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

## FORM LM-2 LABOR ORGANIZATION ANNUAL REPORT

MUST BE USED BY LABOR ORGANIZATIONS WITH \$250,000 OR MORE IN

Form Approved
Office of Management and Budget

No: 1245-0003 Expires: 01/31/2025

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	1. FILE NUMBER 544-423	2. PERIOD COVERED  MO DAY YEAR  From 01/01/2023		here:	s is an amended report, check  ng under the hardship ere:	
E		Through 12/31/2	023		s is a terminal report, check here:	
4. AFFILIATION OR ORGANIZATION NA LABORERS  5. DESIGNATION (Local, Lodge, etc.)		DESIGNATION NUMBER	8. MAILING ADDRESS ( First Name BIENVENIDO P.O. Box - Building and		Last Name BANCHS	
LOCAL UNION		1,776	P O BOX 1794			
7. UNIT NAME (if any)			Number and Street			
LIUNA - NATIONAL GUARD CO	UNCIL					
Are your organization's recoprovide address in Item 69.)			City ABITA SPRINGS		ZIP Code + 4	
provide address in item co.,	Ye	s X No	State LA		70420	
60 ADDITIONAL INFORMATION	J (Text entered will appea	r on last page of form	To enter comments, press the "General Additional Information" button.)			
09. ADDITIONAL INI OKNIATION	( rext entered will appea	Torriast page or form.	To enter comments,	press the General Addition	mai imormation button.)	
Each of the undersigned, duly authorize this report (including the information cor and complete. (See Section VI on penal	ntained in any accompanying do					
70. SIGNED: Janet Vallotton		PRESIDENT	71. SIGNED: BI	ENVENIDO BANCHS	TREASURER	
03/21/2024 Date	209-691-5446 Telephone Number	(If other title, see instructions.)	<u>03/21</u>		(If other title, see instructions.)	

COMPLETE ITEMS 10 THROUGH 21					FILE N	JMBER: 544	1-423
10. During the reporting period did the labor organization create participate in the administration of a trust or other fund or organidefined in the instructions, which provides benefits for members	ization, as	19. What is the date of the labor organization's next regular election of officers?					
	es No X	20. How many member the end of the reportir					1,129
11(a). During the reporting period did the labor organization hav action committee (PAC) fund?	ve a political	21. What are the labo					
11(b). During the reporting period did the labor organization have organization as defined in Section X of these Instructions?	ve a subsidiary	l <del>1</del>	tes of Du				, -, -
12. During the reporting period did the labor organization have a review of its books and records by an outside accountant or by		Dues/Fees	Amount	1	Unit	Minimum	Maximum
<ul><li>auditor/representative?</li><li>13. During the reporting period did the labor organization discov</li></ul>	Yes No X	(a) Regular Dues/Fees	22	per	pay period	22	22
or shortage of funds or other assets? (Answer "Yes" even if ther				per			
14. What is the maximum amount recoverable under the labor of fidelity bond for a loss caused by any officer, employee or agent organization who handled union funds?	organization's	(b) Working Dues/Fees		per			
organization who handled dillon funds:	\$160,000			per			
15. During the reporting period did the labor organization acquir of any assets in any manner other than by purchase or sale?	re or dispose Yes No X	(c) Initiation Fees					
16. Were any of the labor organization's assets pledged as secuencumbered in any other way at the end of the reporting period	urity or ? Yes No X	(d) Transfer Fees		per			
17. Did the labor organization have any contingent liabilities at t the reporting period?	the end of			ber			
18. During the reporting period did the labor organization have a in its constitution and bylaws, other than rates of dues and fees, practices/procedures listed in the instructions?		(e) Work Permits					

If the answer to any of the above questions is "Yes," provide details in Item 69 (Additional Information) as explained in the instructions for each item.

## Complete Schedules 1 Through 20 Before Completing Statement A

# Assets

ASSETS	Schedule Number	Start of Reporting Period (A)	End of Reporting Period (B)
22. Cash		\$332,809	\$330,861
23. Accounts Receivable	1	\$0	\$0
24. Loans Receivable	2	\$0	\$0
25. U.S. Treasury Securities		\$0	\$0
26. Investments	5	\$0	\$0
27. Fixed Assets	6	\$247	\$0
28. Other Assets	7	\$0	\$0
29. TOTAL ASSETS		\$333,056	\$330,861

# Liabilities

LIABILITIES	Schedule Number	Start of Reporting Period (C)	End of Reporting Period (D)
30. Accounts Payable	8	\$25,188	\$5,155
31. Loans Payable	9	\$0	\$0
32. Mortgages Payable		\$0	\$0
33. Other Liabilities	10	\$3,926	\$4,857
34. TOTAL LIABILITIES		\$29,114	\$10,012

35. NET ASSETS (Item 29 Less Item 34)	\$303,942	\$320,849
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## **STATEMENT B - RECEIPTS AND DISBURSEMENTS**

Complete Schedules 1 Through 20 Before Completing Statement B

Item CASH RECEIPTS	SCH#	AMOUNT
36. Dues and Agency Fees		\$641,710
37. Per Capita Tax		\$0
38. Fees, Fines, Assessments, Work Permits		\$0
39. Sale of Supplies		\$0
40. Interest		\$11,054
41. Dividends		\$0
42. Rents		\$0
43. Sale of Investments and Fixed Assets	3	\$0
44. Loans Obtained	9	\$0
45. Repayments of Loans Made	2	\$0
46. On Behalf of Affiliates for Transmittal to Them		\$0
47. From Members for Disbursement on Their Behalf		\$40,901
48. Other Receipts	14	\$50,943
49. TOTAL RECEIPTS		\$744,608

Item CASH DISBURSEMEN	ITS	SCH#	AMOUNT
50. Representational Activities			\$236,647
51. Political Activities and Lobbying	g	16	\$0
52. Contributions, Gifts, and Grant	S	17	\$0
53. General Overhead		18	\$167,439
54. Union Administration		19	\$119,659
55. Benefits		20	\$102,568
56. Per Capita Tax			\$57,672
57. Strike Benefits			\$0
58. Fees, Fines, Assessments, etc	<b>)</b> .		\$0
59. Supplies for Resale			\$0
60. Purchase of Investments and I	ixed Assets	4	\$0
61. Loans Made		2	\$0
62. Repayment of Loans Obtained	l	9	\$0
63. To Affiliates of Funds Collected	d on Their Behalf		\$0
64. On Behalf of Individual Membe	ers		\$63,502
65. Direct Taxes			\$0
66. Subtotal			\$747,487
67. Withholding Taxes and Payroll	Deductions		
67a. Total Withheld	\$100,069		
67b. Less Total Disbursed	\$99,138		
67c. Total Withheld But Not Disbursed			\$931
68. TOTAL DISBURSEMENTS (L	ine 66-Line 67c)		\$746,556

Entity or Individual Name (A)	Total Account Receivable (B)	90-180 Days Past Due (C)	180+ Days Past Due (D)	Liquidated Account Receivable (E)
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12. Total of all itemized accounts receivable				
13. Totals from all other accounts receivable				
14.Totals (Total of Column(B) will be automatically entered in Item 23, Column (B))				

Form LM-2 (Revised 2010)

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	Loans Outstanding at	
business enterprises regardless of amount. (A)	Start of Period (B)	During Period (C)	Cash (D)(1)	Other Than Cash (D)(2)	End of Period (E)
1. Name:					
Purpose:					
Security:					
Terms of Repayment:					
2. Name:					
Purpose:					
Security:					
Terms of Repayment:					
3. Name:					
Purpose:					
Security:					
Terms of Repayment:					
4.Total of loans not listed above					
5.Total of all lines above					
Totals will be automatically entered in	Item 24 Column (A)	Item 61	Item 45	Item 69 with Explanation	Item 24 Column (B)

## SCHEDULE 3 - SALE OF INVESTMENTS AND FIXED ASSETS

Cost (B)	Book Value (C)	Gross Sales Price (D)	Amount Received (E)
		Less Reinvestments	
(The total from Net Sales Line will be automatically entered in			\$0
	(B)	(The total from Net Sales Line will be automatically entered in	(The total from Net Sales Line will be automatically entered in Net Sales

## SCHEDULE 4 - PURCHASE OF INVESTMENTS AND FIXED ASSETS

Description (if land or buildings, give location) (A)		Cost (B)	Book Value (C)	Cash Paid (D)
1.				
Total of all lines above			Lana Daiment Cont	
	(The total from Net Purchases Line will be automatically entered in Item 60.)		Less Reinvestments  Net Purchases	
				\$0

SCHEDULE 5 - INVESTMENTS FILE NUMBER: 544-423

Description (A)	Amount (B)
Marketable Securities	
A. Total Cost	
B. Total Book Value	
C. List each marketable security which has a book value over \$5,000 and exceeds 5% of Line B. Also, list each subsidiary for which separate reports are attached.	
Other Investments	
D. Total Cost	
E. Total Book Value	
F. List each other investment which has a book value over \$5,000 and exceeds 5% of Line E. Also, list each subsidiary for which separate reports are attached.	
G. Total of Lines B and E (Total will be automatically entered in Item 26, Column (B))	

Description (A)	Cost or Other Basis (B)	Total Depreciation or Amount Expensed (C)	Book Value (D)	Value (E)
A. Land				
B. Buildings				
C. Automobiles and Other Vehicles				
D. Office Furniture and Equipment	\$8,923	\$8,923	\$0	\$1,000
E. Other Fixed Assets				
F. Total of Lines A through E (Column (D) Total will be automatically entered in Item 27, Column (B))	\$8,923	\$8,923	\$0	\$1,000

Description (A)	Book Value (B)
1.	
Total (Total will be automatically entered in Item 28, Column (B))	

Entity or Individual Name (A)	Total Account Payable (B)	90-180 Days Past Due (C)	180+ Days Past Due (D)	Liquidated Account Payable (E)
Credit Card Payable	\$5,155			
Total of all itemized accounts payable	\$5,155			
Totals from all other accounts payable				
Totals (Total for Column (B) will be automatically entered in Item 30, Column (D))	\$5,155			

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 Cash (D)(1)	Made During Period Other Than Cash (D)(2)	Loans Owed at End of Period (E)
1.					
Total Loans Payable					
Totals will be automatically entered in	Item 31 olumn (C)	Item 44	Item 62	Item 69 with Explanation	Item 31 Column (D)

Description (A)	Amount at End of Period (B)
401k Withholdings	\$4,857
Total Other Liabilities (Total will be automatically entered in Item 33, Column (D))	\$4,857

## SCHEDULE 11 - ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

						(D)	(E)	<b>(F)</b>	(0)	4.0	
	(A) Name	(B) Title		(C) Status	Gros Disbursen	(D) s Salary nents (before eductions)	(E) Allowances Disbursed	(F) Disbursements for Official Business	(G) Other Disbursements not reported in (D) through (F)	(H) TOTAI	L
1 A	Last Name Vallotton		irst Name Ja'net	Middle Initial							
В	Recording S		Janet			\$97,456				\$	97,456
С	С	,									
I	Sched Representation		50%	Schedule 16 Political Activities an			Schedule 17 Contributions	Schedule 18 General Overhea		chedule 19 Iministration	50%
2 A	Last Name Banchs		First Name Ben	Middle Initial		<b>#</b> 400 <b>F</b> 40					00.540
В	Business Ma	nager / Sec/Tr				\$123,540				\$1	23,540
С	С										
I	Sched Representation		50%	Schedule 16 Political Activities an			Schedule 17 Contributions	Schedule 18 General Overhea		chedule 19 Iministration	50%
3 A	Last Name Lawson		First Name Brian	Middle Initial		•					•
В	President					\$0					\$0
С	С										
1	Sched Representation		100%	Schedule 16 Political Activities an			Schedule 17 Contributions	Schedule 18 General Overhea		chedule 19 Iministration	
4 A	Last Name		First Name Stafford	Middle Initial							
В	Riley Vice Preside		Stanioru			\$0					\$0
С	С										
I	Sched Representation		100%	Schedule 16 Political Activities an	d Lobbying		Schedule 17 Contributions	Schedule 18 General Overhea		chedule 19 dministration	
5 A	Last Name Adelbai		First Name Christina	Middle Initial							
В	Board memb	er		_		\$0					\$0
С	С										
I	Sched Representation		100%	Schedule 16 Political Activities an			Schedule 17 Contributions	Schedule 18 General Overhea		chedule 19 Iministration	

## SCHEDULE 11 - ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

					(D)		(E)	(F)	(G)	(H)	
	(A) Name	(B) Title		(C) Status	Gross Salary Disbursements (befo any deductions)	ore	Allowances Disbursed	Disbursements for Official Business	Other Disbursement not reported in (D) through (F	ents TOTA	L
6 A	Last Name		rst Name	Middle Initial							
В	Ard Board Memb		atherine			\$0					\$0
С		)CI									
	C Sched	lulo 15		Schedule 16			Schedule 17	Schedule 18		Schedule 19	
I	Representation		00%	Political Activities and			Contributions	General Overhea	ad	Administration	
7 A	Last Name Herzfeldt		rst Name red	Middle Initial							
В	Board Memb	er				\$0					\$0
С	С										
I	Sched Representation		00%	Schedule 16 Political Activities and			Schedule 17 Contributions	Schedule 18 General Overhea	nd	Schedule 19 Administration	
8 A	Last Name Rodriguez		rst Name uis	Middle Initial		•					
В	Board memb	er				\$0					\$0
С	С										
I	Sched Representation		00%	Schedule 16 Political Activities and			Schedule 17 Contributions	Schedule 18 General Overhea	nd	Schedule 19 Administration	
9 A	Last Name		rst Name	Middle Initial							
В	Ross Board Memb		iane			\$0					\$0
С		Dei									·
$\vdash$	C Sched	lulo 15		Schedule 16			Schedule 17	Schedule 18		Schedule 19	
I	Representation		00%	Political Activities and			Contributions	General Overhea	ad	Administration	
<sup>10</sup> A	Last Name Saybolt		rst Name teven	Middle Initial							
В	Board Memb	er				\$0					\$0
С	С										
I	Sched Representation		00%	Schedule 16 Political Activities and			Schedule 17 Contributions	Schedule 18 General Overhea	ad	Schedule 19 Administration	

## SCHEDULE 11 - ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

	(A) Name	(B) Title		(C) Status	(D) Gross Salary Disbursements (be any deductions		(E) Allowances Disbursed	(F) Disbursements for Official Business	(G) Other Disbursements not reported in (D) through (F)	(H) TOTA	L
11 A	Last Name Schoenfelde		irst Name David	e Middle Initial							
В	Board Memb	per				\$0					\$0
С	С										
I		lule 15 onal Activities	100%	Schedule 16 Political Activities an			Schedule 17 Contributions	Schedule 18 General Overhe		chedule 19 Iministration	
12 A	Last Name Skidmore		irst Name an	e Middle Initial		Φ0					40
В	Board Memb	per				\$0					\$0
С	С										
I		onal Activities	100%	Schedule 16 Political Activities an			Schedule 17 Contributions	Schedule 18 General Overhe		chedule 19 Iministration	
13 A	Last Name		irst Name	e Middle Initial				1	<u> </u>		
В	White Board memb		Cevin			\$0					\$0
С	С										
I		lule 15 onal Activities	100%	Schedule 16 Political Activities an			Schedule 17 Contributions	Schedule 18 General Overhe		chedule 19 Iministration	
14 A	Last Name Holland		irst Name	e Middle Initial							
В	Auditor		uule			\$0					\$0
С	С										
I		lule 15 onal Activities	100%	Schedule 16 Political Activities an			Schedule 17 Contributions	Schedule 18 General Overhe		chedule 19 Iministration	
15 A	Last Name Andrew		irst Name	e Middle Initial							
В	Sergeant-at-		ayme			\$0					\$0
С	С										
I		lule 15 onal Activities	100%	Schedule 16 Political Activities and			Schedule 17 Contributions	Schedule 18 General Overhe		chedule 19 Iministration	
TOT	AL OFFICER		NTO		<b>6000</b>	006	<b>60</b>	<b>P</b> O	1 00		220 006
		DISBURSEME	ENIS		\$220	,990	\$0	\$0	\$0	\$	220,996
	S DEDUCTION									<b>6</b>	220.006
NEI	DISBURSE	IVIEN I S								1 \$\psi_1	220,996

## SCHEDULE 12 - DISBURSEMENTS TO EMPLOYEES

	(A) Name	(B) Title		(C) Other Payer	Gros Disburser	(D) ss Salary ments (befo eductions)	ore	(E) Allowances Disbu	rsed		(F) sbursements fficial Business		(G) er Disburs not reporte (D) througl	ed in	(H) TOTA	L
1 A	Last Name Banchs		rst Name onda	e Middle Initial												
В	Admin					\$58,43	32								\$	558,432
С	None															
I		dule 15 onal Activities		Schedule 16 Political Activities an				Schedule 17 Contributions			Schedule 18 General Overhea	ıd	100%		chedule 19 ministration	
															Γ	
2. TOT/	AL RECEIVED BY	ALL OTHER EMPLO	YEES M	AKING \$10,000 OR LESS									_			\$0
I	Sched Representation		0	Schedule 16 Political Activities an		0		Schedule 17 Contributions		0	Schedule 18 General Overhea	ad	0		chedule 19 Iministration	0
ТОТ	AL EMPLOY	'EE DISBURSE	MENT	TS .		58,432.0	00		\$0		\$0			\$0		\$58,432
LES	S DEDUCTION	ONS														
NET	DISBURSE	MENTS														\$58,432

Category of Membership (A)	Number (B)	Voting Eligibility (C)		
Dues Paying Members	1,129	Yes X		
Members (Total of all lines above)	1,129			
Agency Fee Payers*	0			
Total Members/Fee Payers	1,129			
*Agency Fee Payers are not considered members of the labor organization.				

## **DETAILED SUMMARY PAGE - SCHEDULES 14 THROUGH 19**

FILE NUMBER: 544-423

	1. Named Payer Itemized Receipts	\$50,000	]		Named Payee Itemized Disbursements	\$0
	2. Named Payer Non-itemized Receipts	\$0	1		2. Named Payee Non-itemized Disbursements	\$0
SCHEDULE 14	3. All Other Receipts	\$943		SCHEDULE 17	3. To Officers	\$0
OTHER RECEIPTS	4. Total Receipts (add Lines 1 through 3)	\$50,943	ITEM 48	CONTRIBUTIONS, GIFTS,& GRANTS	4. To Employees	\$0
					5. All Other Disbursements	
					6.Total Disbursements (add Lines 1 through 5)	\$0
	Named Payee Itemized Disbursements	\$5,230	]		Named Payee Itemized Disbursements	\$0
SCHEDULE 15	2. Named Payee Non-itemized Disbursements	\$48,468		SCHEDULE 18 GENERAL OVERHEAD	Named Payee Non-itemized Disbursements	\$57,129
	3. To Officers	\$110,498			3. To Officers	\$0
REPRESENTA-	4. To Employees	\$0			4. To Employees	\$58,432
TIONAL ACTIVITIES	5. All Other Disbursements	\$72,451			5. All Other Disbursements	\$51,878
	6. Total Disbursements (add Lines 1 through 5)	\$236,647			6. Total Disbursements (add Lines 1 through 5)	\$167,439
			•		•	
	Named Payee Itemized Disbursements	\$0			Named Payee Itemized Disbursements	\$0
	2. Named Payee Non-itemized Disbursements	\$0			2. Named Payee Non-itemized Disbursements	\$0
SCHEDULE 16	3. To Officers	\$0	ITEM	SCHEDULE 19	3. To Officers	\$110,498
POLITICAL ACTIVITIES AND	4. To Employees	\$0		UNION ADMINISTRATION	4. To Employees	\$0
ACTIVITIES AND  -	5. All Other Disbursements		51		5. All Other Disbursements	\$9,161
	6. Total Disbursements (add Lines 1 through 5)	\$0			6. Total Disbursements (add Lines 1 through 5)	\$119,659

## **SCHEDULE 14 - OTHER RECEIPTS**

Name and Address (A)	Purpose (C)	Date (D)	Amount (E)
Name LIUNA PSW	Organizing Reimbursements	02/22/23	\$50,000
P.O. Box			
Street			
<sup>City</sup> Sacramento			
State CA			
Zip Code			
(B) Type or Classification			
Organizing Reimbursements			
	Total Itemized Transactions with this Payee/Payer		\$50,000
	Total Non-Itemized Transactions with this Payee/Payer		
	Total of All Transactions with this Payee/Payer for This Sched	\$50,000	

## **SCHEDULE 15 - REPRESENTATIONAL ACTIVITIES**

Name and Address (A)	Purpose (C)	Date (D)	Amount (E)
Name Budget Car Rental P.O. Box			
Street 725 N. Causeway Blvd City Mandeville			
State LA			
Zip Code 70448			
(B) Type or Classification  Car Rental Service			
	Total Itemized Transactions with this Payee/Payer		
	Total Non-Itemized Transactions with this Payee/Payer		\$6,131
	Total of All Transactions with this Payee/Payer for This Schedule		\$6,131

## **SCHEDULE 15 - REPRESENTATIONAL ACTIVITIES**

Name and Address (A)	Purpose (C)	Date (D)	Amount (E)
Name Hilton Hotels P.O. Box	Lodging	05/26/23	\$5,230
Street 7930 Jones Branch Dr  City McLean  State VA			
Zip Code 22102			
(B) Type or Classification	]		
Lodging			
	Total Itemized Transactions with this Payee/Payer		\$5,230
	Total Non-Itemized Transactions with this Payee/Payer		\$15,637
	Total of All Transactions with this Payee/Payer for This Schedule		\$20,867

## **SCHEDULE 15 - REPRESENTATIONAL ACTIVITIES**

Name and Address (A)	Purpose (C)	Date (D)	Amount (E)
Name United Airlines P.O. Box			
Street 233 South Wacker Drive City Chicago State IL			
Zip Code 60606			
(B) Type or Classification Airline Travel			
Time Travel			
	Total Itemized Transactions with this Payee/Payer		
	Total Non-Itemized Transactions with this Payee/Payer		\$26,700
	Total of All Transactions with this Payee/Payer for This Schedule		\$26,700

## **SCHEDULE - 16 - POLITICAL ACTIVITIES AND LOBBYING**

Name and Address (A)	Purpose (C)	Date (D)	Amount (E)
Name		, ,	
P.O. Box			
Street			
City			
State <sub>-1</sub>			
Zip Code			
(B) Type or Classification			
	Total Itemized Transactions with this Payee/Payer		
	Total Non-Itemized Transactions with this Payee/Payer		
	Total of All Transactions with this Payee/Payer for This Sched	dule	\$0

Name and Address (A)	Purpose (C)	Date (D)	Amount (E)
Name			
P.O. Box			
Street			
City			
State -1			
Zip Code			
(B) Type or Classification			
	Total Itemized Transactions with this Payee/Payer	1	
	Total Non-Itemized Transactions with this Payee/Payer		
	Total of All Transactions with this Payee/Payer for This Schedule		\$0

Name and Address (A)	Purpose (C)	Date (D)	Amount (E)
Name Eberts & Harrison			
P.O. Box			
Street 1604 Ridgeside Dr			
<sup>City</sup> Mt Airy			
State MD			
Zip Code 21771			
(B) Type or Classification			
Auto Insurance			
	Total Itemized Transactions with this Payee/Payer		
	Total Non-Itemized Transactions with this Payee/Payer		\$5,084
	Total of All Transactions with this Payee/Payer for This Sche	dule	\$5,084

## **SCHEDULE 18 - GENERAL OVERHEAD**

	Name and Address (A)	Purpose (C)	Date (D)	Amount (E)
Name	Enterprise Fleet Management			
P.O. Box				
	600 Corporate Park Drive			
	St. Louis			
State	MO			
Zip Code	63105			
(B) Type or	Classification	]		
Auto Leasi	ng			
		Total Itemized Transactions with this Payee/Payer	•	
		Total Non-Itemized Transactions with this Payee/Payer		\$15,797
		Total of All Transactions with this Payee/Payer for This Sched	dule	\$15,797

## **SCHEDULE 18 - GENERAL OVERHEAD**

Name and Address (A)	Purpose (C)	Date (D)	Amount (E)
Name Google G-Suite			
P.O. Box			
Street 1600 Amphitheatre Parkwa			
<sup>City</sup> Mountain View			
State CA			
Zip Code 94043			
(B) Type or Classification			
Software Production			
	Total Itemized Transactions with this Payee/Payer	•	
	Total Non-Itemized Transactions with this Payee/Payer		\$5,912
	Total of All Transactions with this Payee/Payer for This Sche	dule	\$5,912

Name and Address (A)	Purpose (C)	Date (D)	Amount (E)
Name Griffin & Furman LLC			
P.O. Box 983			
Street			
City Mandeville			
State LA			
Zip Code 70470			
(B) Type or Classification			
Certified Public Accountants			
	Total Itemized Transactions with this Payee/Payer	•	
	Total Non-Itemized Transactions with this Payee/Payer		\$6,825
	Total of All Transactions with this Payee/Payer for This Sc	hedule	\$6,825

	Name and Address (A)	Purpose (C)	Date (D)	Amount (E)
Name	Leo Gannan			
P.O. Box				
Street	1049 Retriever Court			
	Hernando			
State	FL			
Zip Code	34442			
(B) Type or	Classification	]		
Consulting				
		Total Itemized Transactions with this Payee/Payer	•	
		Total Non-Itemized Transactions with this Payee/Payer		\$12,000
		Total of All Transactions with this Payee/Payer for This Sched	dule	\$12,000

Name and Address (A)	Purpose (C)	Date (D)	Amount (E)
Name LiveAXS			
P.O. Box			
Street 425 W. 11th Street			
City Los Angeles			
State CA			
Zip Code 90015			
(B) Type or Classification			
Software Membership Management			
	Total Itemized Transactions with this Payee/Payer		
	Total Non-Itemized Transactions with this Payee/Paye	er -	\$5,187
	Total of All Transactions with this Payee/Payer for This	s Schedule	\$5,187

	Name and Address (A)	Purpose (C)	Date (D)	Amount (E)
Name	Minahan & Muther			
P.O. Box				
Street	5132 West 26th Ave			
City	Denver			
State	CO			
Zip Code	80212			
(B) Type o	r Classification	]		
Attorney				
		Total Itemized Transactions with this Payee/Payer	•	
		Total Non-Itemized Transactions with this Payee/Payer		\$6,324
		Total of All Transactions with this Payee/Payer for This Sched	dule	\$6,324

## **SCHEDULE 19 - UNION ADMINISTRATION**

Name and Address (A)	Purpose (C)	Date (D)	Amount (E)
Name	· ·		
P.O. Box			
Street			
City			
State -1			
Zip Code			
(B) Type or Classification			
(-) · JPC C.			
	Total Itemized Transactions with this Payee/Payer		
	Total Non-Itemized Transactions with this Payee/Payer		
	Total of All Transactions with this Payee/Payer for This Schedule		0

Description (A)	To Whom Paid (B)	Amount (C)
Health Insurance	Humana	\$31,698
2. Life Insurance	USAA	\$504
3. Dental Insurance	Ameritas Life	\$896
4. Pension Benefits	LIUNA Staff and Affiliates Pension Fund	\$69,470
Total of all lines above (Total will be automatically entered in Item 55.)		

## 69. ADDITIONAL INFORMATION SUMMARY

FILE NUMBER: 544-423

Schedule 8, Row1:Schedule 8, Row1::

Schedule 13, Row1::Members

Schedule 13, Row1:Schedule 13, Row1:::