


# FORM LM-2 LABOR ORGANIZATION ANNUAL REPORT

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

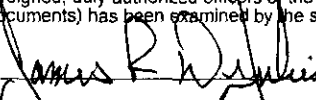
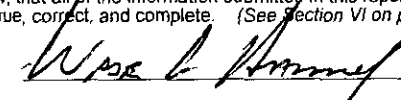
This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

For Official Use Only  E	1. FILE NUMBER <b>024 - 057</b>	2. PERIOD COVERED MO DAY YEAR From <b>07 01 2001</b> Through <b>06 30 2002</b>	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 <b>JAMES</b> Last Name <b>DEJULIIS</b> P.O. Box • Building and Room Number (if any) <b>SUITE A</b> Number and Street <b>5901 HARFORD RD</b> City <b>BALTIMORE</b> State ZIP Code + 4 <b>MD 21214 -</b>
5. DESIGNATION (Local, Lodge, etc.) <b>LU</b>	6. DESIGNATION NUMBER <b>37</b>	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, declares, under the applicable penalties of law, that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See Section VI on penalties in the instructions.)

76. SIGNED: <u></u> Date: <u>9-26-02</u> Telephone Number: <u>410-254-2030</u>	OTHER (If other title, see instructions.)	77. SIGNED: <u></u> Date: <u>9-26-02</u> Telephone Number: <u>410-256-2944</u>	TREASURER (If other title, see instructions.)
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*During the Reporting Period Did Your Organization:*

10. Have a "subsidiary organization" as defined in Section X of the instructions? .....  Yes  No
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? .....  Yes  No
12. Have a political action committee (PAC) fund? .....  Yes  No
13. Acquire or dispose of any goods or property in any manner other than by purchase or sale? .....  Yes  No
14. Have an audit or review of its books and records by an outside accountant or by a parent body auditor/representative? .....  Yes  No
15. Discover any loss or shortage of funds or other property? .....  Yes  No  
*(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? .....  Yes  No
17. Liquidate or reduce any liabilities without disbursement of cash? .....  Yes  No

*(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?
19. What is the date of your organization's next regular election of officers? MO:  YEAR:
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? \$
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	\$ 15.75 per MONTH <i>(Month, Year, etc.)</i>
(b) Initiation Fees	\$ 240.
(c) Transfer Fees	\$ 1.
(d) Work Permits	\$ 5. per DAY <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? .....  Yes  No
24. Did your organization have any contingent liabilities at the end of the reporting period? .....  Yes  No

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

**STATEMENT A - ASSETS AND LIABILITIES**

FILE NUMBER: **0 2 4 - 0 5 7**

*Complete Schedules 1 Through 15 Before Completing Statement A*

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

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



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)**

FILE NUMBER: 024 - 057

**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) _____	
(b) _____	
(c) _____	
(d) _____	
<b>Other Investments</b>	
4. Total Cost	1 0 0 0 0
5. Total Book Value	1 0 0 0 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) STATE OF ISRAEL BOND	1 0 0 0 0
(b) _____	
(c) _____	
(d) _____	
(e) Total from additional pages (if any)	
7. Total of Lines 2 and 5	1 0 0 0 0
The total from Line 7 is entered in ..... Item 29, Column (B)	

Description (A)	Book Value (B)
1. None	0
2.	
3.	
4.	
5.	
6. Total from additional pages (if any)	
7. Total of Lines 1 through 6	0
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. PAYROLL TAXES PAYABLE	9 4 2 0
2. DUE TO BUILDING TRADES	5 1 2 9
3.	
4.	
5.	
6. Total from additional pages (if any)	
7. Total of Lines 1 through 6	1 4 5 4 9
The total from Line 7 is entered in ..... Item 36, Column (D)	

# SCHEDULE 5 - FIXED ASSETS

FILE NUMBER: 0 2 4 - 0 5 7

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		0	0
2. Totals from additional pages (if any)				
3. Buildings (give location): None	0	0	0	0
4. Totals from additional pages (if any)				
5. Automobiles and Other Vehicles	2 4 3 3 4 1	8 7 5 7 9	1 5 5 7 6 2	1 6 0 0 0 0
6. Office Furniture and Equipment	1 3 6 2 2 4	9 1 5 2 5	4 4 6 9 9	4 4 7 0 0
7. Other Fixed Assets	0	0	0	0
8. Totals of Lines 1 through 7	3 7 9 5 6 5	1 7 9 1 0 4	2 0 0 4 6 1	2 0 4 7 0 0
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. 98 FORD CROWN VICTORIA	2 1 8 8 4	8 7 5 4	2 1 8 8 4	2 1 8 8 4
2. 95 LINCOLN TOWN CAR	3 6 5 0 4	0	1 9 0 0	1 9 0 0
3.				
4.				
5. Totals from additional pages (if any)				
6. Totals of Lines 1 through 5	5 8 3 8 8	8 7 5 4	2 3 7 8 4	2 3 7 8 4
7. Less Reinvestments				0
8. Net Sales			2 3 7 8 4	
The total from Line 8 is entered in.....				Item 49

# SCHEDULE 7 – PURCHASE OF INVESTMENTS AND FIXED ASSETS

FILE NUMBER: 0 2 4 - 0 5 7

Description (if land or buildings, give location) (A)	Cost (B)	Book Value (C)	Cash Paid (D)
1. OFFICE FURNITURE	210	210	210
2. COMPUTERS AND PRINTERS	6524	6524	6524
3. (4) 2001 FORD F-150 PICKUPS	114441	114441	114441
4. 2002 LINCOLN TOWN CAR	39200	39200	39200
5. Totals from additional pages (if any)			
6. Totals of Lines 1 through 5	160375	160375	160375
	7. Less Reinvestments		0
	8. Net Purchases		160375
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. SUN TRUST BANK	38073	0	38073	0	0
2.					
3.					
4.					
5. Totals from additional pages (if any)					
6. Totals of Lines 1 through 5	38073	0	38073	0	0

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

# SCHEDULE 9 - ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

FILE NUMBER: 0 2 4 - 0 5 7

(A) Name <small>(List all persons who held office during the reporting period even if they received no salary or other disbursements.)</small>		Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)	
(B) Title <small>(Enter title of officer, such as PRESIDENT or TREASURER.)</small>	Status (C)*						
1.	DEJULIIS JAMES R BUSINESS MGR	8 4 9 4 9	0	1 6 7 5 0	0	1 0 1 6 9 9	
2.	BOWMAN TERRY PRESIDENT	7 0 4 1 8	0	9 3 5 6	0	7 9 7 7 4	
3.	CRIZER EDWARD FINCL SECTY	5 0 5 3 8	0	6 5 6 7	0	5 7 1 0 5	
4.	SHANAHAN JOSEPH RECORDING SECTY	0	0	0	0	0	
5.	VANDOMMELEN LIONEL VICE PRESIDENT	6 4 1 6 0	0	5 8 6 5	0	7 0 0 2 5	
6.	HAMEL WADE TREASURER	0	0	1 2 8 0	0	1 2 8 0	
7.	APPEL RANDEL EXEC BOARD	4 7 5 5 9	0	5 1 9 9	0	5 2 7 5 8	
8.	Totals from additional pages (if any)		4 9 4 2 0	0	1 4 8 9	0	5 0 9 0 9
9.	Totals of Lines 1 through 8		3 6 7 0 4 4	0	4 6 5 0 6	0	4 1 3 5 5 0
				10. Less Deductions	1 2 3 5 9 7		
The total from Line 11 is entered in ..... Item 56				11. Net Disbursements	2 8 9 9 5 3		

\*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: 0 2 4 - 0 5 7

(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>					
1. ANDERSON ORGANIZER N/A QUINTON	4 3 0 6 0	0	2 2 4 9	0	4 5 3 0 9
2. DEJULIIS CONTROLLER N/A CONNIE	4 2 2 5 2	0	0	0	4 2 2 5 2
3. KNEZEVICH-DO OFFICE MGR N/A DEBRA	3 5 4 8 0	0	0	0	3 5 4 8 0
4. FELDER ORGANIZER N/A DARNIEL	2 5 3 7 6	0	1 1 2 3	0	2 6 4 9 9
5. IOZZI SECRETARY N/A DOLORES	2 7 9 2 8	0	0	0	2 7 9 2 8
6. Totals from additional pages (if any)	1 4 1 1 3 9	0	6 8 1 5	0	1 4 7 9 5 4
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	3 1 5 2 3 5	0	1 0 1 8 7	0	3 2 5 4 2 2
			9. Less Deductions	9 5 7 7 2	
The total from Line 10 is entered in .....			10. Net Disbursements	2 2 9 6 5 0	

# SCHEDULE 11 - BENEFITS

FILE NUMBER: 0 2 4 - 0 5 7

Description (A)	To Whom Paid (B)	Amount (C)
1. HEALTH, WELFARE & ANNUITY	OEBF BENEFIT FUND	2 2 9 7 7 8
2. PENSION	CENTRAL PENSION FUND	6 2 7 8 4
3. PENSION	GENERAL PENSION FUND	6 8 3 8 5
4.		
5. Total from additional pages (if any)		
6. Total of Lines 1 through 5		3 6 0 9 4 7
The total from Line 6 is entered in ..... Item 63		

# SCHEDULE 12 - CONTRIBUTIONS, GIFTS & GRANTS

Description (A)	Amount (B)
1. VARIOUS CHARITIES	5 9 5 0
2. VARIOUS LABOR ORGANIZATIONS	1 3 4 8 0
3. APPRENTICE SCHOOL	2 5 0 0
4.	
5.	
6.	
7. Total from additional pages (if any)	
8. Total of Lines 1 through 7	2 1 9 3 0
The total from Line 8 is entered in ..... Item 64	

# SCHEDULE 13 - OFFICE & ADMINISTRATIVE EXPENSE

Description (A)	Amount (B)
1. BANK SERVICE CHARGES	5 0 3 9
2. TRAVEL AND ENTERTAINMENT	1 5 3 4 6
3. OFFICE EXPENSES	2 2 9 2 5
4. PRINTING	2 3 3 0 7
5. EXECUTIVE BOARD	6 5 0
6. VEHICLE EXPENSES	6 1 9 4
7. Total from additional pages (if any)	1 4 3 6 7 9
8. Total of Lines 1 through 7	2 1 7 1 4 0
The total from Line 8 is entered in ..... Item 60	



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

ENDING DATE OF PERIOD COVERED:  
**06/30/2002**

FILE NUMBER: **024 - 057**

**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>							
COLLINS, SR	CURTIS	C	0	0	0	0	0
EXEC BOARD							
FULLER, SR	RICHARD	C	0	0	0	0	0
EXEC BOARD							
HAMILTON	MAURICE	C	0	0	0	0	0
EXEC BOARD							
O'DONNELL	THOMAS	C	4 9 4 2 0	0	1 4 8 9	0	5 0 9 0 9
EXEC BOARD							
RENNINGER	TERRY	C	0	0	0	0	0
EXEC BOARD							
CAMPBELL	THOMAS	C	0	0	0	0	0
TRUSTEE							
EYLER	RONALD	C	0	0	0	0	0
TRUSTEE							
HOLSEY	ROBERT	C	0	0	0	0	0
TRUSTEE							

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

FILE NUMBER: **0 2 4 - 0 5 7**

ENDING DATE OF PERIOD COVERED:  
**06/30/2002**

**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>							
MCGEE, JR	CHARLES	C	0	0	0	0	0
AUDITOR							
SANTUCCI	RONNIE	C	0	0	0	0	0
AUDITOR							
WEDLOCK	HARRY	C	0	0	0	0	0
AUDITOR							
HOPKINS, SR	REGINAL	C	0	0	0	0	0
CONDUCTOR							
BURKETT	GEORGE	C	0	0	0	0	0
GUARD							

ORGANIZATION NAME:  
ENGINEERS, OPERATING, AFL-CIO

FILE NUMBER: 024 - 057

ENDING DATE OF PERIOD COVERED:  
06/30/2002

**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)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
(B) Position <small>(Enter employee's job title.)</small>	(D)	(E)	(F)	(G)	(H)
(C) Name of Affiliated Organization <small>(if applicable)</small>	(D)	(E)	(F)	(G)	(H)
MCQUAY MARK ORGANIZER N/A	4 3 0 5 9	0	2 6 9 0	0	4 5 7 4 9
OWENS TERESA SECRETARY N/A	2 0 5 0 6	0	0	0	2 0 5 0 6
PFIEFER DEBORAH ORGANIZER N/A	4 3 0 5 9	0	4 1 2 5	0	4 7 1 8 4
DELEO DIANE SECRETARY N/A	1 0 3 6 3	0	0	0	1 0 3 6 3
GONZALEZ TERRA ORGANIZER N/A	1 2 9 5 2	0	0	0	1 2 9 5 2

ORGANIZATION NAME:  
ENGINEERS, OPERATING, AFL-CIO

FILE NUMBER: 0 2 4 - 0 5 7

ENDING DATE OF PERIOD COVERED:  
06/30/2002

### 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)
KAHL GARY ORGANIZER N/A	1 1 2 0 0	0	0	0	1 1 2 0 0

ORGANIZATION NAME:  
ENGINEERS, OPERATING, AFL-CIO

FILE NUMBER: 0 2 4 - 0 5 7

ENDING DATE OF PERIOD COVERED:  
06/30/2002

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

Description (A)	Amount (B)
INTEREST EXPENSE	1 8 3 1
LEASED EQUIPMENT	8 5 3 5
MISCELLANEOUS	3 2 6 4
TELEPHONE	2 8 3 9 8
POSTAGE	1 1 8 0 3
UTILITIES	5 5 8 2
RENT	3 8 6 6 1
REPAIR & MAINTENANCE	8 6 3 2
SUBSCRIPTIONS	7 1 4 4
INSURANCE	2 9 8 2 9

ORGANIZATION NAME:  
ENGINEERS, OPERATING, AFL-CIO

FILE NUMBER: 024 - 057

ENDING DATE OF PERIOD COVERED:  
06/30/2002

## 75. ADDITIONAL INFORMATION

Item Number	
75	<p>DISBURSEMENTS FOR OFFICIAL BUSINESS (COLUMN F) INCLUDED ON SCHEDULE 9 FOR JAMES DEJULIIS INCLUDES AIRFARE AND LODGING PAID FOR OTHER OFFICERS WHILE ON OFFICIAL BUSINESS.</p> <p>THE REPORT HAS BEEN SIGNED BY THE BUSINESS MANAGER IN HIS CAPACITY AS THE PRINCIPAL EXECUTIVE OFFICER FOR THE BUSINESS AFFAIRS OF THE LOCAL IN ACCORDANCE WITH THE LOCAL'S BYLAWS.</p>

ORGANIZATION NAME:  
ENGINEERS, OPERATING, AFL-CIO

FILE NUMBER: 024 - 057

ENDING DATE OF PERIOD COVERED:  
06/30/2002

**75. ADDITIONAL INFORMATION (continued)**

Item Number	
12	IUOE LOCAL 37 PAC MD - FILED WITH STATE BOARD OF ELECTION LAWS, ANNAPOLIS, MD AND THE INTERNAL REVENUE SERVICE

ORGANIZATION NAME:  
ENGINEERS, OPERATING, AFL-CIO

FILE NUMBER: 024 - 057

ENDING DATE OF PERIOD COVERED:  
06/30/2002

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

Item Number	
14	AUDIT PERFORMED BY INDEPENDENT CERTIFIED PUBLIC ACCOUNTANTS, KAHLER & ASSOCIATES, PC

ORGANIZATION NAME:  
ENGINEERS, OPERATING, AFL-CIO

FILE NUMBER: 0 2 4 - 0 5 7

ENDING DATE OF PERIOD COVERED:  
06/30/2002

**75. ADDITIONAL INFORMATION (continued)**

Item Number	
16	JAMES R. DEJULIIS - INTERNATIONAL UNION OF OPERATING ENGINEERS, TRUSTEE