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

For Official Use Only

FORM LM-15A **REPORT ON SELECTION OF DELEGATES AND OFFICERS**

Form approved Office of Management and Budget No. 1215-0188 Expires 09-30-2011

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. 461.

	TO ACCOMPANY TRUSTEESHIP REPORT, FORM LM-15, OR TERMINAL TRUSTEESHIP REPORT, FORM LM-16							
	READ THE INSTRUCT	IONS CAREFULLY	BEFORE COMPL	ETING THIS REPOR	г			
1. File Number of Lal	oor Organization Held in Trusteeship		2. Period Covered By This Report From:	Month/Day/Year (mm/dd/yyyy)	Through:	Month/Day/Year (mm/dd/yyyy)		
3. Labor Organization Affiliation or Organ	n Held in Trusteeship ization Name		P.O. Box, Buildin	g and Room Number,	if any			
Designation (Local,	Lodge, etc.)		Number and Stre	et				
Designation Numb	er (Prefix/Number/Suffix)		City					
Unit Name (if any)			State		ZIP Code + 4	Ļ		
	f Delegates Complete Part A if during th legates or would have sent delegates if no							
	ntion or other policy determining body:		-	8. How were the deleg	gates nominated?			
a. Name of body				a. At a membership meeting b. By written nomination c. By petition				
b. Location(s)				d. Other				
c. Type of body				 Was every "membe candidate (subject to improved)2 	0 0	ifications uniformly		
d. Date(s) of meetin	organization represented?		Yes No	imposed)? 10. How was the mer	nbership notified	Yes No of the date, time and		
6. Did the delegates from the trusteed organization participate in the business of the convention				place of the election? a. Mail notice				
or other policy-determining body in the same manner as other delegates? Yes No 7. How were the delegates from the trusteed organization selected?			Yes NO	b. Posting at work site c. Union newspaper				
a. Appointed b	•			d. Other	ърареі			
b. Elected by c. Other	the membership Complete Items 8 through 12 only if Item	Z a is abaakad		11. Was every "membe to reasonable quali imposed)?	r in good standing" ifications uniformly	eligible to vote (subject Yes No		
				12. Was the election	held by "secret b	allot"? Yes No		
		Signa						
of perjury and other	ned, duly authorized officials of the labor applicable penalties of law, that all of the n examined by the signatory and is, to the structions.)	information submitte	d in this report (inc gned's knowledge	luding the information and belief, true, correc	contained in any t, and complete.	accompanying (See the section		
21. Signed Title		President (if other title, see instructions.)	23. Signed Title			Trustee (if other title, see instructions.)		
On / / / Date	/ Telephone Number	-	On / Date	/	lephone Number			
22. Signed Title		Treasurer (if other title, see instructions.)	24. Signed Title			Trustee (if other title, see instructions.)		
On / /	/ Telephone Number	-	On // Date	/	lephone Number			

Form LM-15A (2003)

Name of Labor Organization Held In Trusteeship	File Number	Ending Date of the Period	Ending Date of the Period Covered				
Part B - Election of Officers. Complete Part B If during the reporting period answer to any of the questions in Part B is "No", Provide details in Item 20.)	the labor organization imposing the	l trusteeship held an election of offic	cers. (If t	the			
13. What was the date of the election? (mm/dd/yyyy) / /	15. Did the trusteed organization	15. Did the trusteed organization participate in the election? Yes No					
14. List the title of each officer elected:							
	16. How were the officers elected?						
	a. At a convention reported in Item 4						
	b. By referendum						
	c. Other						
	Complete Items 17 through 19 c	only if Item 16.b. is checked.					
	17. Was an election notice mailed to members at their last known home						
	address at least 15 days price	or to the date of the election?	Yes	No			
	18. Was every "member in good standing" eligible to vote (subject to						
	reasonable qualifications unif		Yes	No			
	19. Was the election held by "see	cret ballot'?	Yes	No			

20. Additional Information