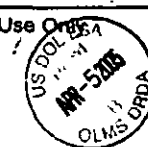


# FORM LM-2 LABOR ORGANIZATION ANNUAL REPORT

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

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

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

For Official Use Only  E	1. FILE NUMBER <div style="border: 1px solid black; padding: 5px; display: inline-block;">0 3 9 - 0 4 0</div>	2. PERIOD COVERED MO DAY YEAR From <div style="border: 1px solid black; padding: 2px;">0 1</div> <div style="border: 1px solid black; padding: 2px;">0 1</div> <div style="border: 1px solid black; padding: 2px;">2 0 0 4</div> Through <div style="border: 1px solid black; padding: 2px;">1 2</div> <div style="border: 1px solid black; padding: 2px;">3 1</div> <div style="border: 1px solid black; padding: 2px;">2 0 0 4</div>	3. (a) AMENDED -- If this is an amended report correcting a previously filed report, check here: <input type="checkbox"/> (b) TERMINAL -- If your organization ceased to exist and this is its terminal report, see Section XII of the instructions and check here: <input type="checkbox"/> (c) SUBSIDIARY -- If this is a report for a subsidiary organization of your union as defined in Section X of the instructions, check here: <input type="checkbox"/>
---	--	---	--

4. AFFILIATION OR ORGANIZATION NAME <b>ENGINEERS, OPERATING, AFL-CIO</b>	8. MAILING ADDRESS First Name <div style="border: 1px solid black; padding: 2px;">P A T R I C K L</div> Last Name <div style="border: 1px solid black; padding: 2px;">S I N K</div> P.O. Box - Building and Room Number (if any) <div style="border: 1px solid black; height: 20px; width: 100%;"></div> Number and Street <div style="border: 1px solid black; padding: 2px;">3 5 1 5 P R O S P E C T A V E N U E</div> City <div style="border: 1px solid black; padding: 2px;">C L E V E L A N D</div> State ZIP Code + 4 <div style="border: 1px solid black; padding: 2px;">O H</div> <div style="border: 1px solid black; padding: 2px;">4 4 1 1 5</div> - <div style="border: 1px solid black; width: 40px; height: 20px;"></div>	
5. DESIGNATION (Local, Lodge, etc.) LU	6. DESIGNATION NUMBER 18	
7. UNIT NAME (if any)		
9. Are your organization's records kept at its mailing address? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> (If "No," provide address in Item 75.)		

75. ADDITIONAL INFORMATION	
Item Number	

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

76. SIGNED: <u>Kenneth M. Triplett</u> PRESIDENT (If other title, see instructions.) Date: <u>3/10/05</u> Telephone Number: <u>(216) 432-3138</u>	77. SIGNED: <u>Piero P. Panzarello</u> TREASURER (If other title, see instructions.) Date: <u>3/10/05</u> Telephone Number: <u>(216) 432-3138</u>
--	--

**During the Reporting Period Did Your Organization:**

- |  |                                     |                                     |
|--|-------------------------------------|-------------------------------------|
|  | Yes                                 | No                                  |
| 10. Have a "subsidiary organization" as defined in Section X of the instructions?.....   | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| 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? .....              | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 12. Have a political action committee (PAC) fund? .....  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| 13. Acquire or dispose of any goods or property in any manner other than by purchase or sale? .....  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 14. Have an audit or review of its books and records by an outside accountant or by a parent body auditor/representative? .....  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 15. Discover any loss or shortage of funds or other property? .....<br><i>(Answer "Yes" even if there has been repayment or recovery.)</i>   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 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? ..... | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 17. Liquidate or reduce any liabilities without disbursement of cash? .....  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |

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

18. How many members did your organization have at the end of the reporting period? **1 5 1 4 5**
19. What is the date of your organization's next regular election of officers? MO **0 8** YEAR **2 0 0 5**
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? \$ **6 0 0 0 0 0**

21. What are your organization's rates of dues and fees? *(Enter a minimum and maximum if more than one rate applies for any line.)*

Rates of Dues and Fees	
(a) Regular Dues/Fees	\$ <u>16.75</u> per <u>MONTH</u> <i>(Month, Year, etc.)</i>
(b) Initiation Fees	\$ <u>20.00 - 400.00</u>
(c) Transfer Fees	\$ <u>1.00 - 15.00</u>
(d) Work Permits	\$ <u>5.00</u> per <u>WEEK</u> <i>(Month, Year, etc.)</i>

22. During the reporting period, did your organization have any changes in its constitution and bylaws (other than rates of dues and fees) or in practices/procedures listed in the instructions? ..... Yes  No   
*(If the constitution and bylaws or practices/procedures have changed, see the instructions.)*
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 Item 23 or 24 is "Yes," provide details in Item 75.)*

**STATEMENT A - ASSETS AND LIABILITIES**

Local18membersVoice

FILE NUMBER: **0 3 9 - 0 4 0**

**Complete Schedules 1 Through 15 Before Completing Statement A**

**Enter Amounts in Dollars Only -- Do Not Enter Cents**

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

# STATEMENT B - RECEIPTS AND DISBURSEMENTS

Local18membersVoice

FILE NUMBER: **039 - 040**

Complete Schedules 1 Through 15 Before Completing Statement B

Enter Amounts in Dollars Only -- Do Not Enter Cents

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

**Enter Amounts in Dollars Only -- Do Not Enter Cents**

### SCHEDULE 1 – LOANS RECEIVABLE

List below loans to officers, employees, or members which at any time during the reporting period exceeded \$250 and list all loans to business enterprises regardless of amount. (A)	Loans Outstanding at Start of Period (B)	Loans Made During Period (C)	Repayments Received During Period		Loans Outstanding at End of Period (E)
			Cash (D)(1)	Other Than Cash (D)(2)	
1.					
2.					
3.					
4. Totals from additional pages (if any)					
5. Totals of loans not listed above	0	0	0	0	0
6. Totals of Lines 1 through 5	0	0	0	0	0
The totals from Line 6 are entered in..... Item 27 ..... Item 69 ..... Item 51 ..... Item 75 ..... Item 27					
Column (A) ..... with Explanation ..... Column (B)					

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

Local18membersVoice

FILE NUMBER: 039 - 040

# SCHEDULE 3 - OTHER ASSETS

Description (A)	Amount (B)
<b>Marketable Securities</b>	
1. Total Cost	0
2. Total Book Value	0
3. List each marketable security which has a book value over \$1,000 and exceeds 20% of Line 2.	
(a) None	0
(b)	
(c)	
(d)	
<b>Other Investments</b>	
4. Total Cost	0
5. Total Book Value	0
6. List each other investment which has a book value over \$1,000 and exceeds 20% of Line 5. Also list each subsidiary for which separate reports are attached.	
(a) None	0
(b)	
(c)	
(d)	
(e) Total from additional pages (if any)	
7. Total of Lines 2 and 5	0
The total from Line 7 is entered in ..... Item 29, Column (B)	

Description (A)	Book Value (B)
1. PREPAID POSTAGE IN METERS	1 0 6 4 8
2. SECURITY DEPOSIT	3 7 5
3. PREPAID MAINTENANCE	2 0 7 3
4.	
5.	
6. Total from additional pages (if any)	
7. Total of Lines 1 through 6	1 3 0 9 6
The total from Line 7 is entered in ..... Item 31, Column (B)	

# SCHEDULE 4 - OTHER LIABILITIES

Description (A)	Amount at End of Period (B)
1. REFUNDABLE DUES	1 7 9 9
2. OTHER PAYROLL WITHHOLDINGS	6 5 6 9
3.	
4.	
5.	
6. Total from additional pages (if any)	
7. Total of Lines 1 through 6	8 3 6 8
The total from Line 7 is entered in ..... Item 36, Column (D)	

# SCHEDULE 5 - FIXED ASSETS

Local18membersVoice

FILE NUMBER: **0 3 9 - 0 4 0**

Description (A)	Cost or Other Basis (B)	Total Depreciation or Amount Expensed (C)	Book Value (D)	Fair Market Value (E)
1. Land (give location): SEE CONTINUATION SCHEDULES	0		0	0
2. Totals from additional pages (if any)	3 4 9 8 6 2		3 4 9 8 6 2	3 4 9 8 6 2
3. Buildings (give location): SEE CONTINUATION SCHEDULES	0	0	0	0
4. Totals from additional pages (if any)	2 2 4 5 3 1 7	2 0 7 8 9 3 0	1 6 6 3 8 7	1 8 2 3 9 6
5. Automobiles and Other Vehicles	8 2 4 1 7 0	4 9 0 2 7 1	3 3 3 8 9 9	3 1 1 5 0
6. Office Furniture and Equipment	7 6 9 8 5 6	6 5 5 0 8 0	1 1 4 7 7 6	2 2 2 8 1
7. Other Fixed Assets	0	0	0	0
8. Totals of Lines 1 through 7	4 1 8 9 2 0 5	3 2 2 4 2 8 1	9 6 4 9 2 4	5 8 5 6 8 9
The total from Line 8, Column (D) is entered in.....				Item 30, Column (B)

# SCHEDULE 6 - SALE OF INVESTMENTS AND FIXED ASSETS

Description (if land or buildings, give location) (A)	Cost (B)	Book Value (C)	Gross Sales Price (D)	Amount Received (E)
1. AUTOMOTIVE EQUIPMENT	1 9 3 2 9 5	2 7 0 0 0	2 7 0 0 0	2 7 0 0 0
2. U.S. TREASURY BILLS	2 7 8 9 8 8 8 1	2 7 8 9 8 8 8 1	2 7 8 9 8 8 8 1	2 7 8 9 8 8 8 1
3.				
4.				
5. Totals from additional pages (if any)				
6. Totals of Lines 1 through 5	2 8 0 9 2 1 7 6	2 7 9 2 5 8 8 1	2 7 9 2 5 8 8 1	2 7 9 2 5 8 8 1
	7. Less Reinvestments			2 7 8 9 8 8 8 1
	8. Net Sales			2 7 0 0 0
The total from Line 8 is entered in .....				Item 49

# SCHEDULE 7 – PURCHASE OF INVESTMENTS AND FIXED ASSETS

FILE NUMBER: 039 - 040

Description (if land or buildings, give location) (A)	Cost (B)	Book Value (C)	Cash Paid (D)
1. AUTOMOTIVE EQUIPMENT	148341	148341	148341
2. FURNITURE & EQUIPMENT	5070	5070	5070
3. COMPUTER EQUIPMENT	2875	2875	2875
4. U.S. TREASURY BILLS	27865411	27865411	27865411
5. Totals from additional pages (if any)			
6. Totals of Lines 1 through 5	28021697	28021697	28021697
7. Less Reinvestments			27898881
8. Net Purchases			122816

The total from Line 8 is entered in ..... Item 68

# SCHEDULE 8 -- LOANS PAYABLE

Source of Loans Payable at Any Time During the Reporting Period (A)	Loans Owed at Start of Period (B)	Loans Obtained During Period (C)	Repayment Made During Period		Loans Owed at End of Period (E)
			Cash (D)(1)	Other Than Cash (D)(2)	
1. None	0	0	0	0	0
2.					
3.					
4.					
5. Totals from additional pages (if any)					
6. Totals of Lines 1 through 5	0	0	0	0	0

The total from Line 6 is entered in ..... Item 34 Column (C) ..... Item 50 ..... Item 70 ..... Item 75 with Explanation ..... Item 34 Column (D)

# SCHEDULE 9 - ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

FILE NUMBER: **039 - 040**

(A) Name <small>(List all persons who held office during the reporting period even if they received no salary or other disbursements.)</small>		Status (C)*	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Title <small>(Enter title of officer, such as PRESIDENT or TREASURER.)</small>							
1.	GARDNER JAMES BUSINESS MANAGR	P	3 6 4 2 1	2 2 0 0	1 6 4 0	0	4 0 2 6 1
2.	SINK PATRICK BUSINESS MANAGR	N	1 1 5 6 9 6	1 2 8 0 0	7 4 1 4	0	1 3 5 9 1 0
3.	TRIPLETT KEN PRESIDENT	N	9 6 8 6 0	1 1 4 7 1	7 9 3 0	0	1 1 6 2 6 1
4.	JEFFRIES FLOYD VICE PRESIDENT	N	7 7 7 6 0	7 7 8 1	4 4 0 8	0	8 9 9 4 9
5.	SCHERER CHARLES REC. SECRETARY	C	7 7 7 6 0	9 3 3 7	5 5 6 9	0	9 2 6 6 6
6.	REYNOLDS LARRY FINANCIAL SEC.	C	8 3 4 8 4	9 4 0 2	5 6 8 6	0	9 8 5 7 2
7.	PANZARELLO PREMO TREASURER	N	8 1 2 1 8	7 7 0 0	6 4 3 5	0	9 5 3 5 3
8. Totals from additional pages (if any)			6 5 5 3 6 4	9 0 1 7 6	3 6 4 2 2	0	7 8 1 9 6 2
9. Totals of Lines 1 through 8			1 2 2 4 5 6 3	1 5 0 8 6 7	7 5 5 0 4	0	1 4 5 0 9 3 4
					10. Less Deductions	4 8 8 1 2 9	
The total from Line 11 is entered in ..... Item 56					11. Net Disbursements	9 6 2 8 0 5	

\*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.)*

# SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES

FILE NUMBER: 039 - 040

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
KRINEK 1. BUSINESS AGENT WILLIAM	1 4 6 2 6	6 7 5	1 4 6 2	0	1 6 7 6 3
MAYOR 2. BUSINESS AGENT STEVEN	7 7 7 6 0	7 2 0 0	7 2 9 1	0	9 2 2 5 1
KUMSE 3. BUSINESS AGENT JAMES	7 2 0 8 2	1 4 0 8 2	3 9 4 9	0	9 0 1 1 3
LISCOE 4. BUSINESS AGENT JOHN	3 6 5 4 0	4 5 0 6	3 2 5 5	0	4 4 3 0 1
LARRICK 5. BUSINESS AGENT WILLIAM	5 0 3 7 3	5 2 7 5	4 2 9 8	0	5 9 9 4 6
6. Totals from additional pages (if any)	2 0 2 4 9 1 5	1 2 6 5 3 4	8 9 3 8 9	0	2 2 4 0 8 3 8
7. Totals for all employees who, during the reporting period, received \$10,000 or less in total disbursements from your organization and any affiliates	0	0	0	0	0
8. Totals of Lines 1 through 7	2 2 7 6 2 9 6	1 5 8 2 7 2	1 0 9 6 4 4	0	2 5 4 4 2 1 2
			9. Less Deductions	7 8 9 7 6 5	
The total from Line 10 is entered in .....			10. Net Disbursements	1 7 5 4 4 4 7	

# SCHEDULE 11 - BENEFITS

Local18membersVoice

FILE NUMBER: **0 3 9 - 0 4 0**

Description (A)	To Whom Paid (B)	Amount (C)
1. HEALTH AND WELFARE	OHIO OPERATING ENG FRING	3 2 3 2 7 9
2. GROUP LIFE INSURANCE	ANTHEM LIFE INSURANCE CO.	2 6 0 6 1 5
3. EMPLOYEES AND BOARD MEMBERS LIFE INSURANCE	AETNA	5 6 8 5
4. PENSION	OHIO OPERATING ENG FRINGE	3 9 8 2 4 4
5. Total from additional pages (if any)		3 9 7 3 9 8
6. Total of Lines 1 through 5		<b>1 3 8 5 2 2 1</b>
The total from Line 6 is entered in ..... Item 63		

# SCHEDULE 12 - CONTRIBUTIONS, GIFTS & GRANTS

Description (A)	Amount (B)
1. DONATIONS	1 3 4 1 0
2. BENEFITS AND MEMORIALS	6 9 1 8
3. CONTRIBUTIONS	3 6 6 0
4.	
5.	
6.	
7. Total from additional pages (if any)	
8. Total of Lines 1 through 7	<b>2 3 9 8 8</b>
The total from Line 8 is entered in ..... Item 64	

# SCHEDULE 13 - OFFICE & ADMINISTRATIVE EXPENSE

Description (A)	Amount (B)
1. OFFICE SUPPLIES AND EXPENSES	1 9 0 8 8 3
2. ADMINISTRATIVE EXPENSE	1 0 7 6 0 7
3. PAID DIRECT EXPENSES	2 9 3 0 6
4. EDUCATION EXPENSES	1 5 5
5. RETIREES MEETING EXPENSE	3 0 4 9
6. MEETING EXPENSE	1 8 3 2 3
7. Total from additional pages (if any)	5 1 1 3 1 1
8. Total of Lines 1 through 7	<b>8 6 0 6 3 4</b>
The total from Line 8 is entered in ..... Item 60	

# SCHEDULE 14 - OTHER RECEIPTS

# SCHEDULE 15 - OTHER DISBURSEMENTS

Description (A)	Amount (B)
1. CONTRIBUTIONS TO CONTRIB. ESCROW	8 6 7 6
2. REIMBURSEMENT OF ADMIN. EXPENSES	3 8 6
3. REIMBURSEMENT OF BANK FEES	9 5 6
4. REIMBURSEMENT OF BUILDING SUPPLY	5 1 1
5. REIMBURSEMENT OF INSURANCE	5 7
6. REIMBURSEMENT OF GARAGE SUPPLIES	3 9
7. REIMBURSEMENT OF OFFICE EXPENSES	8 1 5
8. REIMBURSEMENT OF PROMOTION EXP.	4 0 1
9. REIMBURSEMENT OF ORGANIZERS EXP.	8 1 2
10. REIMBURSEMENT OF SUBSCRIP./DUES	1 0
11. REIMBURSEMENT OF TELEPHONE	1 5 9
12. REIMBURSEMENT OF TRANSPORT. EXP.	5 7 1 0
13. RECEIPT OF REFUNDABLE DUES	4 5 9 8
14. REBATES RECEIVED	1 4 5
15. INS. PROCEEDS FROM AUTOS	1 4 7 6 7
16. Total from additional pages (if any)	2 3 7 9 3
17. Total of Lines 1 through 16	6 1 8 3 5
The total from Line 17 is entered in ..... Item 54	

Description (A)	Amount (B)
1. PAYMENT OF PAYROLL DEDUCTION	2 6 2 6 0 2
2. NEGOTIATING EXPENSE	1 8 1 0 1
3. SUBSCRIPTIONS AND PUBLICATIONS	5 5 3 8 5
4. TRANSPORTATION EXPENSES	2 5 8 4
5. ELECTION REFERENDUM EXPENSES	2 7 1 2 5
6. ELECTION COMMITTEE EXPENSES	3 2 0 0
7. PETTY CASH DISBURSEMENTS	2 6 3 2
8. DUES REFUNDS	1 4 8 5 1
9. PUBLICATION OF LOCAL NEWSPAPER	2 2 3 5 1 6
10. BANK SERVICE CHARGES ON ESCROW	1 7
11. PAYMENT OF REFUNDS - ESCROW ACCT	7 2
12. CONVENTION & CONFERENCE EXPENSE	7 8 5
13. POSTAGE EXPENSE	4 5 3 9 8
14. ORGANIZERS TELEPHONE EXPENSE	3 4 6
15. LOCAL 603 PERCAPITA EXPENSES	3 0 2
16. Total from additional pages (if any)	
17. Total of Lines 1 through 16	6 5 6 9 1 6
The total from Line 17 is entered in ..... Item 73	

ORGANIZATION NAME:  
**ENGINEERS, OPERATING, AFL-CIO**

Local18membersVoice

FILE NUMBER: **0 3 9 - 0 4 0**

ENDING DATE OF PERIOD COVERED:  
**12/31/2004**

**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)
DISTRICT 1, CLEVELAND	1 5 5 3 4 8		1 5 5 3 4 8	1 5 5 3 4 8
DISTRICT 2, TOLEDO	3 4 3 0 1		3 4 3 0 1	3 4 3 0 1
DISTRICT 4, DAYTON	7 5 3 8 4		7 5 3 8 4	7 5 3 8 4
DISTRICT 5, CINCINNATI	7 5 4 3 0		7 5 4 3 0	7 5 4 3 0
DISTRICT 6, AKRON	9 3 9 9		9 3 9 9	9 3 9 9



ORGANIZATION NAME:  
ENGINEERS, OPERATING, AFL-CIO

Local18membersVoice

FILE NUMBER: 039 - 040

ENDING DATE OF PERIOD COVERED:  
12/31/2004

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

(A) Name <small>(List all persons who held office during the reporting period even if they received no salary or other disbursements.)</small>		Status (C)*	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Title <small>(Enter title of officer, such as PRESIDENT or TREASURER.)</small>							
TOTMAN TRUSTEE	MARK	N	8 3 4 8 4	1 2 3 3 1	4 2 6 2	0	1 0 0 0 7 7
DALTON TRUSTEE	RICHARD	C	8 3 4 8 4	8 9 5 3	4 7 4 1	0	9 7 1 7 8
LAFASO TRUSTEE	CHARLES	C	8 3 4 8 4	8 9 9 3	4 6 2 0	0	9 7 0 9 7
KINGSBURY AUDITOR	GREGORY	C	8 3 4 8 4	9 0 1 9	4 6 9 7	0	9 7 2 0 0
DELONG AUDITOR	STEVE	C	8 3 4 8 4	8 9 1 9	4 7 1 5	0	9 7 1 1 8
DILORETO AUDITOR	STEVE	N	8 2 4 2 4	8 1 0 0	5 2 1 8	0	9 5 7 4 2
MILUM CONDUCTOR	JEFFREY	N	7 7 7 6 0	8 0 1 8	4 7 6 3	0	9 0 5 4 1
PETERS GUARD	SCOTT	C	7 7 7 6 0	7 8 4 3	3 4 0 6	0	8 9 0 0 9

ORGANIZATION NAME:  
**ENGINEERS, OPERATING, AFL-CIO**

ENDING DATE OF PERIOD COVERED:  
**12/31/2004**

Local18membersVoice

FILE NUMBER: **039 - 040**

**SCHEDULE 9 – ALL OFFICERS AND DISBURSEMENTS TO OFFICERS (continued)**

(A) Name <small>(List all persons who held office during the reporting period even if they received no salary or other disbursements.)</small>		Status (C)*	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Title <small>(Enter title of officer, such as PRESIDENT or TREASURER.)</small>							
KLINE	DAVID	C	0	1 2 0 0	0	0	1 2 0 0
EXECUTIVE BOARD							
RANFTL	RUSSELL	P	0	4 0 0	0	0	4 0 0
EXECUTIVE BOARD							
MILNER	RONALD	C	0	1 0 0 0	0	0	1 0 0 0
EXECUTIVE BOARD							
KORAN	ROBERT	N	0	2 0 0	0	0	2 0 0
EXECUTIVE BOARD							
KLOPMAN	JACK	C	0	4 0 0	0	0	4 0 0
EXECUTIVE BOARD							
CONLEY	PAUL	C	0	1 2 0 0	0	0	1 2 0 0
EXECUTIVE BOARD							
HEDGES	ROBERT	C	0	6 0 0	0	0	6 0 0
EXECUTIVE BOARD							
FACEY	JOY	C	0	1 0 0 0	0	0	1 0 0 0
EXECUTIVE BOARD							

ORGANIZATION NAME:  
ENGINEERS, OPERATING, AFL-CIO

Local18membersVoice

FILE NUMBER: 039 - 040

ENDING DATE OF PERIOD COVERED:  
12/31/2004

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

(A) Name <small>(List all persons who held office during the reporting period even if they received no salary or other disbursements.)</small>	Status (C)*	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Title <small>(Enter title of officer, such as PRESIDENT or TREASURER.)</small>						
RAJNER PETER EXECUTIVE BOARD	C	0	1 0 0 0	0	0	1 0 0 0
RANFT STEVE EXECUTIVE BOARD	C	0	1 0 0 0	0	0	1 0 0 0
CREEKS CHAD EXECUTIVE BOARD	C	0	8 0 0	0	0	8 0 0
BRANSTOOL JOHN EXECUTIVE BOARD	C	0	1 2 0 0	0	0	1 2 0 0
REIDHOLBROOK PAMELA EXECUTIVE BOARD	C	0	8 0 0	0	0	8 0 0
BLACK DONALD EXECUTIVE BOARD	C	0	1 2 0 0	0	0	1 2 0 0
HILL GLENN EXECUTIVE BOARD	C	0	1 2 0 0	0	0	1 2 0 0
GENTILE JAMES EXECUTIVE BOARD	C	0	1 2 0 0	0	0	1 2 0 0

ORGANIZATION NAME:  
ENGINEERS, OPERATING, AFL-CIO

Local18membersVoice

FILE NUMBER: 039 - 040

ENDING DATE OF PERIOD COVERED:  
12/31/2004

**SCHEDULE 9 – ALL OFFICERS AND DISBURSEMENTS TO OFFICERS (continued)**

(A) Name <i>(List all persons who held office during the reporting period even if they received no salary or other disbursements.)</i>	Status (C)*	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Title <i>(Enter title of officer, such as PRESIDENT or TREASURER.)</i>						
REESE RON EXECUTIVE BOARD	C	0	1 2 0 0	0	0	1 2 0 0
LUNG HENRY EXECUTIVE BOARD	C	0	1 2 0 0	0	0	1 2 0 0
FERRELL ROBERT EXECUTIVE BOARD	C	0	1 2 0 0	0	0	1 2 0 0

ORGANIZATION NAME:  
ENGINEERS, OPERATING, AFL-CIO

Local18membersVoice

FILE NUMBER: 039 - 040

ENDING DATE OF PERIOD COVERED:  
12/31/2004

## SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
TAGGART DONALD BUSINESS AGENT	7 7 7 6 0	7 2 0 0	5 8 4 2	0	9 0 8 0 2
HECKLER STEVE BUSINESS AGENT	7 7 7 6 0	7 5 0 9	7 2 9 1	0	9 2 5 6 0
MYERS ANDY BUSINESS AGENT	7 8 1 4 4	7 2 0 0	6 1 5 4	0	9 1 4 9 8
SIESEL GARY BUSINESS AGENT	7 7 7 6 0	9 0 3 5	5 8 4 1	0	9 2 6 3 6
BODNER LARRY BUSINESS AGENT	7 7 7 6 0	6 9 0 0	4 6 4 9	0	8 9 3 0 9

ORGANIZATION NAME:  
ENGINEERS, OPERATING, AFL-CIO

Local18membersVoice

FILE NUMBER: 039 - 040

ENDING DATE OF PERIOD COVERED:  
12/31/2004

### SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates.)</i>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
LLEWELLYN BUSINESS AGENT ROLLAND	7 7 7 6 0	7 9 6 6	5 4 9 4	0	9 1 2 2 0
THOMPSON BUSINESS AGENT TOMMY	8 0 0 9 2	7 0 2 5	4 4 5 3	0	9 1 5 7 0
HAMMOCK BUSINESS AGENT TIMOTHY	7 7 0 1 3	6 9 0 0	6 6 2 2	0	9 0 5 3 5
CLARK BUSINESS AGENT AUGUST	7 7 7 6 0	7 0 0 0	5 7 8 3	0	9 0 5 4 3
BURDETT BUSINESS AGENT BILL	7 7 7 6 0	7 1 0 0	4 9 0 2	0	8 9 7 6 2

ORGANIZATION NAME:  
ENGINEERS, OPERATING, AFL-CIO

Local18membersVoice

FILE NUMBER: 039 - 040

ENDING DATE OF PERIOD COVERED:  
12/31/2004

**SCHEDULE 10 – DISBURSEMENTS TO EMPLOYEES (continued)**

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
MONNIN BUSINESS AGENT LOUIS	7 7 7 6 0	7 8 3 5	4 4 8 0	0	9 0 0 7 5
RIDENBAUGH BUSINESS AGENT THOMAS	7 2 2 9 0	1 1 3 7 4	5 5 0 7	0	8 9 1 7 1
JAMES BUSINESS AGENT TOM	7 7 7 6 0	1 0 2 2 9	4 5 3 8	0	9 2 5 2 7
LUCAS BUSINESS AGENT JOSEPH	7 7 7 6 0	7 9 3 5	7 3 6 3	0	9 3 0 5 8
RANFTL BUSINESS AGENT RUSSELL	6 5 2 5 0	7 2 4 2	5 5 2 0	0	7 8 0 1 2

ORGANIZATION NAME:  
ENGINEERS, OPERATING, AFL-CIO

Local18membersVoice

FILE NUMBER: 039 - 040

ENDING DATE OF PERIOD COVERED:  
12/31/2004

### SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
HALL  BUSINESS AGENT	8 0 5 5 0	8 0 8 4	4 6 0 3	0	9 3 2 3 7
ALLEN  OFFICE MANAGER	5 8 9 6 8	0	3 4 7	0	5 9 3 1 5
RODGERS  EXEC SECRETARY	5 4 0 0 1	0	0	0	5 4 0 0 1
CROSBY  ADMINIST ASST.	4 7 5 5 0	0	0	0	4 7 5 5 0
AMENT  MAINTENANCE	1 5 8 4 9	0	0	0	1 5 8 4 9

ORGANIZATION NAME:  
**ENGINEERS, OPERATING, AFL-CIO**

ENDING DATE OF PERIOD COVERED:  
**12/31/2004**

Local18membersVoice

FILE NUMBER: **039 - 040**

**SCHEDULE 10 – DISBURSEMENTS TO EMPLOYEES (continued)**

(A) Name <i>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates.)</i>	Gross Salary (before taxes and other deductions)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <i>(Enter employee's job title.)</i>	(D)	(E)	(F)	(G)	(H)
(C) Name of Affiliated Organization <i>(if applicable)</i>	(D)	(E)	(F)	(G)	(H)
KRASNIQI MAINTENANCE	1 6 8 2 1	0	0	0	1 6 8 2 1
KUBIAK ACCOUNTING CLERK	3 5 7 8 7	0	0	0	3 5 7 8 7
NEEDHAMER ACCOUNTING CLERK	3 3 1 0 2	0	0	0	3 3 1 0 2
PARKS ACCOUNTING CLERK	3 6 3 3 7	0	0	0	3 6 3 3 7
WESLEY MAINTENANCE	2 9 4 0 3	0	0	0	2 9 4 0 3

ORGANIZATION NAME:  
ENGINEERS, OPERATING, AFL-CIO

Local18membersVoice

FILE NUMBER: 039 - 040

ENDING DATE OF PERIOD COVERED:  
12/31/2004

### SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
BURK DISPATCHER LORI	1 5 0 4 0	0	0	0	1 5 0 4 0
DAVIS CLERK/SECRETARY MELINDA	3 3 5 8 8	0	0	0	3 3 5 8 8
RECCHY DISPATCHER NICOLE	2 2 0 7 4	0	0	0	2 2 0 7 4
SEGURA CLERK/SECRETARY BONI	1 7 1 8 4	0	0	0	1 7 1 8 4
STEVENS DISPATCHER TERESA	3 9 5 5 4	0	0	0	3 9 5 5 4

ORGANIZATION NAME:  
**ENGINEERS, OPERATING, AFL-CIO**

ENDING DATE OF PERIOD COVERED:  
**12/31/2004**

Local18membersVoice

FILE NUMBER: **039 - 040**

**SCHEDULE 10 - DISBURSEMENTS TO EMPLOYEES (continued)**

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employoo's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
HILLER DISPATCHER DIANNA	4 3 2 0 0	0	0	0	4 3 2 0 0
PORATH CLERK/SECRETARY CHARLENE	3 3 5 4 4	0	0	0	3 3 5 4 4
BOLYARD CLERK/SECRETARY DANETTE	3 2 5 7 6	0	0	0	3 2 5 7 6
MCKIBBEN DISPATCHER JENNIFER	4 3 2 0 0	0	0	0	4 3 2 0 0
COMBS DISPATCHER KIMBERLY	4 3 2 0 0	0	0	0	4 3 2 0 0

ORGANIZATION NAME:  
**ENGINEERS, OPERATING, AFL-CIO**

ENDING DATE OF PERIOD COVERED:  
**12/31/2004**

Local18membersVoice

FILE NUMBER: **039 - 040**

**SCHEDULE 10 – DISBURSEMENTS TO EMPLOYEES (continued)**

(A) Name <small>(List all employees who received more than \$10,000 in total disbursements from your organization and any affiliates.)</small>	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>					
(C) Name of Affiliated Organization <small>(if applicable)</small>					
RIZZARDI CLERK/SECRETARY HOLLY	3 3 5 8 8	0	0	0	3 3 5 8 8
DAVIS CLERK/SECRETARY ADRIANNA	3 3 5 8 8	0	0	0	3 3 5 8 8
SALEM DISPATCHER GILLIAN	4 2 2 3 4	0	0	0	4 2 2 3 4
HALL CLERK/SECRETARY SANDRA	3 3 5 8 8	0	0	0	3 3 5 8 8



ORGANIZATION NAME:  
ENGINEERS, OPERATING, AFL-CIO

Local18membersVoice

FILE NUMBER: 0 3 9 - 0 4 0

ENDING DATE OF PERIOD COVERED:  
12/31/2004

### SCHEDULE 13 – OFFICE & ADMINISTRATIVE EXPENSE (continued)

Description (A)	Amount (B)
MEETING HALL EXPENSE	5 4 9 1
COUNSELING EXPENSE	9 0
ADMIN. EXP-FRINGE BENEFIT OFF.	9 7 5 0
OFFICE EQUIPMENT R&M	1 7 7 7 1
COMPUTER EXPENSES	1 6 1 2 4
TELEPHONE	6 8 3 3 3
PRINTING	6 6 1 5 7
WORKERS COMPENSATION INSURANCE	1 4 7 6 6
BANK CHARGES	7 5 4 6
EMPLOYEE BONDING INSURANCE	3 2 5
INSURANCE EXPENSE	3 7 3 2 9
BUILDING SUPPLIES & MAINT.	7 4 3 6 3
BUILDING UTILITIES EXPENSE	7 9 0 4 8
BUILDING SECURITY EXPENSE	4 4 0 7
BUILDING INSURANCE EXPENSE	1 5 6 1 1
BUILDING REPAIRS EXPENSE	2 1 2 1 8
BUILDING RENTAL EXPENSE	6 9 8 7 8
GARAGE SUPPLIES	3 1 0 4



ORGANIZATION NAME:  
**ENGINEERS, OPERATING, AFL-CIO**

Local18membersVoice

FILE NUMBER: **039 - 040**

ENDING DATE OF PERIOD COVERED:  
**12/31/2004**

## 75. ADDITIONAL INFORMATION

Item Number	
11	<p>OHIO OPERATING ENGINEERS HEALTH AND WELFARE FUND (FILE NO. 147326) - TO PROVIDE MEMBERS AND THEIR DEPENDENTS WITH HEALTH, ACCIDENT AND TERM LIFE INSURANCE.</p> <p>OHIO OPERATING ENGINEERS PENSION FUND (FILE NO. 191011) - TO PROVIDE PENSION BENEFITS TO MEMBERS.</p> <p>APPRENTICESHIP FUND AND SAFETY TRAINING AND EDUCATIONAL TRUST FUND - TO PROVIDE TRAINING AND EDUCATION FOR MEMBERS AND TO IMPROVE SKILLS.</p>

ORGANIZATION NAME:  
**ENGINEERS, OPERATING, AFL-CIO**

Local18membersVoice

FILE NUMBER: **039 - 040**

ENDING DATE OF PERIOD COVERED:  
**12/31/2004**

### **75. ADDITIONAL INFORMATION (continued)**

Item Number	
13	<p>DURING 2004, SEVEN VEHICLES COSTING \$193,295 WERE TRADED IN ON SEVEN NEW VEHICLES. THE SEVEN VEHICLES HAD A BOOK VALUE AND TRADE-IN ALLOWANCE OF \$27,000.</p> <p>IN ADDITION, SEVERAL PIECES OF FURNITURE AND EQUIPMENT AND COMPUTERS WERE DISPOSED OF AN SCRAP. THE EQUIPMENT WAS ON AVERAGE OVER 25 YEARS OLD. NO OTHER FORM OF COMPENSATION WAS RECEIVED FOR THESE ITEMS. THE ORIGINAL COST OF THE ASSETS WAS \$14,084. THE DEPRECIATED BOOK VALUE OF THE ASSETS WAS \$0.</p> <p>TWO AUTOMOBILES WERE TOTALED DURING THE YEAR AND CASH WAS RECEIVED FROM THE INSURANCE COMPANY OF \$12,117. ADDITIONAL INSURANCE PROCEEDS OF \$2,650 WERE RECEIVED FOR MINOR AUTO ACCIDENTS.</p> <p>EFFECTIVE, AUGUST 31, 2004, LOCAL 603 INTERNATIONAL UNION OF OPERATING ENGINEERS WAS MERGED INTO LOCAL 18 (18S). LOCAL 18 RECEIVED LOCAL 603'S NET ASSETS TOTALING \$22,824 AND RECOGNIZED A CORRESPONDING INCREASE IN ITS EQUITY. AS PART OF THE MERGER AGREEMENT, LOCAL 603'S FORMER MEMBERS PAY DUES INTO LOCAL 18 AT THE SAME RATE AS BEFORE THE MERGER. BECAUSE THE DUES RATE FOR LOCAL 603 IS LESS THAN THE APPLICABLE DUES RATE FOR LOCAL 18, THE SHORTFALL IN DUES INCOME WILL BE MADE UP OF THE EQUITY MERGED INTO LOCAL 18. AFTER 18 MONTHS, THE FORMER MEMBERS OF LOCAL 603 WILL PAY THEIR DUES AT THE APPROPRIATE LOCAL 18 RATE. AS A RESULTS OF THIS AGREEMENT, THIS EQUITY WAS REDUCED TO A TOTAL OF \$18,685 AS OF DECEMBER 31, 2004.</p>

ORGANIZATION NAME:  
**ENGINEERS, OPERATING, AFL-CIO**

Local18membersVoice

FILE NUMBER: **039 - 040**

ENDING DATE OF PERIOD COVERED:  
**12/31/2004**

**75. ADDITIONAL INFORMATION (continued)**

Item Number	
14	THE BOOKS AND RECORDS OF LOCAL 18 WERE AUDITED BY OUTSIDE ACCOUNTANTS - GRAFF, BALLAUER, BLANSKI & FRIEDMAN, P.C.

ORGANIZATION NAME:  
**ENGINEERS, OPERATING, AFL-CIO**

Local18membersVoice

FILE NUMBER: **039 - 040**

ENDING DATE OF PERIOD COVERED:  
**12/31/2004**

### **75. ADDITIONAL INFORMATION (continued)**

Item Number	
16	PATRICK SINK RECEIVED MORE THAN \$10,000 IN SALARY, WAGES AND ALLOWANCES FROM THE INTERNATIONAL UNION OF OPERATING ENGINEERS IN HIS CAPACITY AS VICE-PRESIDENT.

ORGANIZATION NAME:  
**ENGINEERS, OPERATING, AFL-CIO**

Local18membersVoice

FILE NUMBER: **0 3 9 - 0 4 0**

ENDING DATE OF PERIOD COVERED:  
**12/31/2004**

## **75. ADDITIONAL INFORMATION (continued)**

Item Number	
75	<p data-bbox="275 289 447 321"><b>SCHEDULE 9</b></p> <p data-bbox="275 358 1934 521">OFFICERS NOT ELECTED IN A REGULAR ELECTION SHALL BE APPOINTED PURSUANT TO ART. XXIV SUBDIV. 1 SECTION (F) OF THE CONSTITUTION OF THE INTERNATIONAL UNION OF OPERATING ENGINEERS, WHICH STATES: "A VACANCY IN ANY OFFICE SHALL BE FILLED BY APPOINTMENT FOR THE UNEXPIRED TERM THEREOF, UPON VOTE OF A MAJORITY OF THE FOLLOWING OFFICERS, PRESIDENT, VICE PRESIDENT, RECORDING-CORRESPONDING SECRETARY, FINANCIAL SECRETARY, TREASURER, AND THE BUSINESS MANAGER WHERE THE LOCAL UNION HAS SUCH A POSITION."</p> <p data-bbox="275 553 1934 740">IN FEBRUARY, 2004, JAMES GARDNER RETIRED AS BUSINESS MANAGER AND PATRICK SINK WAS APPOINTED TO FILL THE POSITION IN ACCORDANCE WITH THE I.U.O.E. CONSTITUTION AS DETAILED ABOVE. IN ADDITION, KEN TRIPLETT WAS APPOINTED AS PRESIDENT, FLOYD JEFFRIES WAS APPOINTED AS VICE PRESIDENT, PREMO PANZARELLO WAS APPOINTED AS TREASURER, JEFFREY MILUM WAS APPOINTED AS CONDUCTOR, STEPHEN DILORETO WAS APPOINTED AS AUDITOR, MARK TOTMAN WAS APPOINTED AS TRUSTEE, JOHN LISCOE AND LATER ROBERT KORAN WERE APPOINTED AS EXECUTIVE BOARD MEMBERS.</p>

ORGANIZATION NAME:  
**ENGINEERS, OPERATING, AFL-CIO**

Local18membersVoice

FILE NUMBER: **039 - 040**

ENDING DATE OF PERIOD COVERED:  
**12/31/2004**

## **75. ADDITIONAL INFORMATION (continued)**

Item Number

75

SCHEDULES 9 AND 10

OWNED VEHICLES ARE DRIVEN BETWEEN FIELD ASSIGNMENTS, OFFICES AND HOMES OF OFFICERS AND EMPLOYEES FOR CONVENIENCE OF THE EMPLOYER. PURSUANT TO THE TAX REFORM ACT OF 1984 (PUBLIC LAW 98-369), A PORTION OF THE USE OF AUTOS WAS CHARGED TO THE DRIVERS AS A TAXABLE FRINGE BENEFIT AND WAS REFLECTED ON W-2 FORMS FOR THE CURRENT YEAR.

ORGANIZATION NAME:  
**ENGINEERS, OPERATING, AFL-CIO**

Local18membersVoice

FILE NUMBER: **039 - 040**

ENDING DATE OF PERIOD COVERED:  
**12/31/2004**

## 75. ADDITIONAL INFORMATION *(continued)*

Item Number	
75	STATEMENT A, LINE 25  FUNDS TOTALING \$18,014 ARE HELD IN ESCROW BY THE UNION TO BE DONATED TO 501(C)(3) CHARITABLE ORGANIZATIONS.

ORGANIZATION NAME:  
**ENGINEERS, OPERATING, AFL-CIO**

Local18membersVoice

FILE NUMBER: **039 - 040**

ENDING DATE OF PERIOD COVERED:  
**12/31/2004**

### **75. ADDITIONAL INFORMATION (continued)**

Item Number	
75	<p data-bbox="262 300 577 332">STATEMENT A, LINE 28</p> <p data-bbox="262 365 1921 495">LOCAL 18, I.U.O.E. HAS ADOPTED FINANCIAL ACCOUNTING STANDARDS BOARD STATEMENT NUMBER 124, WHICH REQUIRES THAT U.S. TREASURY BILLS AND OTHER INVESTMENTS BE STATED AT FAIR MARKET VALUE AS OF DECEMBER 31, 2004. ALTHOUGH THIS ADJUSTMENT DECREASES 2004 NET INCOME AND NET ASSETS, IT DOES NOT AFFECT CASH. THE ORIGINAL COST OF THESE INVESTMENTS WAS \$9,330.625.</p>

ORGANIZATION NAME:  
**ENGINEERS, OPERATING, AFL-CIO**

Local18membersVoice

FILE NUMBER: **0 3 9 - 0 4 0**

ENDING DATE OF PERIOD COVERED:  
**12/31/2004**

### **75. ADDITIONAL INFORMATION (continued)**

Item Number	
15	A CASH SHORTAGE WAS DISCOVERED DURING THE YEAR RESULTING FROM AN APPARENT EMBEZZLEMENT SCHEME. THE AMOUNT OF THE CASH SHORTAGE WAS DETERMINED BY AN INDEPENDENT EXAMINATION OF THE BOOKS. AN INSURANCE CLAIM HAS BEEN SUBMITTED AND THE UNION BELIEVES THAT THE SHORTAGE AMOUNT OF \$5,549 WILL BE RECOVERED IN FULL FROM THE INSURANCE COMPANY.

ORGANIZATION NAME:  
**ENGINEERS, OPERATING, AFL-CIO**

Local18membersVoice

FILE NUMBER: **0 3 9 - 0 4 0**

ENDING DATE OF PERIOD COVERED:  
**12/31/2004**

# TRUSTEE SIGNATURES

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

Trustee Sign: _____	TRUSTEE	Trustee Sign: _____	TRUSTEE
_____		_____	
_____	_____	_____	_____
Date	Telephone Number	Date	Telephone Number