E)		Disbursements for Official Business (F)	Other Disbursements (G)	ments Total					
WEIR ASSIST MINOR N/A	JOSEPH	1	0	2	3	4 7	7	7 5 8 0	,	5893	0		1 1	5	5 8	3 :	2 0
WEIR BOOKKEEPER C N/A	LYNNE		4	3	9	7 (O)	3 4 0	0		4	. 4	1 3	3	1 0
WELLS MAINTENANCE N/A	вов		2	7	8	8 9	9	C)	0	0		2	? 7	7 8	3	8 9
WELLS BOARD SEC N/A	SUSAN		5	2	9	9	7	(כ	0	0		5	5 2	2 9	7	9 7
WERKING ADMIN ASSISTANT N/A	PHILLIP	1	1	9	3	0 :	2	7 5 2 (ס	6621	0		1 3	3 ;	3 4	1	4 3

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ORGANIZATION NAME: AUTO WORKERS AFL-CIO	 	
ENDING DATE OF PERIOD COVERED:	 	

(A) Name (List all employees who received from your organization and any at (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements fillates.)	Gr (befo	r de	axe	sa	ınd		Allowance (E)	s	Disbursements for Official Business (F)	Other Disbursements (G)	ments Total) (H)					
WERTHEIMER ATTORNEY N/A	WILLIAM		6	4	7 (0 3	3		0	2067	0	(6	6	7	7	0
WEST SECRETARY N/A	CARRIE		5	2	7	4 2	<u>}</u>		0	3 0	0		5	2	7	7	2
WEYGAND SERVICING REP N/A	ALBERT		9	9	6	9 8	3	7 9 8	3 0	19483	0	1 :	2	7	1	6	1
WEYGAND MAINTENANCE N/A	CHAD		1	6	2	5 3	3		0	C	O		1	6	2	5	3
WHITAKER SERVICING REP N/A	JOANNA		9	8	0	0 1	1	7 1 9) 4	3 2 8 0	0	1	0	8	4	7	7 5



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(A) Name (List all employees who roceived more to from your organization and any affiliates	han \$10,000 in total disbursements .)	(befo		axe	es a	ınd						ļ	Disbursements for Official	•	Other							
(B) Position (Enter employoe's Job title.)		othe			tio	ns)		Alle	owa		9 S		Business		Disbursements				ota	l		
(C) Name of Affiliated Organization (##	pplicable)		,	D)	·		\perp		(E)		_	(F)	4	(G)	_		(H)	_	_	
WHITE	PRANK	1	1	5	8	2 8	3		7 (3 4	4 5	5	6062	2	0	1	1 2	2 9	9 !	5	3	5
ADMIN ASSISTANT																						
N/A																						
WHITE	LONNIE *		7	3	4	7 9	1		4 (3 :	2 2	2	5114	1	0			B :	3 :	2	1	5
SERVICING REP							1					١										
N/A																						
WHITLEY	SHERRY		5	3	2	4 9	1	_			(0	(5	0	-	į	5	3 :	2	4	9
BOOKKEEPER C							\							ł								ļ
N/A																						
WHITMAN	MERRILL	1	2	6	3	2 2	2		7	5	0 (0	282	4	0		1	3	6	6	4	6
ATTORNEY																						
N/A													·	ļ								
WIANECKI	PAUL	<u> </u>	5	2	6	7 2	2				(0		0	0			5	2	6	7	2
TECH AID I																						
N/A																						



ORGANIZATION NAME:		
AUTO WORKERS	AFL-CIO	
ENDING DATE OF PERIOD	COVERED:	
12/31/2004		

SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received in from your organization and any aff (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	nore than \$10,000 in total disbursements illates.) (Il applicable)	Gr (befo		axe duc	s a	nd	Allowances (E)		Disbursements for Official Business (F)	Other Disbursements (G)			otal H)		
WIDEMAN SERVICING REP N/A	JAMES		9	7	8 !	5 1	798	0	26569	0	1 :	3 :	2 4		0 0
WIERBICKI MAINTENANCE N/A	MICHABL		5	8	3	7 4		0	3 2	0	;	5	8 4	_ (0 6
WILCOME MULTILITH OPER N/A	PATRICI		5	1	8	1 2		0	0	0	,	5	1 8	3	1 2
WILLIAMSON TRAINING REP N/A	LAWRENC		5	5	2	5 7	3 3 8	1	2823	0		6	1 4	1	6 1
WILLIAMS BOOKKEEPER BI N/A	ANGELA		5	2	6	6 4		0	0	0		5	2 (3	6 4

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ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2004	

(A) Name (List all employees who received minor your organization and any affit (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ore than \$10,000 in total disbursements liates.) (if applicable)	Gr (befo	r de	axe	18 8	and		Allowance: (E)	s	Disbursements for Official Business (F)	Other Disbursements (G)			Fota (H)			
WILLIAMS SECURITY GUARDS N/A	BRANDON		4	5	4	8	6	5	0	0	0		4	5	5	3	6
WILLIAMS SERVICING REP	CLARENC *		3	4	1	8	6	2 1 1	1	5 3 5	0		3	6	8	3	2
WILLIAMS DATA PROCESS N/A	EFFIE		5	4	7	2	4		0	0	0		5	4	7	2	4
WILLIAMS ASSIST MINOR N/A	HERMAN *		8	0	7	1	9	464	1 0	7017	0		9	2	3	7	6
WILLIAMS SERVICING REP N/A	LARRY		9	8	0	7	6	794	\$ 0	6663	0	1	1	2	6	7	9



ORGANIZATION NAME:

AUTO WORKERS AFL-CIO

ENDING DATE OF PERIOD COVERED:

12/31/2004

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oth				ns)					s	6			38			s						
 ļ			-		_		E)				(1	F)		_	(G)	1			(H)			_
	9	8	0	0	1	7	9	4	0		9	7	1 7	7	C		1	1	5	6	5	8
 	4	4	9	4	7				0				-	0	(,	-	4	4	9	4	7
	5	1	2	6	1				0			5	2	0	(7		5	1	7	8	_ 1
																ĺ						
						1 1																
	9	8	0	0	1	7) 4	1 0	1	0	4	0	1		寸	1	1	6	3	4	_ 2
																Ì						
	1 0	4	9	0	2	4	. 6	6 6	5 2		5	3	4	5		5	1	1	4	9	0	9
		9 5	(D) 9 8 4 4 5 1	9 8 0 4 4 9 5 1 2 9 8 0	(D) 9 8 0 0 4 4 9 4 5 1 2 6	other deductions) (D) 9 8 0 0 1 4 4 9 4 7 5 1 2 6 1 9 8 0 0 1	9 8 0 0 1 7 4 4 9 4 7 5 1 2 6 1	(D) (E) 98001 79 51261 98001 79	(D) (E) 98001 794 51261 98001 794	(D) (E) 98001 7940 44947	(D) (E) 98001 7940 1	(D) (E) (I) 98001 7940 9 51261 0 98001 7940 10	(D) (E) (F) 98001 7940 97 44947 0 51261 0 5	(E) (F) 98001 7940 971 44947 0 51261 0 52	(E) (F) (F) 98001 7940 9717 0 0 0 520 98001 7940 10401	(E) (F) (G) (G) (G) (G) (G) (G) (G) (G) (G) (G	(E) (F) (G) (G) (G) (G) (G) (G) (G) (G) (G) (G	(D) (E) (F) (G) (G) (G) (G) (G) (G) (G) (G) (G) (G	(D) (E) (F) (G) (G) (G) (G) (G) (G) (G) (G) (G) (G	(D) (E) (F) (G) (H) 98001 7940 9717 0 115 44947 0 0 0 0 44 51261 0 520 0 51 98001 7940 10401 0 116	(D) (E) (F) (G) (H) 98001 7940 9717 0 1156 44947 0 0 0 0 449 51261 0 520 0 517 98001 7940 10401 0 1163	(D) (E) (F) (G) (H) 98001 7940 9717 0 11565 44947 0 0 0 4494 51261 0 520 0 5178 98001 7940 10401 0 11634



(A) Name (List all employees who received mo from your organization and any affilial (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	re than \$10,000 in total disbursements stes.) (if applicable)	Gr (befo other	r de	ax	es : ctic	and		Allowance (E)	es		Disbursements for Official Business (F)	Other Disbursements (G)				ota H))		
WILLIS CLERK TYPIST N/A	SHONTEL		4	9	7	3	2			0	0	0		4	1 :	9 :	7	3	2
WILSON SERVICING REP N/A	ALLEN		9	7	8	5	1	791	 8	0	5 5 4 1	0	1	 i '	1	1 :	3	7	2
WILSON SERVICING REP N/A	CHARLIE		9	7	8	5	1	7 9	8	0	6386	0	1	l '	1	2	2	1	7
WILSON ACTUARIAL CLERK N/A	KATIE		5	2	2	4	7			0	0	0			5	2	2	4	7
WILSON SERVICING REP N/A	MEREDIT		9	7	9	2	6	7 9	6	0	5 1 6 5	0		1	1	1	0	5	1



(A) Name (List all employees who received from your organization and any set) (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements filliates.)	Gi (befo othe	r de	axe	3S 2	and		Ailowa (E		es		Disburser for Offic Busine (F)	lak	Other Disbursements (G)			Fota (H)			
WILSON SERVICING REP N/A	MICHABL		9	7	9	2	6	7 5	5	1	2	155	9 0	0	1	2	1	0	2	8
WILSON MAINT MANAGER N/A	RAY		9	0	1	7	3	6 (6	0	0	3 2	9 0	0	1	0	0	0	6	3
WINIARSKI BOARD SEC N/A	LAURA		5	4	7	8	3				0	7	8 8	3 0		5	5	5	7	1
WINIARSKI ADMIN ASSISTANT N/A	MARTIN	1	1	1	4	8	8	7	9	8	0	2 6	3 3	3 0	1	2	2	1	0	1
WINKLE SERVICING REP N/A	PHILIP		9	7	8	5	1	7	9	8	0	8 8	8 4	1 0	1	1	4	7	1	5



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FILE NUMBER:	0	0	0	-	1	4	9

ORGANIZATION NAME: AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED: 12/31/2004	

(A) Name (List all employees who received from your organization and any at (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	more than \$10,000 in total disbursements fillates.)	Gr (befo	r de	axe	es a	and		Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)				otal 1)		
WIRGAU KEYPUNCH OPER N/A	KIMBERL		5	0	5	7	3	0	0	0		5	5 C	5		7 3
WIRGAU CARPENTER N/A	NORMAN		6	1	5	8	8	0	0	0		ε	5 1	 5		3 8
WOJCIK ASSIST - MAJOR N/A	GILBERT	1	0	6	2	9	2	7 5 8 0	5638	0	1	1 1	1 9	9 5	,	1 0
WOLFENBARGER BOARD SECRETARY N/A	JANB		5	2	2	4	0	0	0	0			5 2	2 2	?	4 0
WOMACK ORGANIZER N/A	DOUGLAS		9	7	9	2	6	7960	10109	0	1	1 '	1 :	5 9)	9 5



SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name (List all employees who received from your organization and any (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	I more than \$10,000 in total disbursements affiliates.)	Gross Salary (before taxes and other deductions) (D)				and		Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)				otal H)		
wong Secretary N/A	Susan		5	1	5	3	2	0	4 5	0		5	5 1	5	5	7 7
WOODARD INT'L OFF SEC	BEVERLY		5	1	5	1	6	0	0	0		5	5 1		5	1 6
WOODARD SERVICING REP N/A	HARVEY		9	7	8	5	1	8000	5882	0	1	1	1 1	1 7	7	3 3
woods organizer n/a	FRANK		9	7	8	5	1	7980	4247	0	1	1	1 (0 0)	7 8
WOOD MAINTENANCE N/A	KENNETH		5	0	5	3	4	0	0	0		5	5 () (5	3 4



12/31/2004

ODG ANIZ	ATION NAME:	
	ATION RANGE.	
ALITA	MADREDO ACL AIA	
AIII()	WORKERS AFL-CIO	

ENDING DATE OF PERIOD COVERED:

12/31/2004

(A) Name (List all employees who receive from your organization and any (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization	ed more than \$10,000 in total disbursements y affiliates.) On (if applicable)	Gi (befo othe	ore t r de	ахе				Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)				otal		
WRIGHT AUDITOR N/A	ANGELA		9	7	8 5	5 1		7 9 8 0	9 4 8 2	0	1	1	1 :	5 3	3	1 3
WRIGHT LOSS WAGES N/A	CHARLES		1	0	9 1	1 7		0	0	0			1	0 9	9	1 7
WRIGHT STOCKROOM	FAYE		5	0	4 4	1 0		0	0	0			5	0 4	4	4 0
WURTZBL SERVICING REP N/A	KENT		9	7	7	7 6		8000	5 2 0 8	0		1	1	0 :	9	8 4
WYATT ADMIN ASSISTANT N/A	CHARLES *		5	3	1 :	8 9)	0	150	0			5	3	3	3 9



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ORGANIZ	PATION	MARKE.	
しれらんれに		NAME:	
ALITO	1 <i>N//</i> 1L		
7010	VV	ハヒハコ	AFL-CI

ENDING DATE OF PERIOD COVERED:

12/31/2004

(B) Position (Enter employee's job title.)	ore than \$10,000 in total disbursements lates.)	Gross Salary (before taxes and other deductions) (D)						Allowances		Disbursements for Official Business	Other Disbursements			ota				
(C) Name of Affiliated Organization	(и аррисавне)		- '				1	(E)			(F)	(G)			H)			_
WYATT INT'L OFF SEC	DENISE		5	4	8	5 9	'			0	0	0		5	4 1	8	5	9
N/A																		
WYATT ORGANIZER	OTEN		9	7	8	5 1		7 9	6	0	5 3 9 4	0	1	1	1 :	2	0	_ 5
N/A																		
WYKOWSKI MAINT MANAGER N/A	Wesley		9	0	0	23	3	7 5	4	0	4732	0	1	0	2	2	9	5
WYSE SERVICING REP N/A	LARRY		9	7	9	2 6	5	7 9	6	0	8470	0	1	1	4	3	5	6
YANCY SERVICING REP N/A	RITA		9	8	0	0 1	1	7 9	4	0	7535	0	1	1	3	4	7	6



ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
AUTO WORKERS AFE-CIO	
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ENDING DATE OF PERIOD COVERED: 12/31/2004

	more than \$10,000 in total disbursements fillates.)	(befo	ross ore (axe	s a	ind				Disbursements for Official	Other							
(B) Position (Enter employee's job title.)		othe		duc D)	tio	ns)	-	Allowances		Business	Disbursements				otal			
(C) Name of Affiliated Organization	(If applicable)		- 1				1	(E)		(F)	(G)			()	1)			
YOKICH	STEPHEN		6	1	9	4 3	3		0	8814	0		7	' (7	' '	5	7
ATTORNEY							Ì											
N/A																		
YOST	LINDA		5	0	2	0	1	· · · · · · · · · · · · · · · · · · ·	0	0	0		-5	5 () 2	2 (0	1
CLERK TYPIST							١											
N/A																		;
YOUNG	JANICE		9	8	0	7 (6	7 7 4	0	6492	0	1	1	1 2	2 3	3	0	_ 8
SERVICING REP							ļ											
N/A												İ						
YOUNG	JERRY	1	0	2	4	2	2	7 5 6	0	8638	0	1	1	 {	 3 6	 3	2	0
ASSIST MINOR																		
N/A								Ti.										
YOUNG	KONRAD		9	7	7	7	6	7 9 6	9	6506	0	1		1 2	2 2	 2	5	1
SERVICING REP																		
N/A																		



SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(B) Position (Enter employee's job title.)	Position (Enter employee's job little.) Name of Affiliated Organization (if applicable)		other ded			Gross Salary afore taxes and ner deductions) (D)				Allowances (E)		Disbursements for Official Business (F)		Other Disbursements (G)		Total (H)					
YOUNG SECURITY GUARD N/A	LORETTA		4	1	9	6	1	4 2		0	0		4	2	0	C	3				
YOUNG INT'L OFF SEC	PAULA		4	7	3	1	0	0		0	0		4	- <u>-</u>	3	1	0				
ZIEGLER SEC I (MAJ DEPT) N/A	GEORGIA		2	9	4	9	4	0		0	0		2	9	4	(9 4				
ZMRAZEK ORGANIZER N/A	THOMAS	i	9	7	8	5	1	7980		7949	0	1	1	3	7		3 0				
ZUCKSCHWERDT ASSIST - REGION N/A	DUANE	1	0	8	7	2	9	8000		4015	0	1	2	2 0	7	•	1 4				



12/31/2004

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(A) Name (List all employees who received more than \$10,000 in total disburs from your organization and any affiliates.) (B) Position (Enter employee's job title.) (C) Name of Affiliated Organization (If applicable)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
ZURAWSKI CHARLES SERVICING REP N/A	98001	7940	5287	0	111228
			: * * : *		

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ORGANIZATION NAME: AUTO WORKERS AFL-CIO	 •
ENDING DATE OF PERIOD COVERED: 12/31/2004	

SCHEDULE 11 - BENEFITS (continued)

Description (A)	To Whom Paid (B)	Amount (C)							
Legal Services Plans	Staff & Office Legal Serv			2			0	9	0
Health Club Dues	Individuals				5	5	0	2	3
Staff Physicals	Hosp/Clinics/Individuals				5	4	0	4	
Tax Preparation	Individuals			<u> </u>		2	1	9	1
Personal Enhancements Courses	Individuals and Courses					2	3	9	1
Retiree Annual Bonus	Retirees			6	0	8	0	1	2
Insurance - Employees	Insurance Carriers/Ind	3	1	8	3	5	5	6	
						-			
				_	_		_		
					_				
							_		
						<u> </u>			

(271)

ORGANIZATION NAME: AUTO WORKERS AFL-CIO	FILE NUMBER: 0 0 0 - 1	4 9
ENDING DATE OF PERIOD COVERED: 12/31/2004		

SCHEDULE 12 - CONTRIBUTIONS, GIFTS & GRANTS (continued)

Description (A)	Amount (B)							
Labor Organizations		1	1	1	0	5	0	0
								_
								
-								
	+				_			
	-					-		
		- 1-					-	
	\dashv	_						
	\dashv							

SCHEDULE 13 - OFFICE & ADMINISTRATIVE EXPENSE (continued)

D							
Description (A)				ount B)			
Meeting Expense	7	7	3	3	7	2	4
Membership Fees and Dues		1	6	3	5	1	1
Registrations			7	6	0	9	6
Rent	1	6	5	7	0	6	3
Services	5	4	3	9	0	8	7
Supplies		8	1	1	2	7	0
Telephone	1	2	2	6	2	2	6
Utilities	1	3	2	0	4	6	3
Insurance	4	4	2	7	6	3	7
Computer Maintenance		1	7	5	1	2	8
				_			
		•					
				-			

SCHEDULE 14 - OTHER RECEIPTS (continued)

Description (A)					ount B)	1	·	
Legal Settlements							2	8
Refunds				1	1	9	4	7
Retired Workers Income						1	6	9
Subscriptions						1	0	1
Escrow Funds Reverted to UAW			4	0	6	3	7	5
Insurance Proceeds		-		7	7	0	8	1
Donations			2	9	1	2	8	8
Stale Dated Checks Written Off			2	3	6	6	1	2
Rebates - Household					3	5	3	6
Internet Usage Fees				2	6	5	0	0
Cafeteria Plan Proceeds							1	1
Salaries, Travel & Fringe Reimb	2	1	0	1	9	7	5	9
Refunds and Reimbursements:	1							0
Education & Publicity			1	7	2	2	4	9
Advertising					3	1	9	3
Strike Benefits			5	0	1	3	5	2
Delivery				4	0	8	4	8
Equipment Rental					2	0	7	2

ORGANIZATION NAME:

AUTO WORKERS AFL-CIO

ENDING DATE OF PERIOD COVERED: 12/31/2004

SCHEDULE 14 – OTHER RECEIPTS (continued)

Description (A)				ount B)	Ì		
Fees			4	3	9	1	8
Employee Benefit Plans	5	2	1	9	0	4	4
Furniture and Equipment				3	5	4	3
Health Club Fees				2	4	6	1
Legal Fees			1	6	1	2	8
Maintenance & Repair			_	2	8	3	9
Maintenance Bldg Supplies						3	3
Staff Physicals			2	2	8	4	6
Meeting Expense		2	1	4	6	3	6
Membership Fees					4	2	5
Moving Expense					3	0	2
Registrations			1	0	8	0	9
Rent			5	9	8	0	7
Resale Supplies						7	2
Services		1	3	0	5	4	1
First Contract Expense		-		2	4	8	7
Supplies				1	9	2	1
Taxes	1	4	0	8	3	9	4

ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2004	

SCHEDULE 14 – OTHER RECEIPTS (continued)

Description (A)					ount B)	:		
Telephone					7	1	5	3
Cable and Internet Access					2	5	3	3
Utilities				2	6	1	4	3
Insurance - Employees		5	9	4	8	1	2	2
Insurance - Other			2	2	7	4	0	0
L. A. Retirees Income				4	9	3	8	6
	_	_						
								
		_						
						•	_	
								

FILE NUMBER: 0 0 0 - 1 4 9

	<u> </u>
ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2004	

FILE NUMBER: 0 0 0 - 1 4 9

the books, records and accounts of the International Union, UAW, maintained by its Accounting Department. The Attachment on Subsidiary Organizations (Item 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	27017200	<u> </u>
The attached LM-2, with accompanying schedules and attachments, was prepared by the firm of Clarence H. Johnson, P.C., C.P.A.'s, based the books, records and accounts of the International Union, UAW, maintained by its Accounting Department. The Attachment on Subsidiary Organizations (Item 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 of	75. AD	DITIONAL INFORMATION
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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 of		The attached LM-2, with accompanying schedules and attachments, was prepared by the firm of Clarence H. Johnson, P.C., C.P.A.'s, based or the books, records and accounts of the International Union, UAW, maintained by its Accounting Department. The Attachment on Subsidiary Organizations (Item 10) was prepared by legal counsel to the International Union, based on information supplied by those organizations.
		professional opinion(s), this LM-2, and the information it contains, is true, correct and complete. Neither of the signatories has knowledge or an

Form LM-2 (Revised 2000)

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ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
7010 WORKERON E 010	
ENDING DATE OF PERIOD COVERED:	
12/31/2004	

75. ADDITIONAL INFORMATION(continued)

These figures include refunds, reimbursements and exchanges which are reported as receipts and disbursements. This method of repo Department of Labor requirement. Generally Accepted Accounting Principles allow these refunds, reimbursements and exchanges to be 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, 2004 reflect those more accurate figures. The schedules below will receipt Form LM-2 total receipts and total disbursements to the audited financial statements. Item 55 - Total Receipts \$325,667,757 Less: Escrow Payments (Netted with Receipts) \$3,790,901 Sale of Fixed Assets - (Total Proceeds on LM-2 including Gains) 725,080 Loan Repayments 1,542,949 Advance Write-Off - (Netted with Miscellaneous Income) 5,829 Retiree Council Income 49,386 Exchange Receipts 10,673,529 Salaries, Travel and Fringe Reimbursements 21,019,759 Reimbursements and Refunds (See Schedule 14 Line 10 Attachment) 14,071,271 Loss in UBG, Inc. for Year Ended 12/31/04 5907,012 Loss in UBG, Inc. for Year Ended 12/31/04 1,981,033 Total Subtractions 54,366,749 \$271,301,008 Add: Gain or (Loss) on Sales of Fixed Assets: Stocks \$1,687 Union Building Corporation Property 295,547 Total Additions 297,234	ber	Item 55 - Total Receipts:		
Less: Escrow Payments (Netted with Receipts) Sale of Fixed Assets - (Total Proceeds on LM-2 including Gains) Loan Repayments Advance Write-Off - (Netted with Miscellaneous Income) Exchange Receipts Salaries, Travel and Fringe Reimbursements Reimbursements and Refunds (See Schedule 14 Line 10 Attachment) Loss in UBG, Inc. for Year Ended 12/31/04 Loss in UBG, Inc. for Year Ended 12/31/04 Total Subtractions Add: Gain or (Loss) on Sales of Fixed Assets: Stocks Union Building Corporation Property Total Additions \$ 3,790,901 \$ 3,790,901 \$ 725,080 1,542,949 49,386 5,829 49,386 Exchange Receipts 10,673,529 21,019,759 2		Department of Labor requirement. Generally Accepte with the respective disbursement, therefore showing statements of the UAW International Union as of December 2015.	ed Accounting Prince lower and more accember 31, 2004 re	siples allow these refunds, reimbursements and exchanges to be ne- curate receipt and disbursement figures. The audited financial flect those more accurate figures. The schedules below will reconcil
Escrow Payments (Netted with Receipts) Sale of Fixed Assets - (Total Proceeds on LM-2 including Gains) Loan Repayments Advance Write-Off - (Netted with Miscellaneous Income) Retiree Council Income Exchange Receipts Salaries, Travel and Fringe Reimbursements Reimbursements and Refunds (See Schedule 14 Line 10 Attachment) Loss in UBG, Inc. for Year Ended 12/31/04 Loss in UBE, Inc. for Year Ended 12/31/04 Total Subtractions Salaries, Travel and Fringe Reimbursements Reimbursements and Refunds (See Schedule 14 Line 10 Attachment) Loss in UBG, Inc. for Year Ended 12/31/04 Total Subtractions 54,366,749 \$ 271,301,008 Add: Gain or (Loss) on Sales of Fixed Assets: Stocks Union Building Corporation Property 295,547 Total Additions		Item 55 - Total Receipts		\$ 325,667,757
Sale of Fixed Assets - (Total Proceeds on LM-2 including Gains) Loan Repayments Advance Write-Off - (Netted with Miscellaneous Income) Retiree Council Income Exchange Receipts Salaries, Travel and Fringe Reimbursements Reimbursements and Refunds (See Schedule 14 Line 10 Attachment) Loss in UBG, Inc. for Year Ended 12/31/04 Loss in UBE, Inc. for Year Ended 12/31/04 Total Subtractions Add: Gain or (Loss) on Sales of Fixed Assets: Stocks Union Building Corporation Property Total Additions 725,080 725,080 1,542,949 4,386 4,386 21,019,759 821,019,759 821,019,759 821,019,759 821,019,759 821,019,759 8271,301,008		Less:		
(Total Proceeds on LM-2 including Gains) Loan Repayments Advance Write-Off - (Netted with Miscellaneous Income) Retiree Council Income Exchange Receipts Salaries, Travel and Fringe Reimbursements Reimbursements and Refunds (See Schedule 14 Line 10 Attachment) Loss in UBG, Inc. for Year Ended 12/31/04 Loss in UBE, Inc. for Year Ended 12/31/04 Total Subtractions Add: Gain or (Loss) on Sales of Fixed Assets: Stocks Union Building Corporation Property Total Additions 725,080 1,542,949 4,949 4,9386 21,019,759 22,1019,759 23,019,759 24,366,749 271,301,008			\$ 3,790,901	
Loan Repayments Advance Write-Off - (Netted with Miscellaneous Income) Retiree Council Income Exchange Receipts Salaries, Travel and Fringe Reimbursements Reimbursements and Refunds (See Schedule 14 Line 10 Attachment) Loss in UBG, Inc. for Year Ended 12/31/04 Loss in UBE, Inc. for Year Ended 12/31/04 Loss in UBE, Inc. for Year Ended 12/31/04 Total Subtractions Add: Gain or (Loss) on Sales of Fixed Assets: Stocks Union Building Corporation Property Total Additions 1,542,949 4,9386 10,673,529 21,019,759 14,071,271 507,012 15,070,12 1981,033 54,366,749 \$ 271,301,008			725 080	1
Advance Write-Off - (Netted with Miscellaneous Income) Retiree Council Income Exchange Receipts Salaries, Travel and Fringe Reimbursements Reimbursements and Refunds (See Schedule 14 Line 10 Attachment) Loss in UBG, Inc. for Year Ended 12/31/04 Loss in UBE, Inc. for Year Ended 12/31/04 Total Subtractions Add: Gain or (Loss) on Sales of Fixed Assets: Stocks Union Building Corporation Property Total Additions 5,829 4,9386 10,673,529 21,019,759 21,019,759 14,071,271 507,012 1,981,033 54,366,749 \$ 271,301,008		, ·	•	
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Retiree Council Income Exchange Receipts Salaries, Travel and Fringe Reimbursements Reimbursements and Refunds (See Schedule 14 Line 10 Attachment) Loss in UBG, Inc. for Year Ended 12/31/04 Loss in UBE, Inc. for Year Ended 12/31/04 Total Subtractions Add: Gain or (Loss) on Sales of Fixed Assets: Stocks Union Building Corporation Property Total Additions 49,386 10,673,529 21,019,759 14,071,271 507,012 1,981,033 54,366,749 \$ 271,301,008			5,829	
Exchange Receipts Salaries, Travel and Fringe Reimbursements Reimbursements and Refunds (See Schedule 14 Line 10 Attachment) Loss in UBG, Inc. for Year Ended 12/31/04 Loss in UBE, Inc. for Year Ended 12/31/04 Total Subtractions Add: Gain or (Loss) on Sales of Fixed Assets: Stocks Union Building Corporation Property Total Additions 10,673,529 21,019,759 21,001,759 14,071,271 507,012 1,981,033 54,366,749 \$ 271,301,008		l	· · · · · · · · · · · · · · · · · · ·	
Salaries, Travel and Fringe Reimbursements Reimbursements and Refunds (See Schedule 14 Line 10 Attachment) Loss in UBG, Inc. for Year Ended 12/31/04 Loss in UBE, Inc. for Year Ended 12/31/04 Total Subtractions Total Subtractions 54,366,749 \$ 271,301,008 Add: Gain or (Loss) on Sales of Fixed Assets: Stocks Union Building Corporation Property Total Additions 21,019,759 14,071,271 507,012 1,981,033 54,366,749 \$ 271,301,008		Exchange Receipts	•	
Reimbursements and Refunds (See Schedule 14 Line 10 Attachment) Loss in UBG, Inc. for Year Ended 12/31/04 Loss in UBE, Inc. for Year Ended 12/31/04 Total Subtractions Total Subtractions 54,366,749 \$ 271,301,008 Add: Gain or (Loss) on Sales of Fixed Assets: Stocks Union Building Corporation Property Total Additions 297,234				
Loss in UBG, Inc. for Year Ended 12/31/04 Loss in UBE, Inc. for Year Ended 12/31/04 Total Subtractions Total Subtractions 54,366,749 \$ 271,301,008 Add: Gain or (Loss) on Sales of Fixed Assets: Stocks Union Building Corporation Property Total Additions 507,012 1,981,033 54,366,749 \$ 271,301,008 \$ 1,687 295,547			-	
Loss in UBE, Inc. for Year Ended 12/31/04 Total Subtractions 54,366,749 \$ 271,301,008 Add: Gain or (Loss) on Sales of Fixed Assets: Stocks Union Building Corporation Property Total Additions 1,981,033 54,366,749 \$ 271,301,008 \$ 1,687 295,547 Total Additions			14,071,271	
Total Subtractions 54,366,749 \$ 271,301,008 Add: Gain or (Loss) on Sales of Fixed Assets: Stocks Union Building Corporation Property Total Additions 54,366,749 \$ 271,301,008 \$ 1,687 295,547		<u>-</u>	· ·	
Add: Gain or (Loss) on Sales of Fixed Assets: Stocks Union Building Corporation Property Total Additions \$ 271,301,008 \$ 1,687 295,547 295,547		Loss in UBE, Inc. for Year Ended 12/31/04	1,981,033	
Add: Gain or (Loss) on Sales of Fixed Assets: Stocks \$ 1,687 Union Building Corporation Property 295,547 Total Additions 297,234		Total Subtractions		54,366,749
Gain or (Loss) on Sales of Fixed Assets: Stocks \$ 1,687 Union Building Corporation Property 295,547 Total Additions 297,234				\$ 271,301,008
Stocks \$ 1,687 Union Building Corporation Property 295,547 Total Additions 297,234				
Union Building Corporation Property 295,547 Total Additions 297,234		, , ,		
Total Additions 297,234			• • • • • • • • • • • • • • • • • • • •	
		Union Building Corporation Property	295,547	
		Total Additions		297,234
TOTAL FUND RECEIPTS PER AUDIT REPORT \$ 271,598,242		TOTAL FUND RECEIPTS PER AUDIT REPORT		\$ 271,598,242

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(27**8**)+

75. ADDITIONAL INFORMATION (continued)					
Item Number					٦
74	Item 74 - Total Disbursements:				
	These figures include refunds, reimbursements and exchanges which are reported as receipts and disbursements. This method of reporting is 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, 2004 reflect those more accurate figures. The schedules below will reconcile the Form LM-2 total receipts and total disbursements to the audited financial statements.				1
	Item 74 - Total Disbursements			\$ 322,135,858	ł
ł i	Less:				l
	Purchases of Fixed Assets and Investments	\$	49,980,640		
	Loans Made	•	3,464,534		1
i 1	Repayments of Loans		213,333		ſ
1	Escrow Disbursements		2.0,000		1
	(Netted with Escrow Receipts)		3,790,901		1
1	Exchange Disbursements		-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		ı
ļ	(Netted with Exchange Receipts)		10,418,411		ł
1 1	Retiree Council Disbursements		49,230		ł
	Salaries, Travel and Fringe Reimbursements		21,019,759		ı
J ,	Reimbursements and Refunds		,,		Ţ
	(See Schedule 14 Line 10 attachment)		14,071,271		
l l	Disbursements included on Wage Schedule and on				
ł	Loan Receivable Schedule as Advance Amounts and				1
	included as disbursements elsewhere		110,623		
	Total Subtractions	_		103,118,702	ł
l l					l
}				\$ 219,017,156	l
	Add:			V = 15,5 11,100	١
	Payroll Deductions Increase	\$	40,604		l
1	Change in Chargeback Receivables	•	1,314,258		ſ
ļ	Assets Purchased and Expensed -		1,011,000		1
	Furniture and Equipment		616,476	i	l
]	Total Additions	_		1,971,338	
<u> </u>	TOTAL FUND DISBURSEMENTS PER AUDIT REPORT			\$ 220,988,494	

FILE NUMBER: 0 0 0 - 1 4 9

75. ADDITIONAL INFORMATION (continued)

Item Number 10

ATTACHMENT

Subsidiary Organizations

Item 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. Effective January 1, 2003, operated by UBE, Inc., see below. All real assets held by the Union Building Corp., see below.

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. EIN No. 38-0679801. 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.

- Grants Health & Safety
 - 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: Dr. Franklin E. Mirer, Director, Health & Safety Department

Grant No. 5 U45 ES06180-12, Fiscal Year 9/01/03 through 8/31/04 Award \$775,918.00**

Grant No. 5 U45 ES06180-12S1, Fiscal Year 9/01/03 through 8/31/04 Award \$155,000.00**

Grant No. 5 U45 ES06180-13, Fiscal Year 9/01/04 through 8/31/05 Award \$799,195.00

EIN No. 38-2967597

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75. ADDITIONAL INFORMATION (continued)

Item Number 10

 b) O.S.H.A. - Susan Harwood Training Grant Program c/o International Union, UAW Institutional Competency Building 8000 E. Jefferson Avenue Detroit, MI 48214-3963
 Contact: Dr. Franklin F. Mirer, Director, Health & Sankard

Contact: Dr. Franklin E. Mirer, Director, Health & Safety Department
Grant No. T-46EOHT0800, Fiscal Year 10/01/03 through 9/30/04, Award \$230,250.00**
Grant No. T-46EOHT0800, Fiscal Year 10/01/04 through 9/30/05, Award \$230,250.00
EIN No. 91-2148129

c) Eastern Michigan University OSHA Institute
 c/o International Union, UAW
 8000 E. Jefferson Ave
 Detroit, MI 48214-3963
 Contact: Dr. Franklin E. Mirer, Director, Hea

Contact: Dr. Franklin E. Mirer, Director, Health & Safety Department Fiscal Year 10/01/03 through 9/30/04, contractual Fiscal Year 10/01/04 through 9/30/05, contractual EIN No. 91-2162488

 d) Michigan Health & Social Security Research Institute, Inc. 8000 E. Jefferson Ave Detroit, Michigan 48214-3963

Contact: Charles Gayney, Director Fiscal Years 7/1/03 through 6/30/04 Fiscal Years 7/1/04 through 6/30/05 EIN No. 38-1781250

EIN NO. 38-1781250

e) CET Grant, Michigan Department of Labor & Economic Development c/o International Union, UAW
Health & Safety Education for Joint Committees in Small Facilities
8000 E. Jefferson Ave
Detroit, MI 48214-3963
Contact Dr. Franklin E. Mirer, Director, Health & Safety Department
Grant No. BSR-04-21, Fiscal Year 10/01/03 through 9/30/04, Award \$50,000.00
Grant No. BSR-05-15, Fiscal Year 10/01/04 through 9/30/05, Award \$55,000.00
EIN No. 38-3161896



75. ADDITIONAL INFORMATION (continued)

Item Number

12/31/2004

- 3) Grants Other
 - a) State of Missouri Divisions of Workforce Development Liaison services between organized Labor groups and WIA Program providers funded by WIA Title 1-B awarded to Region 5 Contact: Philip Tan, Sr. Director UAW Labor Employment and Training Corp. (LETC) Grant No. 99-23-46-03 modification 1, Grant period 7/01/03 through 6/30/04, Award \$200,000.00 Grant No. 99-23-46-03 modification 2, Grant period 7/01/04 through 6/30/05, Award \$200,000.00 EIN No. 63-1811543
 - b) New York State Department of Labor, International Union United Automobile, Aerospace, and Agricultural Implement Workers Region 9 New York Training Initiatives Grant No. M010004, Fiscal Year 4/01/02 through 9/30/04, Award \$400,000.00 Contact: Sam Williams, Director, UAW New York State CAP Council, Region 9 EIN No. 04-3728231
- 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. EIN No. 38-6303352
- 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. EIN No. 38-6077549
- 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. EIN No. 38-6111612

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ORGANIZATION NAME: AUTO WORKERS AFL-CIO	FILE NUMBER: 0 0 -	14
ENDING DATE OF PERIOD COVERED:		

75. ADDITIONAL INFORMATION (continued)

Item Number 10

12/31/2004

AU1

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. Operated a single radio station, programming source (d/b/a/ "i.e., america") and related broadcasting properties, including licenses. Ceased operations at the end of 2004. CPA Audit Report for year ending December 31, 2004, is filed with this LM-2. EIN No. 59-3372916

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 year ending December 31, 2004, is filed with this LM-2. EIN No. 38-3456104

8) UBE, Inc.*

A for-profit Michigan Corporation was formed November 26, 2002, to operate the Walter and May Ruether UAW Family Education Center effective January 1, 2003. Maintains its own accounts, and files own Form 1120, as a taxable corporation. CPA Audit Report for year ending December 31, 2004, is filed with this LM-2. EIN No. 06-1663169

ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2004	

75. AD	DITIONAL INFORMATION	ON (continued)
Item Number	[
13	Acquired or Disposed Property:	
	Property reverted to UAW by constitution	
1	Centralia, IN (Local 1766)	44,630
	Delphi, IN (Local 914)	40,000
	Philadelphia, PA (Local 813)	226,915
	Philadelphia, PA (Local 757)	30,851
	Albion, MI (Local 474)	15,917
	Trade In of 1995 Chevy Van which was fi	ully depreciated. The cost was \$23,448.
1	Donated property was offered for bid sal depreciated to zero and no cost records	le; no bids were received and property was donated to the following organization. The properties were were maintained.
	North Riverdale Lutheran Church	Nokia 15" monitor, keyboard and mouse
	St. Vincent DePaul	3 Drawer Desk
	1	2 Drawer Side Table
		Wood Cabinet
		Black Vinyl Chair
	The following items were scrapped.	
	107th Congressional Directories	
	107th Roll Call Books	
İ	107th Roll Call Books - Spanish	
	A UAW Action Program Books	
	5 Tables	
ļ	2 Printers	
	Compaq Deskpro EP 450	
	2 Compaq Desktop Computers	
	Dell Laptop	
	HP Printer 3150	
	PC computer	
1	Computer Server	
	5" TV Monitor	
]	1 2 Dioterran	

2 Pictures

2 Black Vinyl Chairs

ORGANIZATION NAME: AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED: 12/31/2004	

FILE NUMBER: 0 0 0 - 1 4 9

75. ADDITIONAL INFORMATION (continued)		
Item Number	Loss or shortage of funds or property:	
15		
	International Union - Water damage to 1st floor ceilings from 2nd floor toilet. July 2004. Claim made, no settlement, claim closed.	
	International Union - Water damage from storm, roof leaked. September 2004. Claim made, no settlement, claim closed.	
	International Union - Air Conditioning Unit destroyed in storm. June 2004. Claim made, \$11,324 received, claim closed.	
	International Union - Laptop and palm pilot stolen from employees home. July 2004. Claim made, \$1,348 received, claim closed.	
	Stockroom employee discharged for misappropriation of derical supplies, which were immediately recovered. Discharge being arbitrated with OPEIU.	
	Payroll checks sent to Canadian employees, by overnight express, never arrived, July 2004. Banks where checks originally presented, honored checks, but Bank of Montreal, on which checks drawn, found forgery. After once debiting our account, the Bank of Montreal promptly issued offsetting credit, and then refused further attempts to debit our account for these checks. RCMP investigated, and filed criminal charges.	

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ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31 <u>/2</u> 004	

FILE NUMBER: 0 0 0 - 1 4 9

75. ADDITIONAL INFORMATION (continued)

Item Number 24

Contingent Liabilities:

1. UAW v. Dorsey, UBN, et al., No. 97-8442-CB, on Appeal 248412. The UAW brought a suit against its former business partners in the United Broadcasting 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 the result of the financial difficulties experienced by UBN. Following trial, the jury entered judgment in favor of the UAW, and found no liability on the part of the UAW. Counter plaintiffs motion for a new trial was denied. Appeals will not, in the opinion of counsel, result in a finding that the UAW is liable.

Files: Clerk, Michigan Court of Appeals, First Federal Building, Suite 900, 1001 Woodward Avenue, Detroit, MI 48226-1970.

2. 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 relatives and friends of individual defendants. Complaint filed August 7, 2000. A motion for summary judgment, seeking dismissal if the case on statute of limitation grounds, was granted by the District Court. The Plaintiffs have appealed to the U.S. Court of Appeals for the Sixth Circuit. 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. Court of Appeals - Sixth Circuit, Potter Stewart U.S. Courthouse, Room 532, 100 East Fifth St., Cincinnati, OH

1060-

DRGANIZATION NAME:	FILE NUMBER:
AUTO WORKERS AFL-CIO	
NDING DATE OF PERIOD COVERED:	
12/21/2004	

000-149

Form LM-2 (Revis	

ORGANIZATION NAME: AUTO WORKERS AFL-CIO ENDING DATE OF PERIOD COVERED: 12/31/2004

75. ADI	DITIONAL INFORMATION (col	ntinued)				
Item Number					•	•	
CR	Cash Reconciliation Schedule:						:
1	Cash - January 1, 2004		\$ ((2,846,919)			
	Receipts - Line 55			25,667,757			
	Less - Disbursements Line 74			54,552,147 22,135,858			
			<u>-</u>	684,980			
	Adjustments:		•	• • • • • • • • • • • • • • • • • • • •			
i l	Disbursements on Wage Schedule and on Loan						
	Receivable Schedule as Advance Amounts Retirees Council Receipts over Disbursements	\$ 110,623 (156)					
	•			110,467			
	Cash - December 31, 2004 Statement A 25B		<u></u>	795,447			
	50011 50001100. 51, 2004 5101011011111255		===	======			
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Form LM-2 (Revised 2000)

ORGANIZATION NAME: AUTO WORKERS AFL-CIO	
NDING DATE OF PERIOD COVERED:	

FILE NUMBER: 0 0 0 - 1 4 9

m Number		
11	NOTE:	See generally, detail to Item 12, infra. For Items 11 and 12, and otherwise, we adhere to the directions, methodology and format specified by the Secretary, and agreed by the UAW, in the course of the International Compliance Audit (I-CAP), which concluded late in 1994, with a closing letter dated on or about May 1, 1995. Neither the Statute nor the relevant Regulations have since been amended.
	; ;	

ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2004	

FILE NUMBER: 0 0 0 - 1 4 9

75. ADDITIONAL INFORMATION (continued)

Repayments Received during Period Other Than Cash:

UBN, Inc. receivable written off as uncollectible \$1,809.11.

Total Travel Services receivable written off as uncollectible \$4,020.17.

UBN, Inc. Note Receivable, \$62,000, was deemed worthless, due to closing of the corporation as of February 2004 and subsequent liquidation of the assets.

Form LM-2 (Revised 2000)

12 - I75



FILE NUMBER: 0 0 0 - 1 4 9

ORGANIZATION NAME:	
AUTO WORKERS AFL-CIO	
ENDING DATE OF PERIOD COVERED:	
12/31/2004	

	DITIONAL INFORMATION (conti	nued)	
Item Number 26	Line 26, 27 and 33:		
	Lines 26, 27 and 33 start of reporting period amounts are	different than the ending amou	int on the 2003 LM-2.
	The amount shown on line 26 represent accounts receive	able which were listed as loans	receivable in 2003.
	The amounts on line 27 are loans receivable as detailed	on schedule 1.	
	The amount on line 33 represents accounts payable as o		
		End of Period	Start of Period
		As Reported on 2003 LM-2	As Reported on 2004 LM-2
	Line 26 - Accounts Receivable	\$ 0	\$ 4,735,100
	Line 27 - Loans Receivable	15,056,381	10,447,794
	Line 33 - Accounts Payable	(940,252)	(1,066,765)
	Net Amount Reported on above lines	\$ 14,116,129	\$ 14,116,129
l	I and the second	55522222CCC	=========

ORGANIZATION NAME: AUTO WORKERS AFL-CIO	FILE
NDING DATE OF PERIOD COVERED: 12/31/2004	

NUMBER: 0 0 0 - 1 4 9

75 ADDITIONAL INFORMATION (continued)

	DITIONAL INFORMATION (continued)
Item Number	Schedule 10 - Disbursements of Employees:
	• in Column (D) - Gross Salary includes amounts for cash out of accrued vacation entitlements paid upon retirement.
Form LM-2 (Revt	sed 2000) 14 _ 175

--00O00--FINANCIAL STATEMENTS

UNITED BROADCASTING NETWORK, INC.

D/B/A I.E. AMERICA

DECEMBER 31, 2004 --00O00--





CLARENCE H. JOHNSON, P.C.

CERTIFIED FUBLIC ACCOUNTANTS
TELEPHONE (248) 398-4040
FAX (248) 544-8414
26212 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 4, 2005

United Broadcasting Network, Inc. d/b/a i.e.america 8000 E. Jefferson Avenue Detroit, Michigan 48214

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, 2004, and the related statements of operations and cash flows 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 auditing standards generally accepted in the United States of America. 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.

As described in the notes to the financial statements, the Company has ceased operations as of February 28, 2004. As a result, the Company changed its basis of accounting from the going concern basis to the liquidation basis.

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, 2004, and the results of its operations and its cash flows for the six months and year then ended in conformity with U.S. generally accepted accounting principles.

Very truly yours.

CERTIFIED PUBLIC ACCOUNTANTS

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UNITED BROADCASTING NETWOR INC. D/B/A I.E. AMERICA BALANCE SHEET AS OF DECEMBER 31, 2004

ASSETS

	<u>\$</u>	454		
			\$	454
			-	
AND STOCKHOLD	ERS' E	QUITY		
	\$	1,500,983		
		5,000,000		
• •	-			
(506,89	<u>1)</u>			
		(6,500,529)		
	-		<u>\$</u>	454
ERS' EQUITY			\$	454
	<u>AND STOCKHOLD</u> \$ (5,993,63	\$ (5,993,638) (506,891)	\$ 1,500,983 5,000,000 \$ (5,993,638) (506,891) (6,500,529)	\$ 1,500,983 5,000,000 \$ (5,993,638) (506,891) (6,500,529)

^{*}See accompanying notes and accountants' report.



NITED BROADCASTING NETWORK, C. D/B/A I.E. AMERICA STATEMENT OF OPERATIONS

	REVENUES:		SIX MONTHS ENDED UNE 30, 2004		SIX MONTHS ENDED DEC. 31, 2004		YEAR ENDED DEC. 31, 2004	
	SALES:							
	Spot Sales	\$	3,181	\$	•	\$	3,181	
ı	Miscellaneous	•	950	•	8,314	•	9,264	
	Wilsoellaneous		<u> </u>					
	TOTAL SALES	\$	4,131	<u>\$</u>	8,314	<u>\$</u> _	12,445	
	COST OF SALES:							
	Shipping	S	335	\$	-	\$	335	
	Commissions	•	360	•	-	•	360	
			300				000	
	Contract Talent and		2 005				3,695	
	Outside Services		3,695				3,093	
	TOTAL COST OF SALES	<u>\$</u>	4,390	<u>\$</u>	-	\$_	4,390	
		_	(250)	_	0.044	_	0.055	
	TOTAL REVENUES	<u>\$</u>	(259)	<u>\$</u>	<u>8,314</u>	\$	8,055	
ı								
	OPERATING EXPENSE:	_		_		_		
	Salaries and Wages	\$	206,045	\$	<u>.</u>	\$	206,045	
ı	Payroll Taxes and Benefits		60,090		5,034		65,124	
ı	Office Supplies		766		-		766	
	Postage and Shipping		657		-		657	
İ	Insurance		1,572		3,991		5,563	
ı	Fees and Expenses		1,159		1,089		2,248	
	Satellite Channels		6,825		.,		6,825	
i					694		12,014	
ı	Maintenance		11,320		518		120,431	
i	Professional Fees		119,913					
Ì	Rent		37,698		12,525		50,223	
ı	Taxes		-		98		98	
ı	Travel		2,600		-		2,600	
ı	Utilities		42,633		3,558		46,191	
ı	Write off of Uncollectible Accounts		7,524				7,524	
ł			-					
İ	TOTAL OPERATING EXPENSE	\$	498,802	\$	27 <u>,507</u>	\$_	526,309	
I							· · ·	
ı	INCOME (LOSS) FROM OPERATIONS	\$	(499,061)	\$	(19,193)	\$	<u>(518,254)</u>	
i	moome (2000) i nom of Element	<u></u>	1,00,00					
	OTHER INCOME (EXPENSE):							
١		\$	4,513	œ	6,850	e .	11,363	
	Adjustment of Estimated Values	<u> 4</u>	4,010	Ψ	0,000	<u>~</u> _	11,000	
	TOTAL OTHER MICONE (EVRENCE)	•	4 549	æ	6,850	œ	11,363	
	TOTAL OTHER INCOME (EXPENSE)	<u>\$</u>	4,513	₽_	0,030	Ψ_	11,303	
	NET (1,000)	•	/ADA EADS	•	(12.343)	æ	(506.891)	
	NET INCOME (LOSS)	<u>\$</u> _	(494.548)	<u> </u>	(15.949)	<u></u>	[500.031]	
1								

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EXHIBIT "B"

^{*}See accompanying notes and accountants' report.

DIBIA I.E. AMERICA STATEMENT OF CASH FLOWS

ï

	SIX MONTHS ENDED JUNE 30, 2004		SIX MONTHS ENDED DEC. 31, 2004			AR ENDED C. 31, 2004
CASH FLOWS FROM OPERATING ACTIVITIES: Net Profit or (Loss)	\$	(494,548)	\$	(12,343)	\$	(506,891)
Adjustments to reconcile net profit or (loss) to net cash provided (used) by operating activities:						
Adjustment of Estimated Values		(4,513)		(6,850)		(11,363)
(Increase) Decrease in: Accounts Receivable Advances and Prepaids	·	338,051 3,474	: . ·	24 5,000		338,075 8,474
Increase (Decrease) In: Accrued Expenses Accrued Taxes		4,865 (1,444)		(42,302) (2,670)	<u></u>	(37,437) (4,114)
NET CASH PROVIDED (USED) BY OPERATING ACTIVITIES	<u>\$_</u>	(154,115)	<u>\$</u>	(59,141)	<u>\$</u>	(213,256)
CASH FLOWS FROM INVESTING ACTIVITIES: Purchases of Property and Equipment Proceeds from Sale of	\$	(3,400)	\$	-	\$	(3,400)
Property and Equipment		44,000		31,200		75,200
NET CASH PROVIDED (USED) BY INVESTING ACTIVITIES	\$_	40,600	<u>\$</u>	31,200	<u>\$</u>	71,800
CASH FLOWS FROM FINANCING ACTIVITIES: Proceeds of Short-Term Debt	\$	60,000	\$	2,000	\$_	62,000
NET CASH PROVIDED (USED) BY FINANCING ACTIVITIES	\$_	60,000	\$	2,000	\$	62,000
NET INCREASE (DECREASE) IN CASH	\$	(53,515)	\$	(25,941)	\$	(79,456)
CASH BALANCE - Beginning		79,910		26,395		79,910
CASH BALANCE - Ending	\$	26,395	<u>\$</u>	454	\$	454

EXHIBIT "C"



^{*}See accompanying notes and accountants' report.

UNITED BROADCASTING NETWC , 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 ceased operations as of February 28, 2004. Prior to that date, the network was a supplier of informational and entertaining talk shows intended for distribution over local radio stations scattered across the United States, internet streaming, and satellite radio.

Basis of Accounting:

Since the Company decided to cease operations, it measures its assets and liabilities at the amounts of cash expected to be received upon liquidation and reports changes in estimates when they are known.

Use of Estimates:

The preparation of financial statements in conformity with U.S. 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.

ADJUSTMENT OF ESTIMATED VALUES:

Effective with the decision to cease operations as of February 28, 2004, the carrying amounts of assets and liabilities were adjusted from their historical bases to the amounts of cash expected from their realization and settlement. The adjustment for the year ended December 31, 2004 increased net assets by \$11,363 as follows:

	П	BASES	VALUE	AC	JUSTMENT
Furniture and Equipment	\$	125,837	\$ 75,200	\$	(50,637)
Notes and Interest Payable		(62,000)	 •		62,000
Totals	\$	63.837	\$ 75.200	\$	11.363

INCOME TAXES:

At December 31, 2004, the Company had operating loss carryforwards of approximately \$6,500,308 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 2019.

COMMON STOCK:

10,100 shares of no par common stock are authorized. 10,100 shares are issued and outstanding at December 31, 2004.

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.



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FINANCIAL STATEMENTS

UBG, INC.

DECEMBER 31, 2004

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CLARENCE H. JOHNSON, P.C. CERTIFIED PUBLIC ACCOUNTANTS

TELEPHONE (248) 398-4040 FAX (248) 544-8414 26212 WOODWARD AVENUE • P.O. BOX 427 ROYAL OAK, MICHIGAN 48068

AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS MICHOGAN ASSOCIATION OF CERTIFIED PUBLIC ACCOUNTANTS

INDEPENDENT AUDITORS' REPORT

March 4, 2005

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, 2004, 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 auditing standards generally accepted in the United States of America. 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 U.S. 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, 2004, 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

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UBG, INC.

STATEMENT OF ASSETS, LIABILITIES, AND STOCKHOLDERS' EQUITY-MODIFIED CASH BASIS AS OF

DECEMBER 31, 2004

ASSETS

CURRENT ASSETS:

\$ 141,974.12 Cash in Bank 51,320.81 Inventory

193,294.93 **TOTAL CURRENT ASSETS**

TOTAL ASSETS 193,294.93

LIABILITIES AND STOCKHOLDERS' EQUITY

CURRENT LIABILITIES:

88,694.68 **Accounts Payable** 2.280.23 Payroll Taxes Payable Sales Tax Payable 1,379.62 9,369.38 Gift Certificates Payable

\$ 101,723.91 **TOTAL CURRENT LIABILITIES**

LONG-TERM LIABILITIES:

Loan Pavable-International

Union-U.A.W. 2,611,000.00 \$

2,611,000.00 **TOTAL LONG-TERM LIABILITIES**

TOTAL LIABILITIES 2,712,723.91

STOCKHOLDERS' EQUITY:

100.000.00 Capital Stock

Retained Earnings:

Balance - January 1, 2004 (2,112,416.85) Net Loss for the Period (507,012.13)

(2,619,428.98)Balance-December 31, 2004

TOTAL STOCKHOLDERS' EQUITY (2,519,428.98)

TOTAL LIABILITIES AND STOCKHOLDERS' EQUITY 193,294.93

*See accompanying notes and accountants' report.



UBG, INC. STATEMENT OF REVENUE AND EXPENSES-MODIFIED CASH BASIS

INCOME: Golf Operations Restaurant Pro Shop Interest TOTAL INCOME OPERATING EXPENSE:		IX MONTHS ENDED INE 30, 2004 185,002.66 109,129.25 59,354.03 27,01 353,512.95		IX MONTHS ENDED EC. 31, 2004 519,794.34 241,717.04 72,405.65 334.33 834,251.36		EAR ENDED EC. 31, 2004 704,797.00 350,846.29 131,759.68 361.34 1,187,764.31
MAINTENANCE:						
Wages	\$	104,076.34	\$	189,272.82	\$	293,349.16
Employee Benefits	Ψ	24,339.23	Φ	35,441.57	Ψ	59,780.80
Travel		6,258,21		7,503.69		13,761.90
Chemicals		11,342.96		36,449.69		47,792.65
		11,342.30	•	593.63		· ·
Equipment Rental		_		237.93		593.63 237.93
Fees and Expenses Fertilizer		20 706 52				
		29,796.53		2,686.01		32,482.54
Fuel and Oil		3,297.69		8,758.53		12,056.22
Irrigation Maintenance		1,494.01		829.60		2,323.61
Repairs and Maintenance-Building		1,192.06		94.52		1,286.58
Repairs and Maintenance-Equipment		7,173.27		8,246.29		15,419.56
Supplies-Maintenance		116.25		45.66		161.91
Membership Dues		375.00		290.00		665.00
Education/Registration		35.00		4 444 62		35.00
Sand		3,927.90		1,444.83		5,372.73
Seed and Sod		-		145.75		145.75
Landscaping		398.22		324.29		722.51
Vacation Trust Fund		3,650.40		15,166.76		18,817.16
Pension Trust Fund		6,362.69		12,454.47		18,817.16
Insurance Trust Fund		18,995.20		36,324.40		55,319.60
Professional Services		722.45		40.00		762.45
Small Tools		204.85		377.83		582.68
Supplies		1,050.55		235.63		1,286.18
Taxes-Payroll		16,925.72		20,674.82		37,600.54
Telephone		340.43		446.14		786.57
Uniforms		1,249.19				1,249.19
Utilities		3,077.24		6,832.43	_	9,909.67
TOTAL MAINTENANCE EXPENSE	\$	<u>246,401.39</u>	\$	384,917.29	\$	<u>631,318.68</u>
GOLF OPERATIONS:	_		_			
Wages	\$	93,530.72	\$	165,660.03	\$	259,190.75
Employee Benefits		31,988.60		59,093.69		91,082.29
Travel		6,696.15		7,116.75		13,812.90
Advertising		40,475.38		20,136.19		60,611.57
Education/Registration		<u>-</u>		535.00		535.00
Fees and Expenses		5,714.53		14,912.31		20,626.84
Insurance		9,087.36		5,378.08		14,465.44
Insurance-Workers' Compensation		7,732.00		3,294.75		11,026.75

^{*}See accompanying notes and accountants' report.





UBG, INC. STATEMENT OF REVENUE AND EXPENSES-MODIFIED CASH BASIS

OPERATING EXPENSE: (Continued)		IX MONTHS ENDED INE 30, 2004		IX MONTHS ENDED EC. 31, 2004	-	EAR ENDED EC. 31, 2004
GOLF OPERATIONS: (Continued)	\$	151.14	\$	86.78	\$	237.92
Repairs and Maintenance-Building	Ð	1,867,18	Φ	1,679.79	Ψ	3,546.97
Repairs and Maintenance-Equipment		19.90		1,079.79		19.90
Supplies-Maintenance				789.00		1,845.00
Membership Dues		1,056.00		643.35		1,195.32
Postage and Freight		551.97		043.33		
Printing		3,233.09		7 047 50		3,233.09
Professional Services		11,585.72		7,817.59		19,403.31
Supplies		4,222.29		800.70		5,022.99
Taxes-Payroll		11,547.02		18,124.94		29,671.96
Taxes-Sales and Use		91.46		170.47		261.93
Telephone		4,262.20		4,036.58		8,298.78
Uniforms		2,073.41		-248.68		1,824.73
Utilities		9,326.01		20,996.21		30,322.22
Cash Over and Short		<u>(713.24)</u>		<u>815.81</u>		102.57
TOTAL GOLF OPERATIONS EXPENSE	<u>\$</u>	244,498.89	\$_	331,839.34	\$	576,338.23
RESTAURANT:						
Cost of Sales	\$	28,618.87	\$	99,275.71	\$	127,894.58
Wages	₩	68,175.62	Ψ	111,437.74	•	179,613.36
		17,488.90		31,008.23		48,497.13
Employee Benefits		1,210.33		999.81		2,210.14
Advertising		99.00		333.01		99.00
Education/Registration				380.00		2,377.50
Fees and Expenses		1,997.50		300.00		670.00
Licenses and Permits		670.00		456 7E		156.75
Meals and Entertainment		075.00		156.75		
Professional Services		875.39		1,913.12		2,788.51 4,705.70
Repairs and Maintenance		29.91		1,765.88		1,795.79
Supplies		286.08		9,045.34		9,331.42
Taxes-Payroll		14,906.85		21,649.93		36,556.78
Uniforms		2,245.82		73.26		2,319.08
Utilities		76.46		387.82		464.28
Cash Over and Short		24.35		(52.97)		(28.62)
TOTAL RESTAURANT EXPENSE	<u>\$</u>	<u> 136,705.08</u>	<u>\$</u> _	<u> 278,040.62</u>	\$	414,745.70
PRO SHOP:						
Cost of Sales	\$	22,374.89	\$	49,963.87	\$	72,338.76
Professional Services	•		•	9.35	•	9.35
Supplies		25.72		-		25.72
TOTAL PRO SHOP EXPENSE	\$	22,400.61	\$	49,973.22	\$	72,373.83
TOTAL FRO SHOP EXPENSE	<u>*</u>	22,400.01	Ψ	70,010.22	Ψ	12,010.00
TOTAL OPERATING EXPENSE	\$	650,005.97	\$	1,044,770.47	\$	1,694,776.44
NET PROFIT OR (LOSS)	œ	(296,493,02)	\$	(210.519.11)	ę.	(507.012.13)
NET PROFIT OR (LOSS)	<u> </u>	(230.433,02)	<u>-2</u> -	(210.018.11)	<u> </u>	(301.012.13)

EXHIBIT "B" (Concluded 2)

~E. ~~



^{*}See accompanying notes and accountants' report.

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 U.S. 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.

Accounts Receivable:

The Company extends credit to certain customers in the normal course of business. Accounts receivable are considered by management to be fully collectible and accordingly no allowance for doubtful accounts has been recorded.

Inventory:

Inventory is stated at the lower of cost or market.

INCOME TAXES:

At December 31, 2004, the Company had operating loss carryforwards of approximately \$2,619,428.98 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 2019.

COMMON STOCK:

60,000 shares of no par common stock are authorized. 1,000 shares are issued and outstanding at December 31, 2004.

CONCENTRATIONS OF CREDIT RISK ARISING FROM CASH DEPOSITS IN EXCESS OF INSURED LIMITS:

UBG, Inc. maintains cash balances in a financial institution located in Detroit, Michigan. The balances are insured by the Federal Deposit Insurance Corporation up to \$100,000.00. At December 31, 2004, the Company's uninsured cash balance totaled \$35,641.67.



UBG, INC. NOTES TO FINANCIAL STATEMENTS

RELATED PARTY:

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

Some of UBG, Inc. management personnel's salaries, taxes, fringes and expenses were paid by the U.A.W. International Union. UBG, Inc. then reimbursed U.A.W. International Union for salaries, taxes, fringes and expenses for personnel related to UBG, Inc.'s activities.

The fixed assets and property used by UBG, Inc. are held by Union Building Corporation, a related party. The rent expense for those fixed assets and property for the six months ended June 30, 2004 and December 31, 2004 is zero.

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, 2004 was \$2,611,000.00.

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, 2004 and December 31, 2004 are \$6,362.69 and \$12,454.47, respectively.

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



-00000FINANCIAL STATEMENTS
UBE, INC.
DECEMBER 31, 2004

-00000-

CLARENCE H. JOHNSON, P.C.

CERTIFIED PUBLIC ACCOUNTANTS

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MEMBER

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

INDEPENDENT AUDITORS' REPORT

March 4, 2005

Board of Directors UBE, 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 UBE, Inc. as of December 31, 2004, 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 auditing standards generally accepted in the United States of America. 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 U.S. 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 UBE, Inc. as of December 31, 2004, 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



UBE, INC. STATEMENT OF ASSETS, LIABILITIES, AND STOCKHOLDERS' EQUITY-MODIFIED CASH BASIS AS OF **DECEMBER 31, 2004**

CURRENT ASSETS:	<u>ASSETS</u>		
Cash on Hand and in Bank			\$ 754,624.41
Inventory: Inventory - Food Inventory - Beverage Inventory - Gift Shop Inventory - Guest Supplies China, Glass and Linen		\$ 8,132.21 18,066.44 47,359.17 4,091.17 37,583.69	115,232.68
Property Toyon			18,034.09
Prepaid Taxes	•		
TOTAL ASSETS			\$ 887,891,18
CURRENT LIABILITIES:	IES AND STOCKHOLDI	ERS' EQUITY	
Payroll Taxes and Deductions Payable	\$ 13,943.44		
TOTAL CURRENT LIABILITIES		\$ 13,943.44	
LONG-TERM LIABILITIES: Loan Payable-International Union-U.A.W. TOTAL LONG-TERM LIABILITIES	\$ 3,700,000.00	3,700,000.00	
TOTAL LIABILITIES			\$ 3,713,943.44
STOCKHOLDERS' EQUITY: Capital Stock Additional Paid in Capital		\$ 100,000.00 1,319,832.90	
Retained Earnings: Balance-January 1, 2004 Net Loss for the Period	\$ (1,818,966.51) (2,426,918.65)		
Balance-December 31, 2004 TOTAL STOCKHOLDERS' EQUITY		(4,245,885.16)	(2,826,052.26)
TOTAL LIABILITIES AND STOCKHOLDERS' EQUITY			\$ 887.891.18

and the same

EXHIBIT "A"



^{*}See accompanying notes and accountants' report.

UBE, INC. STATEMENT OF REVENUE AND EXPENSES-MODIFIED CASH BASIS

		CIV MONTHO		OIV MONTHO		
		SIX MONTHS		SIX MONTHS		VEAD ENDED
INCOME.		ENDED		ENDED		YEAR ENDED
INCOME:	\$	JUNE 30, 2004	•	DEC. 31, 2004	\$	DEC. 31, 2004
Rooms	Ф	978,404.82	Ф		Ф	
Food		643,966.26		1,476,542.86		2,120,509.12
Bar Long Distance		81,890.79		110,540.93		192,431.72
Long Distance Gift Shop		21,668.72		20,052.07		41,720.79
Miscellaneous Income		74,600.84 8,414.30		74,737.01		149,337.85
		936.00		11,216.42		19,630.72
Campground Fees Education		14,241.15		21,891.00 14,972.30		22,827.00 29,213.45
Registration Fees		77,475.00				
Scholarship		112,872.08		(8,625.00) 306,089.48	1	68,850.00
TOTAL INCOME	\$	2,014,469.96	=	4,144,862,52	_	418,961.56 6,159,332.48
COST OF SALES:	<u> </u>	2,014,409.90	<u>.</u>	4,144,002,52	*	0,109,332.40
Food	· .s	187,468.73	S	292,222.60	\$	479,691.33
Bar	Ψ	27,647.24	Φ.	31,253.77	Φ	58,901.01
Long Distance		20,706.10		20,247.84		40,953.94
Gift Shop		51,451.10		48,118.28		99,569.38
Education		9,709.92		10,354.89		20,064.81
TOTAL COST OF SALES	\$	296,983.09	•	402,197.38	~	
OPERATING EXPENSES:	<u> </u>	230,803.03	<u> </u>	402,131.30	<u> </u>	099,100.47
Wages-Administration	\$	228,151.36	œ	325,089.10	\$	553,240.46
Wages-Administration Wages-General Labor	Ψ	1,048,479.20	Ψ	1,488,943.17	Ψ	2,537,422.37
Travel and Meals		185,257.97		173,033.35		358,291.32
Audit Fees		26,998.25		3,572.13		30,570.38
Bank Service Fees		1,460.63		4,645.94		6,106.57
Cleaning and Laundry		15,878.54		16,443.52		32,322.06
Donations		1,167.90		1,398.72		2,566.62
Equipment Rental		9,216.84		9,898.19		19,115.03
Fees and Expenses		160.00		48,955.00		49,115.00
Furniture and Equipment		320.00		2,612.98		2,932.98
Glass, Silver and China		3,412.04		3,608.90		7,020.94
Linen Replacement		6,379.31		1,955.81		8,335.12
Insurance-Medical		1,034,493.44		846,858.52		1,881,351.96
Delta Dental of Michigan		33,173.96		50,745.96		83,919.92
Employee-Disability		55,596.26		57,031.13		112,627.39
Insurance-Life		-		262,962.01		262,962.01
Insurance-General		1,016.10		4,088.78		5,104.88
Insurance-Workers' Comp		51,805.95		31,152.61		82,958.56
Legal Fees		4,393.00				4,393.00
Maintenance		149,567.94		222,564.48		372,132.42
Membership Fees and Dues		677.93		412.60		1,090.53
Miscellaneous		4,606.80		4,824.93		9,431.73
Postage		5,100.79		2,531.63		7,632.42
Promotion		38.67		63.49		102.16
Printing		5,511.81		718.18		6,229.99
Services		9,904.05		8,440.00		18,344.05
Pension Fund		112,500.00		112,500.00		225,000.00
Supplies		31,067.94		107,067.67		138,135.61
		•		•		• • •

^{*}See accompanying notes and accountants' report.

EXHIBIT "B" (Continued 1)



UBE, INC. STATEMENT OF REVENUE AND EXPENSES-MODIFIED CASH BASIS

OPERATING EXPENSES: (Continued)		SIX MONTHS ENDED IUNE 30, 2004		SIX MONTHS ENDED DEC. 31, 2004	YEAR ENDED DEC. 31, 2004
Taxes and Licenses	\$	•	\$	163,833.80	\$ 363,904.80
Utilities_		385,208.23		298,744.54	683,952.77
Waste Removal		4,540.44		6,762.95	11,303.39
Uniforms		<u>6,880.57</u>		<u> 2,573.65</u>	9,454.22
TOTAL OPERATING EXPENSES	<u>\$</u>	3,623,036.92	<u>\$</u>	4,264,033.74	\$ 7,887,070.66
NET PROFIT OR (LOSS)	\$	(1,905,550.05)	\$	(521,368.60)	\$ (2,426,918.65)

EXHIBIT "B" (Concluded 2)



^{*}See accompanying notes and accountants' report.

UBE, INC. NOTES TO FINANCIAL STATEMENTS

NATURE OF OPERATIONS AND SIGNIFICANT ACCOUNTING POLICIES:

Nature of Operations:

UBE, Inc. manages, operates, and maintains the Walter and May Reuther UAW Family Education Center located at Black Lake, Cheboygan County, Michigan, situated on real property owned by the Union Building Corporation, a Michigan non-profit corporation. The Center is intended for use by the public and members, family members and retirees of 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 U.S. 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, 2004, the Company had operating loss carryforwards of approximately \$4,245,885 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 2018.

COMMON STOCK:

60,000 shares of common stock are authorized. 1,000 shares are issued and outstanding at December 31, 2004.

RELATED PARTY:

UBE, Inc. is a wholly owned subsidiary of Union Building Corporation, a non-profit Michigan corporation. Union Building Corporation is, in turn, a wholly owned subsidiary of the International Union, United Automobile, Aerospace and Agricultural Implement Workers of America.

Some of UBE, Inc. management personnel's salaries, taxes, fringes and expenses were paid by the U.A.W. International Union.

The fixed assets and property used by UBE, Inc. are owned by Union Building Corporation, a related party. The rent expense for those fixed assets and property for the periods ended June 30, 2004 and December 31, 2004 is zero.



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UBE, INC. NOTES TO FINANCIAL STATEMENTS

NOTE PAYABLE:

The Company has a note payable in the amount of \$3,700,000.00 due to the sole shareholder on December 31, 2004. The note bears interest at the prime rate publicly annouced from time to time by Bank One, Michigan. The entire principal balance and accrued interest shall be due and payable in full in February 2013.

PENSION PLANS:

The Black Lake Employees Pension Plan is a defined benefit plan. All funds are held in a master trust at State Street Bank and Trust of Massachusetts. Participants are all UBE, Inc. employees. The plan costs are fully funded by the employer. Benefits are calculated using age and years of eligibility service. The employers contributions to the plan for the six months ended June 30, 2004 and December 31, 2004 are \$112,500.00 and \$112,500.00, respectively.

Employees of UBE, Inc. may also participate in the OPEIU Local 494-U.A.W. Employees 401(k) Plan, a defined contribution plan. All funds are held in trust at Fidelity Management Trust Company of Massachusetts. The plan is a deferred compensation plan under Code Section 401(k). The funding is by each participant electing to have a percentage of their compensation contributed to the plan subject to the limits of Code Section 401(k). The employer makes no contributions to the plan.

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

CONCENTRATIONS OF CREDIT RISK ARISING FROM CASH DEPOSITS IN EXCESS OF INSURED LIMITS:

UBE, Inc. maintains cash balances in a financial institution located in Cheboygan, Michigan. The balances are insured by the Federal Deposit Insurance Corporation up to \$100,000.00. At December 31, 2004, the Company's uninsured cash balance totaled \$35,112.67.

UBE, Inc. maintains cash balances in a financial institution located in Detroit, Michigan. The balances are insured by the Federal Deposit Insurance Corporation up to \$100,000.00. At December 31, 2004, the Company's uninsured cash balance totaled \$407,490.27.

