Commonwealth of Massachusetts Divison of Labor Relations 19 Staniford Street, 1st Floor Boston, Massachusetts 02114

## EMPLOYEE ORGANIZATION FINANCIAL REPORT

(Form 2)

Period covered by this report:			
From: To:			

	ant to M.G.L. c. 150E, §14, within sixty days after the end of sial report in the form of a balance sheet and operating statemen		loyee organizations must file a de	tailed written		
1a.	Full legal name of employee organization, including any local or district designation and any affiliation					
1b.	Name and address of secretary or other officer to whom notices may be mailed					
	Is this a new address?  Yes No					
Since	e filing the last Employee Organization Information I	Report (Form 1):	2c. Current No. of Mo	embers		
2a.	Has there been a change in officers?  Yes	□ No				
2b. Have there been other changes? Yes No If you answered "Yes" to either question 2a or 2b, you are required to file an updated Employee Organizational Information Report (Form 1).  Are records kept at the a in question No. 1b?  Yes No			<u> </u>	lress listed		
			If "No," please list the address vare kept in question No. 34.	where records		
Duri	ng the reporting period, did your organization directly	y or indirectly:		Yes No		
3.	Make any loans to a business enterprise?	any other expenses	which together with			
4.	Pay any employee a total of salary, allowances and any other expenses, which, together with payments from any organization affiliated with it or its national amounted to more than \$10,000?					
5.						
Create or participate in the administering of a trust or other fund or organization, whose primary 6. purpose is to provide benefits for members or their beneficiaries?  If you answered "yes" to any of the above questions, please explain in question No. 34.						
BALANCE SHEET						
ASSETS LIABILITIES						

			BALANC	
ASSETS				
		Start of	End of	
		Reporting	Reporting	
Description		Period	Period	
7.	Cash on hand and in banks			
8.	Loans and notes receivable			
9.	U.S. Government bonds			
10.	Land and buildings			
11.	Other investments			
12.	Other assets			
13.	Total Assets			
	(add lines 2-7)			

	STIELT					
	LIABILITIES					
			Start of	End of		
			Reporting	Reporting		
	Description		Period	Period		
	14. Accounts and bills payable			·		
	<ul><li>15. Loans and notes payable</li><li>16. Mortages payable</li></ul>			•		
	17. Other liabilities			•		
				•		
	18.	Total Liabilities				
		(add lines 14-17)				

		OPERATING S	STA	ATE	MENT		
RECEIPTS DISBURSEMENTS							
Descr	iption	Amount		Desci	ription		Amount
19.	Dues			24.	Affiliation payments		
20.	Agency service fees			25.	Payments to officers		
21.	Fees, fines, assessments, and work permi	ts		26.	Payments to employees		
22.	Other receipts			27.	Officer and administrati	ve expense	
				28.	Professional fees		
				29.	Loans made by your org	anızatıon	
				30.	Payments for benefits		
23.	Total Passints			31. 32.	Other disbursements Total		
23.	Total Receipts (add lines 19-22)			32.	(add lines 24-31)		
	(add filles 19-22)				(aud IIIICS 24-31)		
	33	OFFICERS AND	DIS	SRU	RSEMENTS		
		OTTICERS TIND		<b>3D</b> C.	ROLIVILIVID	Status	
Name	and title					(see insructions)	Amount
1 (dille	and the					(See misraetrons)	7 Hillount
24	ADDITIONAL INFORMATION (i	f more space is no	da	d off	ach additional shoots)		
34. F	ADDITIONAL INFORMATION (I	i more space is nee	uec	u, au	acii additional sheets)		
Each	of the undersigned officers of the above er	nployee organization de	ecla	ares th	at he or she is the officer r	equired to sign this re	eport and
	ll of the information contained in this repo			on co	ntained in this report and a	any accompanying do	cuments, is
to the best of his or her knowledge and belief, true, correct, and complete.							
	:4	<u> </u>			(1		D (
(pres	sident)	Date			(treasurer)		Date

Whoever knowingly files a state or report pursuant to M.G.L. c.14, which report is false in any material representation, shall be punished by a fine of not more than five thousand dollars. M.G.L. c.150E, §15.