FORM LM-2 LABOR ORGANIZATION ANNUAL REPORT

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

MUST BE USED BY LABOR ORGANIZATIONS WITH \$250,000 OR MORE IN TOTAL ANNUAL RECEIPTS AND LABOR ORGANIZATIONS IN TRUSTEESHIP

Form Approved Office of Management and Budget No. 1245-0003 Expires: 07-31-2019

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.

		RE	AD THE INSTRUCTIONS	S CAREFUL	LY BEFORE PREPARING THIS RE	EPORT.		
For Official Use Only	1. FILE NUMBER 543-299	2. PERIOD From Through	COVERED 07/01/2016 06/30/2017	(b) H	MENDED - Is this an amended repo ARDSHIP - Filed under the hardship ERMINAL - This is a terminal report:	procedures:		No No No
4. AFFILIATION OR ORGAN	NIZATION NAME				8. MAILING ADDRESS (Type or p	orint in capital let	ters)	
SERVICE EMPLOYEES					First Name MICHAEL		Last Name NORTZ	
5. DESIGNATION (Local, Lo LOCAL UNION	odge, etc.)	-	DESIGNATION NBR		P.O Box - Building and Room Nun	nber		
7. UNIT NAME (if any) CONNECTICUT STATE EM	PLOYEES				_			
					Number and Street 760 CAPITOL AVENUE			
9. Are your organization's re	cords kept at its mailing address	s?		Yes	City HARTFORD			
					State CT		ZIP Code + 4 061061206	

Each of the undersigned, duly authorized officers of the above labor organization, declares, under penalty of perjury and other applicable penalties of law, that all of the information submitted in this report (including information contained in any accompanying documents) has been examined by the signatory and is, to the best of the undersigned individual's knowledge and belief, true, correct and complete (See Section V on penalties in the instructions.) 70. SIGNED: Stephen Anderson PRESIDENT 71. SIGNED: Roland Bishop TREASURER Telephone Number: 860-951-6614 860-951-6614 Date: Sep 25, 2017 Date: Sep 25, 2017 Telephone Number:

9/10/2018

ITEMS 10 THROUGH 21

10. During the reporting period did the labor organization create or participate in the administration of a trust or a fund or organization, as defined in the instructions, which provides benefits for members or beneficiaries?	No
11(a). During the reporting period did the labor organization have a political action committee (PAC) fund?	Yes
11(b). During the reporting period did the labor organization have a subsidiary organization as defined in Section X of these Instructions?	No
12. During the reporting period did the labor organization have an audit or review of its books and records by an outside accountant or by a parent body auditor/representative?	Yes
13. During the reporting period did the labor organization discover any loss or shortage of funds or other assets? (Answer "Yes" even if there has been repayment or recovery.)	No
14. What is the maximum amount recoverable under the labor organization's fidelity bond for a loss caused by any officer, employee or agent of the labor organization who handled union funds?	\$500,000
15. During the reporting period did the labor organization acquire or dispose of any assets in a manner other than purchase or sale?	No
16. Were any of the labor organization's assets pledged as security or encumbered in any way at the end of the reporting period?	No
17. Did the labor organization have any contingent liabilities at the end of the reporting period?	No
18. During the reporting period did the labor organization have any changes in its constitution or bylaws, other than rates of dues and fees, or in practices/procedures listed in the instructions?	Yes
19. What is the date of the labor organization's next regular election of officers?	10/2018

Form LM-2 (Revised 2010)

543-299 (LM2) 06/30/2017

FILE NUMBER: 543-299

 20. How many members did the labor organization have at the end of the reporting period?
 20,946

 21. What are the labor organization's rates of dues and fees?
 20,946

Rates of Dues and Fees							
Dues/Fees	Amount		Unit	Minimum	Maximum		
(a) Regular Dues/Fees	1%	per	Year	300	884		
(b) Working Dues/Fees		per					
(c) Initiation Fees		per					
(d) Transfer Fees		per					
(e) Work Permits		per					

STATEMENT A - ASSETS AND LIABILITIES

ASSETS

ASSETS	Schedule	Start of Reporting Period	End of Reporting Period
ASSETS	Number	(A)	(B)
22. Cash		\$324,010	\$370,465
23. Accounts Receivable	1	\$21,200	\$16,570
24. Loans Receivable	2		
25. U.S. Treasury Securities		\$0	\$0
26. Investments	5	\$1,224,326	\$1,234,449
27. Fixed Assets	6	\$188,757	\$217,500
28. Other Assets	7	\$961,837	\$1,100,951
29. TOTAL ASSETS		\$2,720,130	\$2,939,935

LIABILITIES

Schedule	Start of Reporting Period	End of Reporting Period
Number	(A)	(B)
8	\$141,956	\$135,064
9		
	\$0	\$0
10	\$2,078,911	\$2,101,003
	\$2,220,867	\$2,236,067
	Number 8 9	Number (A) 8 \$141,956 9 \$141,956 10 \$2,078,911

35. NET ASSETS	\$499,263	\$703,868

STATEMENT B - RECEIPTS AND DISBURSEMENTS

CASH RECEIPTS	SCH	AMOUNT	CASH DISBURSE	MENTS	SCH	AMOUNT
36. Dues and Agency Fees		\$5,653,297	50. Representational Activities		15	\$1,695,904
37. Per Capita Tax		\$(51. Political Activities and Lobbying		16	\$79,069
38. Fees, Fines, Assessments, Work Permits		\$(52. Contributions, Gifts, and Grants		17	\$17,542
39. Sale of Supplies		\$(53. General Overhead		18	\$638,748
40. Interest		\$68	354. Union Administration		19	\$371,699
41. Dividends		\$4,919	55. Benefits		20	\$833,704
42. Rents		\$100	56. Per Capita Tax			\$1,664,250
43. Sale of Investments and Fixed Assets	3		57. Strike Benefits			\$0
44. Loans Obtained	9		58. Fees, Fines, Assessments, etc.			\$204
45. Repayments of Loans Made	2		59. Supplies for Resale			\$0
46. On Behalf of Affiliates for Transmittal to Them		\$172,598	60. Purchase of Investments and Fixed Ass	ets	4	\$89,131
47. From Members for Disbursement on Their Behalf		\$68,434	61. Loans Made		2	
48. Other Receipts	14	\$150,598	62. Repayment of Loans Obtained		9	
49. TOTAL RECEIPTS		\$6,050,014	63. To Affiliates of Funds Collected on Their	Behalf		\$315,961
			64. On Behalf of Individual Members			\$70,562
			65. Direct Taxes			\$205,250
			66. Subtotal			\$5,982,024
			67. Withholding Taxes and Payroll Deductio	ns		. , ,
			67a. Total Withheld	\$794,893		
			67b. Less Total Disbursed	\$816,428		
			67c. Total Withheld But Not Disbursed			-\$21,535
			68. TOTAL DISBURSEMENTS			\$6,003,559

SCHEDULE 1 - ACCOUNTS RECEIVABLE AGING SCHEDULE

Entity or Individual Name (A)	Total Account Receivable (B)	90-180 Days Past Due (C)	180+ Days Past Due (D)	Liquidated Account Receivable (E)
Total of all itemized accounts receivable	\$0	\$0	\$0	\$0
Totals from all other accounts receivable	\$16,570			
Totals (Total of Column (B) will be automatically entered in Item 23, Column(B))	\$16,570	\$0	\$0	\$0

SCHEDULE 2 - 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 regarless of amount.	Loans Outstanding at	Loans Made During Period	Repayments Receive	Loans Outstanding at		
(A)	Start of Period (B)	(C)	Cash (D)(1)	Other Than Cash (D)(2)	End of Period (E)	
Total of loans not listed above						
Total of all lines above	\$0	\$0	\$0	\$0	\$	\$0
Totals will be automatically entered in	Item 24 Column (A)	Item 61	Item 45	Item 69 with Explanation	ltem 24 Column (B)	

SCHEDULE 3 - SALE OF INVESTMENTS AND FIXED ASSETS

Description (if land or buildings give location)	Cost	Book Value	Gross Sales Price	Amount Received		
(A)	(B)	(C)	(D)	(E)		
Total of all lines above	\$0	\$0	\$0	\$0		
			Less Reinvestments			
(The total from Net Sales Line will be automatically entered in Item 43)Net Sales						

SCHEDULE 4 - PURCHASE OF INVESTMENTS AND FIXED ASSETS

Description (if land or buildings, give location)	Cost	Book Value	Cash Paid
(A)	(B)	(C)	(D)
New Security System	\$3,228	\$3,228	\$3,228
New Air Conditioning System	\$64,558	\$64,558	\$64,558
Cubicle Partions/Cabinets, etc	\$5,840	\$5,840	\$5,840
(3) Laptop Computers	\$921	\$921	\$921
(2) Desktop Computers	\$930	\$930	\$930
Chimney Replacement	\$7,800	\$7,800	\$7,800
New Computer Server	\$5,854	\$5,854	\$5,854
Total of all lines above	\$89,131	\$89,131	\$89,131
		Less Reinvestments	\$0
(The total from Net Purchases Line will be	\$89,131		

SCHEDULE 5 - INVESTMENTS

Description	Amount
(A)	(B)
Marketable Securities	
A. Total Cost	\$872,369
B. Total Book Value	\$878,507
C. List each marketable security which has a book value over \$5,000 and exceeds 5% of Line B.	
First Bank PR Sant PR	\$125,246
Ally Bank UT US	\$125,188
American Exp Cent UT US	\$126,015
Capitol One Bank U VA US	\$126,015
Goldman Sachs BK U NY US	\$101,167
Synchrony BK UT US	\$100,122
Other Investments	
D. Total Cost	
E. Total Book Value	\$355,942
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.	
Anthem Common Stock	\$355,942
G. Total of Lines B and E (Total will be automatically entered in Item 26, Column(B))	\$1,234,449

SCHEDULE 6 - FIXED ASSETS

Description (A)	Cost or Other Basis (B)	Total Depreciation or Amount Expensed (C)	Book Value (D)	Value (E)
A. Land (give location)				
Land 1 : 760 Capitol Ave, Hartford, CT	\$21,000		\$21,000	\$21,000
B. Buildings (give location)				
Building 1 : 760 Capitol Ave, Hartford, CT	\$486,265	\$454,628	\$31,637	\$31,637
C. Automobiles and Other Vehicles				
D. Office Furniture and Equipment	\$325,474	\$215,648	\$109,826	\$109,826
E. Other Fixed Assets	\$144,736	\$89,699	\$55,037	\$55,037
F. Totals of Lines A through E (Column(D) Total will be automatically entered in Item 27, Column(B))	\$977,475	\$759,975	\$217,500	\$217,500

SCHEDULE 7 - OTHER ASSETS

Description	Book Value
(A)	(B)
Staff Retiree Health Insurance Fund	\$898,436
Accrued Dues Receivable at FY End	\$202,515
Total (Total will be automatically entered in Item 28, Column(B))	\$1,100,951

SCHEDULE 8 - ACCOUNTS PAYABLE AGING SCHEDULE

Entity or Individual Name (A)	Total Account Payable (B)	90-180 Days Past Due (C)	180+ Days Past Due (D)	Liquidated Account Payable
SEIU June 2016 Per Cap	(B) \$135,064	(C) \$0	(D)	0 \$0
Total for all itemized accounts payable	\$135,064	\$0	\$	0 \$0
Total from all other accounts payable	\$0	\$0	\$	0 \$0
Totals (Total for Column(B) will be automatically entered in Item 30, Column(D))	\$135,064	\$0	\$	0 \$0

SCHEDULE 9 - 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 During Period Cash (D)(1)	Repayment During Period Other Than Cash (D)(2)	Loans Owed at End of Period (E)
Total Loans Payable	\$0	\$0	\$0	\$0	\$0
Totals will be automatically entered in	Item 31	Item 44	Item 62	Item 69	Item 31
	Column (C)			with Explanation	Column (D)

SCHEDULE 10 - OTHER LIABILITIES

Description	Amount at End of Period
(A)	(B)
Staff Retiree Health Insurance Fund	\$898,436
Accrued Council/Chapter Rebates	\$396,079
Reserve Unused Vacation/Sick Leave	\$313,009
SEIU Service Buyback Payable	\$308,157
Staff Pension Pmts Payable	\$74,093
Accrued Payroll/Taxes	\$68,872
Misc Accrued	\$42,357
Total Other Liabilities (Total will be automatically entered in Item 33, Column(D))	\$2,101,003

SCHEDULE 11 - ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

	(A) Name	(B) Title	(C) Status	(D) Gross Salary Disbursements (before any deductions)	(E) Allowances Disbursed	(F) Disbursements for Official Business	(G) Other Disbursements not reported in (D) through (F)	(H) TOTAL
A B C	Anderson , Stephen President C				\$7,11	2		\$7,112
	Schedule 15 Representational Acti	vities	Schedule 16 40 % Political Activities an Lobbying	nd i i	Schedule 17 Contributions	Schedule 18 General Overhea	Schedule 19 Administration	60 %
A B C	Bergeron,Corrine Alternate-Para Cncl C					\$279		\$279
	Schedule 15 Representational Acti	vities	Schedule 16 Political Activities an Lobbying		Schedule 17 Contributions	Schedule 18 General Overhea	d Schedule 19 Administration	100 %
A B C	Bishop , Roland Treasurer C				\$7,11	2		\$7,112
I	Schedule 15 Representational Acti	vities	Schedule 16 10 % Political Activities an Lobbying	nd	Schedule 17 Contributions	Schedule 18 General Overhea	d Schedule 19 Administration	90 %
A B C	Brown,Milagros Alternate - CSC Cncl N				,	\$151		\$151
I	Schedule 15 Representational Acti	vities	Schedule 16 Political Activities a Lobbying		Schedule 17 Contributions	Schedule 18 General Overhea	d Schedule 19 Administration	100 %
A B C	Corrigan,Thomas Delegate-Retiree Cnc C	I			,	\$17		\$17
I	Schedule 15 Representational Acti	vities	Schedule 16 Political Activities a Lobbying		Schedule 17 Contributions	Schedule 18 General Overhea	d Schedule 19 Administration	100 %
A B C	Daly , Edward Delegate-Retiree Cnc C	I				\$262		\$262
I	Schedule 15 Representational Acti	vities	Schedule 16 Political Activities a Lobbying	nd	Schedule 17 Contributions	Schedule 18 General Overhea	d Schedule 19 Administration	100 %
A B C	Dillon,Paula Alternate-P3B Cncl C					\$65		\$65
I	Schedule 15 Representational Acti	vities	Schedule 16 Political Activities an Lobbying		Schedule 17 Contributions	Schedule 18 General Overhea	d Schedule 19 Administration	100 %
	Fishbone,Stuart Alternate-Retiree Cnc C	1				\$289		\$289
	Schedule 15 Representational Acti	vities	Schedule 16 Political Activities an Lobbying	nd	Schedule 17 Contributions	Schedule 18 General Overhea	d Schedule 19 Administration	100 %
A B C	Freelove , Queen Delegate-Child Care (C	Cncl				\$182		\$182

					040 200 (EMZ) 00/00			
	(A) Name	(B) Title	(C) Status	(D) Gross Salary Disbursements (before any deductions)	(E) Allowances Disbursed	(F) Disbursements for Official Business	(G) Other Disbursements not reported in (D) through (F)	(H) TOTAL
	dule 15 esentational Activ	ities	Schedule 16 Political Activities and Lobbying		chedule 17 ontributions	Schedule 18 General Overhead	Schedule 19 Administration	100 %
	on,Susan nate-P3A Cncl					\$97		\$97
Schee	dule 15 esentational Activ	ities	Schedule 16 Political Activities and Lobbying		chedule 17 ontributions	Schedule 18 General Overhead	Schedule 19 Administration	100 %
	on,Julius gate-CSC Cncl			·	\$900	0 \$269		\$1,169
	dule 15 esentational Activ	ities	Schedule 16 Political Activities and Lobbying		chedule 17 ontributions	Schedule 18 General Overhead	Schedule 19 Administration	100 %
	ones,Agnes gate-P3A Cncl	i		·	\$90	0 \$108		\$1,008
Repre	dule 15 esentational Activ	ities	Schedule 16 Political Activities and Lobbying		chedule 17 ontributions	Schedule 18 General Overhead	Schedule 19 Administration	100 %
	⁻ ,Marian gate-760 Cncl					\$73		\$73
	dule 15 esentational Activ	ities	Schedule 16 Political Activities and Lobbying		chedule 17 ontributions	Schedule 18 General Overhead	Schedule 19 Administration	100 %
	a,Torry gate-760 Cncl					\$29		\$29
Repre	dule 15 esentational Activ	ities	Schedule 16 Political Activities and Lobbying		chedule 17 ontributions	Schedule 18 General Overhead	Schedule 19 Administration	100 %
A Ross- B Deleg C C	-Zweig,Cynthia gate-Para Cncl				\$950	0 \$436		\$1,386
	dule 15 esentational Activ	ities	Schedule 16 Political Activities and Lobbying		chedule 17 ontributions	Schedule 18 General Overhead	Schedule 19 Administration	100 %
A Smith B Deleg C P	n,Janette gate-Para Cncl					\$104		\$104
	dule 15 esentational Activ	ities	Schedule 16 Political Activities and Lobbying		chedule 17 ontributions	Schedule 18 General Overhead	Schedule 19 Administration	100 %
	e,Vincent nate-CSC Cncl					\$336		\$336
Repre	dule 15 esentational Activ	ities	Schedule 16 Political Activities and Lobbying		chedule 17 ontributions	Schedule 18 General Overhead	Schedule 19 Administration	100 %
	en,Michael nate-Retiree Cncl					\$259		\$259

	(A) Name	(B) Title	(C) Status	(D Gross Disburse (before deduc	Salary ements e any	(E) Allowances Disbursed	Disburs	(F) ements for Official Business	C Disbursement	(G) Dther ts not reported in brough (F)	(H) TOTA	L
I	Schedule 15 Representational Activ	vities	Schedule 16 Political Activities an Lobbying	d		dule 17 ibutions		Schedule 18 General Overhead	b	Schedule 19 Administration		100 %
A B C	Woodward , Travis Delegate-P4 Cncl C		·	·			\$431	·			\$431	
I	Schedule 15 Representational Activ	vities	Schedule 16 Political Activities an Lobbying	d		dule 17 ibutions	·	Schedule 18 General Overhead	d	Schedule 19 Administration		100 %
Tot	al Officer Disbursement	ts			\$C	\$16,97	4	\$3,387		\$0		\$20,361
Les	s Deductions											
Net	Disbursements											\$20,361

SCHEDULE 12 - DISBURSEMENTS TO EMPLOYEES

	(A) Name	(B) Title	(C) Other Payer	(D) Gross Salary Disbursements (before any deductions)	(E) Allowances Disbursed	(F) Disbursements for Official Business	(G) Other Disbursements not reported in (D) through (F)	(H) TOTAL
A B C	Bermudez,Eva Staff Representative None			\$64,103	\$ \$7,50	00 \$1,116		\$72,719
I	Schedule 15 Representational Activ	ities	Schedule 16 100 % Political Activities an Lobbying	d Schedu Contrib		Schedule 18 General Overhead	Schedule 19 Administration	
A B C	Cobbs , Wanda D Staff Representative None	I		\$45,457	\$7,50	00 \$196		\$53,153
I	Schedule 15 Representational Activ		Schedule 16 100 % Political Activities an Lobbying	d Schedu Contrib		Schedule 18 General Overhead	Schedule 19 Administration	
A B C	Conway , Bernadette Staff Representative None	R		\$61,283	\$7,50	\$332		\$69,115
I	Schedule 15 Representational Activ	ities	Schedule 16 100 % Political Activities an Lobbying	d Schedu Contrib		Schedule 18 General Overhead	Schedule 19 Administration	
A B C	Coogan , Michael J Staff Representative None			\$77,245	\$6,87	75 \$3,593		\$87,713
I	Schedule 15 Representational Activ	ities	Schedule 16 100 % Political Activities an Lobbying	d Schedu Contrib		Schedule 18 General Overhead	Schedule 19 Administration	
A B C	Dancy,Otis Staff Representative None			\$34,385	\$4,37	75		\$38,760
I	Schedule 15 Representational Activ	ities	Schedule 16 100 % Political Activities an Lobbying	d Schedu Contrib		Schedule 18 General Overhead	Schedule 19 Administration	
A B C	Dibiccari , Eda K Staff Representative None			\$79,008	\$6,00	00 \$588		\$85,596
I	Schedule 15 Representational Activ	ities	Schedule 16 100 % Political Activities an Lobbying	d Schedu Contrib		Schedule 18 General Overhead	Schedule 19 Administration	
A B C	Fabian,Charles S Staff Representative None			\$87,153	\$5,00	00 \$781		\$92,934
I	Schedule 15 Representational Activ	ities	Schedule 16 100 % Political Activities an Lobbying	d Schedu Contrib		Schedule 18 General Overhead	Schedule 19 Administration	
	Ferrucci, III, Stephen Staff Representative None	R		\$89,174	\$6,00	00		\$95,174
I	Schedule 15 Representational Activ	ities	Schedule 16 100 % Political Activities an Lobbying	d Schedu Contrib		Schedule 18 General Overhead	Schedule 19 Administration	
A B C	Figueroa,Helene Director-Child Care None			\$86,487	· \$7,50	00 \$3,002		\$96,989

	(A) Name	(B) Title		(C) Other Payer	(D) Gross Sala Disburseme (before ar deduction	ents Iy	(E) Allowances Disburs	ed	(F) Disbursement Busin	s for Official	n	(G) Disburse reported) throug		(H) TOTA	L
I	Schedule 15 Representational Activ	ities	100 %	Schedule 16 Political Activities and Lobbying		Schedu Contribu			Schedul General	e 18 Overhead			Schedule 19 Administration		
A B C	Glidden,David J Executive Director None				·	\$103,787	\$6	6,000							\$109,787
I	Schedule 15 Representational Activ	ities	80 %	Schedule 16 Political Activities and Lobbying		Schedu Contribu			Schedul General	e 18 Overhead			Schedule 19 Administration		20 %
A B C	Henowitz , Ryan C Staff Representative None					\$12,406	\$1	,875							\$14,281
I	Schedule 15 Representational Activ	ities	100 %	Schedule 16 Political Activities and Lobbying		Schedu Contribu			Schedul General	e 18 Overhead			Schedule 19 Administration		
A B C	James , Joanna I Staff Representative None					\$85,037	\$7	7,500		\$451					\$92,988
I	Schedule 15 Representational Activ	ities	100 %	Schedule 16 Political Activities and Lobbying		Schedu Contribu			Schedul General	e 18 Overhead			Schedule 19 Administration		
A B C	Kuzoian , Carolyn T Membership Coordina None	tor				\$56,688									\$56,688
I	Schedule 15 Representational Activ	ities		Schedule 16 Political Activities and Lobbying		Schedu Contribu			Schedul General	e 18 Overhead		90 %	Schedule 19 Administration		10 %
A B C	Lattarulo , Valeria P Executive Secretary None					\$43,466									\$43,466
I	Schedule 15 Representational Activ	ities	50 %	Schedule 16 Political Activities and Lobbying		Schedu Contribu		10) % Schedul General	e 18 Overhead		20 %	Schedule 19 Administration		20 %
A B C	Lindsey , Marissa A Staff Representative None					\$23,976	\$3	3,125		\$436					\$27,537
I	Schedule 15 Representational Activ	ities	100 %	Schedule 16 Political Activities and Lobbying		Schedu Contribu			Schedul General	e 18 Overhead			Schedule 19 Administration		
A B C	Malitz , Stacey A Staff Representative None					\$47,536	\$3	3,600		\$89					\$51,225
I	Schedule 15 Representational Activ	ities	100 %	Schedule 16 Political Activities and Lobbying		Schedu Contribu			Schedul General	e 18 Overhead			Schedule 19 Administration		
A B C	Medress,Daniel I Political Director None					\$86,816	\$6	6,000		\$405					\$93,221
I	Schedule 15 Representational Activ	ities		Schedule 16 Political Activities and Lobbying	50 %	Schedu Contribu			Schedul General	e 18 Overhead		10 %	Schedule 19 Administration		40 %
	Mercik , Kevin M Organizing Director None					\$79,861	\$7	,375		\$217					\$87,453

							. ,						
	(A) Name	(B) Title		(C) Other Payer	(D) Gross Salar Disbursemen (before any deductions	ts	(E) Allowances Disburse	ed	(F) Disbursements for Official Business	(G) Other Disburs reporte (D) throu	ements not d in	(H) TOTAL	
I	Schedule 15 Representational Activ	ities	100 %	Schedule 16 Political Activities and Lobbying		Schedu Contribu			Schedule 18 General Overhead		Schedule 19 Administration		
A B C	Merklien,Miranda Staff Representative None					\$12,200	\$1	,875	\$195			:	\$14,270
I	Schedule 15 Representational Activ	ities	100 %	Schedule 16 Political Activities and Lobbying		Schedu Contribu			Schedule 18 General Overhead		Schedule 19 Administration		
A B C	Midgen , Andrew D Staff Representative None					\$31,011	\$2	2,500	\$455	I			\$33,966
I	Schedule 15 Representational Activ	ities	100 %	Schedule 16 Political Activities and Lobbying		Schedu Contribu			Schedule 18 General Overhead		Schedule 19 Administration		
A B C	Nortz , Michael F Director-Administratior None	1			\$	106,430	\$6	6,000				\$	5112,430
I	Schedule 15 Representational Activ	ities	10 %	Schedule 16 Political Activities and Lobbying		Schedul Contribu			Schedule 18 General Overhead	70 %	Schedule 19 Administration	:	20 %
A B C	Phillips , Benjamin P Editor None					\$67,857	\$1	,500				:	\$69,357
I	Schedule 15 Representational Activ	ities	40 %	Schedule 16 Political Activities and Lobbying		Schedu Contribu			Schedule 18 General Overhead	20 %	Schedule 19 Administration		40 %
A B C	Rodriguez,Adrean Staff Representative None	E				\$47,870	\$6	6,875	\$837			:	\$55,582
I	Schedule 15 Representational Activ	ities	100 %	Schedule 16 Political Activities and Lobbying		Schedul Contribu			Schedule 18 General Overhead		Schedule 19 Administration		
A B C	Root,Peter A Business Services Mg None	r				\$70,198			\$838			:	\$71,036
I	Schedule 15 Representational Activ	ities		Schedule 16 Political Activities and Lobbying		Schedu Contribu			Schedule 18 General Overhead	90 %	Schedule 19 Administration		10 %
A B C	Salto , Rosa B Staff Representative None					\$56,243	\$7	,500	\$1,203			:	\$64,946
	Schedule 15 Representational Activ	ities	100 %	Schedule 16 Political Activities and Lobbying		Schedu Contribu			Schedule 18 General Overhead		Schedule 19 Administration		
	Smith,Gary E Staff Representative None					\$25,625	\$1	,250				:	\$26,875
I	Schedule 15 Representational Activ	ities	100 %	Schedule 16 Political Activities and Lobbying		Schedu Contribu			Schedule 18 General Overhead		Schedule 19 Administration		
	Sochaczewski , Andre Staff Representative None	ew A				\$51,218	\$7	,500	\$1,178				\$59,896

	(A) Name	(B) Title		(C) Other Payer	(D) Gross Sa Disbursen (before a deductio	nents any	(E) Allowances Disburse	ed I	(F) Disbursements for Official Business	(G) Other Disbursements n reported in (D) through (F)		l in	(H) TOT	
I	Schedule 15 Representational Activ	vities	100 %	Schedule 16 Political Activities and Lobbying	ł	Schedu Contrib			Schedule 18 General Overhead			Schedule 19 Administration		
A B C	Sullivan,Kevin P Staff Representative None					\$51,924	\$7,	,500	\$1,092					\$60,516
I	Schedule 15 Representational Activ	vities	100 %	Schedule 16 Political Activities and Lobbying	ł	Schedu Contrib			Schedule 18 General Overhead			Schedule 19 Administration		
A B C	Torres , Luis Building Maintenance None					\$52,941			\$687	7				\$53,628
I	Schedule 15 Representational Activ	vities		Schedule 16 Political Activities and Lobbying	ł	Schedu Contrib			Schedule 18 General Overhead		100 %	Schedule 19 Administration		
A B C	Veras , Yasmin A Receptionist None					\$42,225	5							\$42,225
I	Schedule 15 Representational Activ	vities	20 %	Schedule 16 Political Activities and Lobbying	ł	Schedı Contrib			Schedule 18 General Overhead		70 %	Schedule 19 Administration		10 %
A B C	Webster , Jason P Media Specialist None					\$85,496	5		\$117	7				\$85,613
I	Schedule 15 Representational Activ	vities		Schedule 16 Political Activities and Lobbying	1	Schedu Contrib			Schedule 18 General Overhead		80 %	Schedule 19 Administration		20 %
TOT	TALS RECEIVED BY E	MPLOYEES MAKIN	IG \$10,0	00 OR LESS										\$0
I	Schedule 15 Representational Activ			Schedule 16 Political Activities an	, 0		Schedule 1 Contributio	ns	Schedule 1 General Ov				istration	
	al Employee Disbursem	ients			\$1	,865,106	\$136,22	25	\$17,808			\$0		\$2,019,139
Les	s Deductions													
Net	Disbursements													\$2,019,139

SCHEDULE 13 - MEMBERSHIP STATUS

Category of Membership	Number	Voting Eligibility
(A)	(B)	(C)
Active	9,576	Yes
Retired	11,370	No
Members (Total of all lines above)	20,946	
Agency Fee Payers*	682	
Total Members/Fee Payers	21,628	
*Agency Fee Payers are not considered members of the labor organization.	· · ·	

DETAILED SUMMARY PAGE - SCHEDULES 14 THROUGH 19

1. Named Payer Itemized Receipts 2. Named Payer Non-itemized Receipts	\$82,603
2. Named Payer Non-itemized Receipts	
	\$50,350
3. All Other Receipts	\$17,645
4. Total Receipts	\$150,598

SCHEDULE 15 REPRESENTATIONAL ACTIVITIE	S
1. Named Payee Itemized Disbursements	\$39,317
2. Named Payee Non-itemized Disbursements	\$127,965
3. To Officers	\$3,556
4. To Employees	\$1,438,682
5. All Other Disbursements	\$86,384
6. Total Disbursements	\$1,695,904
SCHEDULE 16 POLITICAL ACTIVITIES AND LOBBY	ÍNG
1. Named Payee Itemized Disbursements	\$25,924
2. Named Payee Non-itemized Disbursements	\$0
3. To Officers	\$0
4. To Employees	\$46,611
5. All Other Disbursements	\$6,534
6. Total Disbursement	\$79,069

SCHEDULE 17 CONTRIBUTIONS, GIFTS & GRANTS	
1. Named Payee Itemized Disbursements	\$9,000
2. Named Payee Non-itemized Disbursements	\$1,000
3. To Officers	\$0
4. To Employees	\$4,347
5. All Other Disbursements	\$3,195
6. Total Disbursements	\$17,542

SCHEDULE 18 GENERAL OVERHEAD	
1. Named Payee Itemized Disbursements	\$29,080
2. Named Payee Non-itemized Disbursements	\$159,688
3. To Officers	\$0
4. To Employees	\$377,214
5. All Other Disbursements	\$72,766
6. Total Disbursements	\$638,748
SCHEDULE 19 UNION ADMINISTRATION	
1. Named Payee Itemized Disbursements	\$72,971
2. Named Payee Non-itemized Disbursements	\$92,226
3. To Officers	\$16,805
4. To Employees	\$152,286
5. All Other Disbursements	\$37,411
6. Total Disbursements	\$371,699

SCHEDULE 14 - OTHER RECEIPTS

Name and Address			
(A)			
CT CENTER FOR A NEW ECONOMY	Purpose	Date	Amount
	(C)	(D)	(E)
30 ARBOR ST	Grant for Child Care Program Research	02/22/2017	\$5,000
HARTFORD	Total Itemized Transactions with this Payee/Payer	02,22,20	\$5,000
СТ	Total Non-Itemized Transactions with this Payee/Payer		φ3,000
06106			A E 000
Type or Classification	Total of All Transactions with this Payee/Payer for This Schedule		\$5,000
(B)			
NA			
Name and Address			
(A)			
	Purpose	Date	Amount
ANOVER INSURANCE CO	(C)	(D)	(E)
P.O. BOX 580045	Insurance Claim Reimbursement	03/24/2017	\$35,275
	Insurance Claim Reimbursement	05/02/2017	\$31,283
CHARLOTTE	Total Itemized Transactions with this Payee/Payer	00/02/2011	\$66,558
٨C			\$00,530
Type or Classification	Total Non-Itemized Transactions with this Payee/Payer		_ • • • • • •
(B)	Total of All Transactions with this Payee/Payer for This Schedule		\$66,558
nsurance Company			
Name and Address			
KRONHOLM & ASSOCIATES	D	D-t-	A mag
P.O. BOX 340	Purpose	Date	Amount
	(C)	(D)	(E)
EAST LYME	Total Itemized Transactions with this Payee/Payer		
CT	Total Non-Itemized Transactions with this Payee/Payer		\$33,000
06333	Total of All Transactions with this Payee/Payer for This Schedule		\$33,000
Type or Classification		I	÷50,000
(B)			
INSURANCE SERVICES ADVERTISER			
INSURANCE SERVICES ADVERTISER			
NSURANCE SERVICES ADVERTISER Name and Address			
NSURANCE SERVICES ADVERTISER Name and Address (A)			
NSURANCE SERVICES ADVERTISER Name and Address (A)	Purpose	Date	Amount
NSURANCE SERVICES ADVERTISER Name and Address (A) LABOR UNITED FOR CT	Purpose (C)		
NSURANCE SERVICES ADVERTISER Name and Address (A) ABOR UNITED FOR CT 20 BEVERLY RD	(C)	(D)	(E)
NSURANCE SERVICES ADVERTISER Name and Address (A) ABOR UNITED FOR CT 20 BEVERLY RD NEST HARTFORD	(C) Independent Expenditure Refund		(E) \$11,045
NSURANCE SERVICES ADVERTISER Name and Address (A) LABOR UNITED FOR CT 20 BEVERLY RD WEST HARTFORD	(C) Independent Expenditure Refund Total Itemized Transactions with this Payee/Payer	(D)	(E) \$11,045
INSURANCE SERVICES ADVERTISER Name and Address (A) LABOR UNITED FOR CT 20 BEVERLY RD WEST HARTFORD CT	(C) Independent Expenditure Refund Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer	(D)	(E) \$11,045 \$11,045
NSURANCE SERVICES ADVERTISER Name and Address (A) ABOR UNITED FOR CT 20 BEVERLY RD WEST HARTFORD CT 26119	(C) Independent Expenditure Refund Total Itemized Transactions with this Payee/Payer	(D)	(E) \$11,045 \$11,045
INSURANCE SERVICES ADVERTISER Name and Address (A) LABOR UNITED FOR CT 20 BEVERLY RD WEST HARTFORD CT 06119 Type or Classification	(C) Independent Expenditure Refund Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer	(D)	(E) \$11,045 \$11,045
NSURANCE SERVICES ADVERTISER Name and Address (A) ABOR UNITED FOR CT 20 BEVERLY RD WEST HARTFORD CT 36119 Type or Classification (B)	(C) Independent Expenditure Refund Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer	(D)	(E) \$11,045 \$11,045
NSURANCE SERVICES ADVERTISER Name and Address (A) ABOR UNITED FOR CT 20 BEVERLY RD WEST HARTFORD CT 26119 Type or Classification (B) NDEPENDENT POLITCAL ACTION	(C) Independent Expenditure Refund Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer	(D)	(E) \$11,045 \$11,045
NSURANCE SERVICES ADVERTISER Name and Address (A) ABOR UNITED FOR CT 20 BEVERLY RD WEST HARTFORD CT 26119 Type or Classification (B) NDEPENDENT POLITCAL ACTION Name and Address	(C) Independent Expenditure Refund Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer	(D)	(E) \$11,045 \$11,045
NSURANCE SERVICES ADVERTISER Name and Address (A) ABOR UNITED FOR CT 20 BEVERLY RD WEST HARTFORD CT 26119 Type or Classification (B) NDEPENDENT POLITCAL ACTION Name and Address (A)	(C) Independent Expenditure Refund Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer	(D)	(E) \$11,045 \$11,045
NSURANCE SERVICES ADVERTISER Name and Address (A) ABOR UNITED FOR CT 20 BEVERLY RD WEST HARTFORD CT 36119 Type or Classification (B) NDEPENDENT POLITCAL ACTION Name and Address (A)	(C) Independent Expenditure Refund 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	(D) 12/09/2016	(E) \$11,045 \$11,045 \$11,045
NSURANCE SERVICES ADVERTISER Name and Address (A) ABOR UNITED FOR CT 20 BEVERLY RD WEST HARTFORD CT 06119 Type or Classification (B) NDEPENDENT POLITCAL ACTION Name and Address (A) SERVICE EMPLOYEES INTERNATIONAL UNION	(C) Independent Expenditure Refund 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 Purpose	(D) 12/09/2016	(E) \$11,045 \$11,045 \$11,045 \$11,045
NSURANCE SERVICES ADVERTISER Name and Address (A) ABOR UNITED FOR CT 20 BEVERLY RD NEST HARTFORD CT 06119 Type or Classification (B) NDEPENDENT POLITCAL ACTION Name and Address (A) SERVICE EMPLOYEES INTERNATIONAL UNION 1513 L STREET	(C) Independent Expenditure Refund 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 Purpose (C)	(D) 12/09/2016	(E) \$11,045 \$11,045 \$11,045
NSURANCE SERVICES ADVERTISER Name and Address (A) ABOR UNITED FOR CT 20 BEVERLY RD VEST HARTFORD CT 06119 Type or Classification (B) NDEPENDENT POLITCAL ACTION Name and Address (A) SERVICE EMPLOYEES INTERNATIONAL UNION 1513 L STREET VASHINGTON	(C) Independent Expenditure Refund 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 Purpose (C) Total Itemized Transactions with this Payee/Payer	(D) 12/09/2016	(E) \$11,045 \$11,045 \$11,045 \$11,045
NSURANCE SERVICES ADVERTISER Name and Address (A) ABOR UNITED FOR CT 00 BEVERLY RD VEST HARTFORD CT 106119 Type or Classification (B) NDEPENDENT POLITCAL ACTION Name and Address (A) SERVICE EMPLOYEES INTERNATIONAL UNION 513 L STREET VASHINGTON	(C) Independent Expenditure Refund 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 Purpose (C) Total Itemized Transactions with this Payee/Payer	(D) 12/09/2016	(E) \$11,045 \$11,045 \$11,045 \$11,045 (E)
NSURANCE SERVICES ADVERTISER Name and Address (A) ABOR UNITED FOR CT 20 BEVERLY RD VEST HARTFORD CT 16119 Type or Classification (B) NDEPENDENT POLITCAL ACTION Name and Address (A) SERVICE EMPLOYEES INTERNATIONAL UNION 513 L STREET VASHINGTON DC	(C) Independent Expenditure Refund Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer for This Schedule Total of All Transactions with this Payee/Payer for This Schedule Purpose (C) Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer	(D) 12/09/2016	(E) \$11,045 \$11,045 \$11,045 \$11,045 (E) \$6,350
NSURANCE SERVICES ADVERTISER Name and Address (A) ABOR UNITED FOR CT 20 BEVERLY RD WEST HARTFORD CT 36119 Type or Classification (B) NDEPENDENT POLITCAL ACTION Name and Address (A) SERVICE EMPLOYEES INTERNATIONAL UNION 1513 L STREET WASHINGTON DC 20005	(C) Independent Expenditure Refund 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 Purpose (C) Total Itemized Transactions with this Payee/Payer	(D) 12/09/2016	(E) \$11,045 \$11,045 \$11,045 \$11,045 (E) \$6,350
NSURANCE SERVICES ADVERTISER Name and Address (A) ABOR UNITED FOR CT 20 BEVERLY RD WEST HARTFORD CT 36119 Type or Classification (B) NDEPENDENT POLITCAL ACTION Name and Address (A) SERVICE EMPLOYEES INTERNATIONAL UNION 1513 L STREET WASHINGTON DC 20005 Type or Classification	(C) Independent Expenditure Refund Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer for This Schedule Total of All Transactions with this Payee/Payer for This Schedule Purpose (C) Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer	(D) 12/09/2016	(E) \$11,045 \$11,045 \$11,045 \$11,045 (E) \$6,350
NSURANCE SERVICES ADVERTISER Name and Address (A) ABOR UNITED FOR CT 20 BEVERLY RD WEST HARTFORD CT 36119 Type or Classification (B) NDEPENDENT POLITCAL ACTION Name and Address (A) SERVICE EMPLOYEES INTERNATIONAL UNION 1513 L STREET VASHINGTON DC 20005 Type or Classification (B)	(C) Independent Expenditure Refund Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer for This Schedule Total of All Transactions with this Payee/Payer for This Schedule Purpose (C) Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer	(D) 12/09/2016	(E) \$11,045 \$11,045 \$11,045 \$11,045 (E) \$6,350
NSURANCE SERVICES ADVERTISER Name and Address (A) ABOR UNITED FOR CT 20 BEVERLY RD VEST HARTFORD CT 36119 Type or Classification (B) NDEPENDENT POLITCAL ACTION Name and Address (A) SERVICE EMPLOYEES INTERNATIONAL UNION 1513 L STREET VASHINGTON OC 20005 Type or Classification (B)	(C) Independent Expenditure Refund Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer for This Schedule Purpose (C) Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer	(D) 12/09/2016	(E) \$11,045 \$11,045 \$11,045 \$11,045 (E) \$6,350 \$6,350
NSURANCE SERVICES ADVERTISER Name and Address (A) ABOR UNITED FOR CT 20 BEVERLY RD WEST HARTFORD CT 36119 Type or Classification (B) NDEPENDENT POLITCAL ACTION Name and Address (A) SERVICE EMPLOYEES INTERNATIONAL UNION 1513 L STREET NASHINGTON DC 20005 Type or Classification (B) JNION Name and Address	(C) Independent Expenditure Refund Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer for This Schedule Total of All Transactions with this Payee/Payer for This Schedule (C) Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer Total Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer for This Schedule	(D) 12/09/2016	(E) \$11,045 \$11,045 \$11,045 \$11,045 (E) \$6,350 \$6,350 \$6,350
INSURANCE SERVICES ADVERTISER Name and Address (A) LABOR UNITED FOR CT 20 BEVERLY RD WEST HARTFORD CT 26119 Type or Classification (B) INDEPENDENT POLITCAL ACTION Name and Address (A) SERVICE EMPLOYEES INTERNATIONAL UNION 1513 L STREET WASHINGTON DC 20005 Type or Classification (B) UNION	(C) Independent Expenditure Refund Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer for This Schedule Purpose (C) Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer	(D) 12/09/2016	(E) \$11,045 \$11,045 \$11,045 \$11,045 (E) \$6,350 \$6,350

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	Purpose	Date	Amount
20 WASHINGTON AVE. S	(C)	(D)	(E)
MINNEAPOLIS	Total Non-Itemized Transactions with this Payee/Payer		\$11,000
MN	Total of All Transactions with this Payee/Payer for This Schedule		\$11,000
55401			
Type or Classification			
(B)			
FINANCIAL SERVICES ADVERTISER			
	·		

SCHEDULE 15 - REPRESENTATIONAL ACTIVITIES

Name and Address			
(A)			
CHARLES S FABIAN	Dumana	Data	A manual t
	Purpose (C)	Date (D)	Amount
259 WEST ELM ST NEW HAVEN	Total Itemized Transactions with this Payee/Payer		(E)
CT	Total Non-Itemized Transactions with this Payee/Payer		¢16 764
06515	Total of All Transactions with this Payee/Payer for This Schedule		\$16,764
Type or Classification		I	\$16,764
(B)			
Representative Consultant			
Name and Address			
(A)			
CT STATE BOARD OF MEDIATION/ARBITRATION			
CT STATE BOARD OF MEDIATION AND TRATION	Purpose	Date	Amount
38 WOLCOTT HILL RD	(C)	(D)	(E)
WETHERSFIELD	Total Itemized Transactions with this Payee/Payer		(-)
CT	Total Non-Itemized Transactions with this Payee/Payer		\$5,400
06109	Total of All Transactions with this Payee/Payer for This Schedule		\$5,400
Type or Classification		I	\$37100
(B)			
Labor Board Mediator			
Name and Address			
(A)			
HARTY PRESS	 Duumaaa	Data	A second
	Purpose (C)	Date	Amount
25 JAMES ST		(D)	(E)
NEW HAVEN	Informational Mailers	11/23/2016	\$5,187
ст	Total Itemized Transactions with this Payee/Payer		\$5,187
06513	Total Non-Itemized Transactions with this Payee/Payer		
Type or Classification	Total of All Transactions with this Payee/Payer for This Schedule		\$5,187
(B)			
PRINT SERVICES			
Name and Address			
(A)			
HARVEY M SCHRAGE			
	Purpose	Date	Amount
785 WILLIAMS ST	(C)	(D)	(E)
LONGMEADOW	Total Itemized Transactions with this Payee/Payer		
MA	Total Non-Itemized Transactions with this Payee/Payer		\$6,013
01106	Total of All Transactions with this Payee/Payer for This Schedule		\$6,013
Type or Classification			
(B)			
Arbitrator			
Name and Address			
(A)			
JULIUS PRESTON			
	Purpose	Date	Amount
			(E)
	(C)	(D)	(⊑)
13 MEADOW WAY MERIDEN	(C) Total Itemized Transactions with this Payee/Payer		
MERIDEN CT	(C) Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer		\$16,078
MERIDEN CT 06450	(C) Total Itemized Transactions with this Payee/Payer		
MERIDEN CT 06450 Type or Classification	(C) Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer		\$16,078
MERIDEN CT 06450 Type or Classification (B)	(C) Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer		\$16,078
MERIDEN CT 06450 Type or Classification (B) CSC Council Rep	(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		\$16,078
MERIDEN CT 06450 Type or Classification (B)	(C) Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer		\$16,078

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9/10/2018

543-299 (LM2) 06/30/2017

9/10/2010	545-299 (LMZ) 00/50/2017		
LIVINGSTON, ADLER, PULDA, MIEKLEJOHN	Purpose (C)	Date (D)	Amount (E)
557 PROSPECT AVENUE	Arbitration, Member Contract Work	11/17/2016	\$6,369
HARTFORD	Arbitration, Member Contract Work	06/29/2017	\$6,016
CT	Total Itemized Transactions with this Payee/Payer	00/29/2017	\$0,010
06105	Total Non-Itemized Transactions with this Payee/Payer		
Type or Classification	Total of All Transactions with this Payee/Payer for This Schedule		\$50,299
(B)	Iolal of All Italisactions with this Payee/Payer for this Schedule	I	\$62,684
LEGAL COUNSEL			
Name and Address			
(A)			
ROBERT J KRZYS			
P O BOX 207	Purpose	Date	Amount
	(C)	(D)	(E)
NEW HARTFORD	Total Itemized Transactions with this Payee/Payer		
CT	Total Non-Itemized Transactions with this Payee/Payer		\$10,763
06057	Total of All Transactions with this Payee/Payer for This Schedule		\$10,763
Type or Classification		I	\$10,705
(B)			
Negotiation Consultant			
Name and Address			
(A)			
ROBERT RINKER			
RODERT RINKER	Purpose	Date	Amount
	(C)	(D)	(E)
49 HEARTHSTONE DR SOUTH WINDSOR	Total Itemized Transactions with this Payee/Payer	(0)	(L)
			+12.00
CT 06074	Total Non-Itemized Transactions with this Payee/Payer		\$12,600
	Total of All Transactions with this Payee/Payer for This Schedule		\$12,600
Type or Classification			
(B)			
Negotiation Consultant			
Name and Address (A)			
SEBAC	Purpose	Date	Amount
	(C)	(D)	(E)
1615 STANLEY ST	2016 Assessment	11/17/2016	\$21,745
NEW BRITAIN	Total Itemized Transactions with this Payee/Payer	11/17/2010	\$21,745
СТ	Total Non-Itemized Transactions with this Payee/Payer		\$21,745
06050	Total of All Transactions with this Payee/Payer for This Schedule		401 7 4
Type or Classification	Total of All Transactions with this Payee/Payer for This Schedule	I	\$21,745
(B)			
State Union Bargaining Agent			
Name and Address			
(A)			
VINCENT STEELE			
	Purpose	Date	Amount
192 STANLEY RD	(C)	(D)	(E)
HAMDEN	Total Itemized Transactions with this Payee/Payer	<u> </u>	(-)
CT	Total Non-Itemized Transactions with this Payee/Payer		\$10,048
06514	Total of All Transactions with this Payee/Payer for This Schedule		\$10,048
Type or Classification		I	\$10,040
(B)			
CSC Representative			

Name and Address			
(A)			
HARTY PRESS	Purpose	Date	Amount
	(C)	(D)	(E)
25 JAMES ST	2016 Endorsement Mailers	11/17/2016	\$5,924
NEW HAVEN	Total Itemized Transactions with this Payee/Payer		\$5,924
CT	Total Non-Itemized Transactions with this Payee/Payer		v - y -
06513	Total of All Transactions with this Payee/Payer for This Schedule		\$5,924
Type or Classification		I	· · / -
(B)			
Print Services			
Name and Address			
(A)			
LABOR UNITED FOR CT	Purpose	Date	Amount
	(C)	(D)	(E)
20 BEVERLY RD	Independent Expenditure	10/06/2016	\$10,000
WEST HARTFORD	Independent Expenditure	10/21/2016	\$10,000
СТ	Total Itemized Transactions with this Payee/Payer		\$20,000
06119	Total Non-Itemized Transactions with this Payee/Payer		
Type or Classification	Total of All Transactions with this Payee/Payer for This Schedule		\$20,000
(B)		'	
Independent Political Action			

SCHEDULE 17 - CONTRIBUTIONS, GIFTS & GRANTS

Name and Address			
(A)			
MCCUSKER SCHOLARSHIP FUND	Purpose	Date	Amount
	(C)	(D)	(E)
760 CAPITOL AVE HARTFORD	Donation	05/04/2017	\$9,000
	Total Itemized Transactions with this Payee/Payer		\$9,000
06106	Total Non-Itemized Transactions with this Payee/Payer		\$1,000
Type or Classification	Total of All Transactions with this Payee/Payer for This Schedule		\$10,000
(B)			
Member Children Scholarships			

SCHEDULE 18 - GENERAL OVERHEAD

Name and Address			
(A)			
AT&T			
PO BOX 5019	Purpose (C)	Date	Amount
CAROL STREAM	Total Itemized Transactions with this Payee/Payer	(D)	(E)
	Total Non-Itemized Transactions with this Payee/Payer		\$11,31
60197	Total of All Transactions with this Payee/Payer for This Schedule		\$11,31
Type or Classification			\$11,31
(B)			
Internet Access Provider			
Name and Address			
(A)			
AT&T MOBILITY			
PO BOX 6463	Purpose	Date	Amount
0 000 0403	(C)	(D)	(E)
CAROL STREAM	Total Itemized Transactions with this Payee/Payer	(-)	
	Total Non-Itemized Transactions with this Payee/Payer		\$6,31
50197	Total of All Transactions with this Payee/Payer for This Schedule		\$6,3
Type or Classification			φ0,5
(B)			
Cell Phone Provider			
Name and Address			
(A)			
CENTRAL PAPER			
PO BOX 1710	Purpose	Date	Amount
O BOX II IO	(C)	(D)	(E)
PAWCATUCK	Total Itemized Transactions with this Payee/Payer		(=)
RI	Total Non-Itemized Transactions with this Payee/Payer		\$8,12
02862	Total of All Transactions with this Payee/Payer for This Schedule		\$8,12
Type or Classification			φο,12
(B)			
Paper Supplier			
Name and Address			
(A)			
CNG			
PO BOX 9245	Purpose	Date	Amount
10 BOX 9243	(C)	(D)	(E)
CHELSEA	Total Itemized Transactions with this Payee/Payer		(=)
MA	Total Non-Itemized Transactions with this Payee/Payer		
02150	Total of All Transactions with this Payee/Payer for This Schedule		\$5,10 \$5,10
Type or Classification			φ0,10
(B)			
Natural Gas Service			
Name and Address			
(A)			
EVERSOURCE			
PO BOX 650032	Purpose	Date	Amount
0 000 000002	(C)	(D)	(E)
DALLAS	Total Itemized Transactions with this Payee/Payer	(-)	(=)
TX	Total Non-Itemized Transactions with this Payee/Payer		\$13,36
75265	Total of All Transactions with this Payee/Payer for This Schedule		\$13,36
Type or Classification			\$13,30
(B)			
Electricity Service			
Name and Address	Purpose	Date	Amount
	(C)		
(A)	(C)	(D)	(E)

https://olms.dol-esa.gov/query/orgReport.do

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HANOVER INSURANCE CO	Purpose	Date	Amount
PO BOX 580045	(C)	(D)	(E)
	Total Itemized Transactions with this Payee/Payer		
CHARLOTTE	Total Non-Itemized Transactions with this Payee/Payer		\$44,305
NC	Total of All Transactions with this Payee/Payer for This Schedule		\$44,305
28258		I	÷ · ·,• •
Type or Classification			
(B)			
Liability/Workers Comp Insurance			
Name and Address			
(A)			
HASLER, INC			
PO BOX 3808	Purpose	Date	Amount
PO BOX 3000	(C)	(D)	
		(D)	(E)
MILFORD CT	Total Itemized Transactions with this Payee/Payer		
	Total Non-Itemized Transactions with this Payee/Payer		\$17,550
06460	Total of All Transactions with this Payee/Payer for This Schedule		\$17,550
Type or Classification			
(B)			
Postage Meter Replenishments			
Name and Address			
(A)			
IAYSTAR GROUP INC		Data	American
	Purpose	Date	Amount
35 EAST AVE	(C)	(D)	(E)
NORWALK	Payment	02/02/2017	\$8,080
CT	Total Itemized Transactions with this Payee/Payer		\$8,08
6851	Total Non-Itemized Transactions with this Payee/Payer		\$5,76
Type or Classification	Total of All Transactions with this Payee/Payer for This Schedule		\$13,84
(B)			
IT Systems/Software Consultant			
Name and Address			
(A)			
PEPSI BOTTLING GROUP			
PO BOX 75948	Purpose	Date	Amount
	(C)	(D)	(E)
	Total Itemized Transactions with this Payee/Payer		
CHICAGO			
L	Total Non-Itemized Transactions with this Payee/Payer		\$5,109
CHICAGO IL 60675	Total Non-Itemized Transactions with this Payee/Payer		
IL 60675			
IL 60675 Type or Classification	Total Non-Itemized Transactions with this Payee/Payer		
IL 60675 Type or Classification (B)	Total Non-Itemized Transactions with this Payee/Payer		
IL 60675 Type or Classification (B) BOTTLED WATER/SODA	Total Non-Itemized Transactions with this Payee/Payer		\$5,105 \$5,105
L 50675 Type or Classification (B) BOTTLED WATER/SODA Name and Address	Total Non-Itemized Transactions with this Payee/Payer		
L 60675 Type or Classification (B) BOTTLED WATER/SODA Name and Address (A)	Total Non-Itemized Transactions with this Payee/Payer		
L 50675 Type or Classification (B) BOTTLED WATER/SODA Name and Address (A) PRESSTEK, INC	Total Non-Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer for This Schedule	Date	\$5,109
L 50675 Type or Classification (B) BOTTLED WATER/SODA Name and Address (A) PRESSTEK, INC	Total Non-Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer for This Schedule Purpose	Date	\$5,109
L 50675 Type or Classification (B) 30TTLED WATER/SODA Name and Address (A) PRESSTEK, INC 3727 SOLUTION CENTER	Total Non-Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer for This Schedule Purpose (C)	Date (D)	\$5,109
L 50675 Type or Classification (B) 30TTLED WATER/SODA Name and Address (A) PRESSTEK, INC 3727 SOLUTION CENTER	Total Non-Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer for This Schedule Purpose (C) Total Itemized Transactions with this Payee/Payer		\$5,109 Amount (E)
L 50675 Type or Classification (B) 3OTTLED WATER/SODA Name and Address (A) PRESSTEK, INC 3727 SOLUTION CENTER CHICAGO L	Total Non-Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer for This Schedule Purpose (C) Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer		\$5,109 Amount (E) \$6,209
L 50675 Type or Classification (B) 30TTLED WATER/SODA Name and Address (A) PRESSTEK, INC 3727 SOLUTION CENTER CHICAGO L 50677	Total Non-Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer for This Schedule Purpose (C) Total Itemized Transactions with this Payee/Payer		\$5,109 Amount (E) \$6,209
L 50675 Type or Classification (B) 30TTLED WATER/SODA Name and Address (A) PRESSTEK, INC 5727 SOLUTION CENTER CHICAGO L 50677 Type or Classification	Total Non-Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer for This Schedule Purpose (C) Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer		\$5,109 Amount (E) \$6,205
L 50675 Type or Classification (B) 30TTLED WATER/SODA Name and Address (A) PRESSTEK, INC 3727 SOLUTION CENTER CHICAGO L 50677 Type or Classification (B)	Total Non-Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer for This Schedule Purpose (C) Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer		\$5,109
L 50675 Type or Classification (B) 30TTLED WATER/SODA Name and Address (A) PRESSTEK, INC 3727 SOLUTION CENTER CHICAGO L 50677 Type or Classification (B) Print/Mailroom Equipment Maintenance	Total Non-Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer for This Schedule Purpose (C) Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer for This Schedule	(D)	\$5,109 Amount (E) \$6,209 \$6,209
L 50675 Type or Classification (B) 30TTLED WATER/SODA Name and Address (A) PRESSTEK, INC 3727 SOLUTION CENTER CHICAGO L 50677 Type or Classification (B)	Total Non-Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer for This Schedule Purpose (C) Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer	(D)	\$5,109 Amount (E) \$6,209 \$6,209
IL 60675 Type or Classification (B) BOTTLED WATER/SODA Name and Address (A) PRESSTEK, INC 3727 SOLUTION CENTER CHICAGO L 60677 Type or Classification (B) Print/Mailroom Equipment Maintenance Name and Address	Total Non-Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer for This Schedule Purpose (C) Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer for This Schedule	(D)	\$5,109 Amount (E) \$6,209 \$6,209
L 50675 Type or Classification (B) BOTTLED WATER/SODA Name and Address (A) PRESSTEK, INC 3727 SOLUTION CENTER CHICAGO L 50677 Type or Classification (B) Print/Mailroom Equipment Maintenance Name and Address (A)	Total Non-Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer for This Schedule Purpose (C) Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer for This Schedule Purpose (C)	(D)	\$5,109 Amount (E) \$6,209 \$6,209
IL 60675 Type or Classification (B) BOTTLED WATER/SODA Name and Address (A) PRESSTEK, INC 3727 SOLUTION CENTER CHICAGO IL 60677 Type or Classification (B) Print/Mailroom Equipment Maintenance Name and Address (A) ST OF CT-DEPT OF TRANPORTATION	Total Non-Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer for This Schedule Purpose (C) Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer Total Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer for This Schedule Purpose (C) Total of All Transactions with this Payee/Payer for This Schedule Total of All Transactions with this Payee/Payer for This Schedule Total Itemized Transactions with this Payee/Payer	(D)	Amount (E) \$6,205 \$6,205 Amount (E)
IL 60675 Type or Classification (B) BOTTLED WATER/SODA Name and Address (A) PRESSTEK, INC 3727 SOLUTION CENTER CHICAGO IL 60677 Type or Classification (B) Print/Mailroom Equipment Maintenance Name and Address (A)	Total Non-Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer for This Schedule Purpose (C) Total Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer Total Non-Itemized Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer Total of All Transactions with this Payee/Payer for This Schedule Purpose (C)	(D)	\$5,109 Amount (E) \$6,209 \$6,209

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Ст			1
06131			
Type or Classification			
(B)			
Parking Lot Lessor			
Name and Address			
(A)	Purpose	Date	Amount
US POSTAL SERVICE	(C)	(D)	(E)
	1st Class Replenish	10/28/2016	\$5,000
141 WESTON ST	1st Class Replenish	11/01/2016	\$6,000
HARTFORD	1st Class Replenish	12/22/2016	\$5,000
СТ	1st Class Replenish	05/01/2017	\$5,000
06101	Total Itemized Transactions with this Payee/Payer		\$21,000
Type or Classification	Total Non-Itemized Transactions with this Payee/Payer		\$7,295
(B)	Total of All Transactions with this Payee/Payer for This Schedule		\$28,295
General Postage		1	,
Name and Address			
(A)			
XEROX CORP			
PO BOX 827598	Purpose	Date	Amount
	(C)	(D)	(E)
PHILADELPHIA	Total Itemized Transactions with this Payee/Payer		
PA	Total Non-Itemized Transactions with this Payee/Payer		\$23,243
19182	Total of All Transactions with this Payee/Payer for This Schedule		\$23,243
Type or Classification			
(B)			
Copier Leases			

SCHEDULE 19 - UNION ADMINISTRATION

Name and Address			
(A)			
CENTRAL CT STATE UNIVERSITY	Purpose	Date	Amount
	(C)	(D)	(E)
1615 STANLEY ST	Payment	12/08/2016	\$12,319
NEW BRITAIN	Total Itemized Transactions with this Payee/Payer		\$12,319
CT 06050	Total Non-Itemized Transactions with this Payee/Payer		\$1,302
Type or Classification	Total of All Transactions with this Payee/Payer for This Schedule		\$13,621
(B)			
Union Convention Facility			
Name and Address			
(A)			
KRONHOLM INSURANCE SERVICES			A I
	Purpose	Date	Amount
55 CAPITAL BLVD - STE 102	(C)	(D)	(E)
ROCKY HILL	Renewal Premium	02/16/2017	\$15,835
СТ	Total Itemized Transactions with this Payee/Payer		\$15,835
06067	Total Non-Itemized Transactions with this Payee/Payer		ALE 005
Type or Classification	Total of All Transactions with this Payee/Payer for This Schedule		\$15,835
(B)			
Union Liability Insurance			
Name and Address			
(A)			
LIVINGSTON, ADLER, PULDA, MEIKLEJOHN	Purpose	Date	Amount
	(C)	(D)	(E)
557 PROSPECT AVE	Serivces Payment	08/18/2016	\$7,207
HARTFORD	Services Payment	10/06/2016	\$8,750
CT	Total Itemized Transactions with this Payee/Payer		\$15,957
06105	Total Non-Itemized Transactions with this Payee/Payer		\$20,632
Type or Classification (B)	Total of All Transactions with this Payee/Payer for This Schedule		\$36,589
Union Legal Service			
Name and Address			
(A)			
NOVAK FRANCELLA LLC			
	Purpose	Date	Amount
ONE PRESIDENTIAL BLVD	(C)	(D)	(E)
BALA CYNWYD	Hudson Report Review/Consult	04/06/2017	\$6,000
PA	Total Itemized Transactions with this Payee/Payer		\$6,000
19004	Total Non-Itemized Transactions with this Payee/Payer		* 2.000
Type or Classification	Total of All Transactions with this Payee/Payer for This Schedule	I	\$6,000
(B)			
Certified Public Accountants			
Name and Address			
(A)			
PROMOTIONAL SOLUTIONS	Purpose	Date	Amount
PO BOX 366	(C)	(D)	(E)
	Convention Giveaways Payment	10/27/2016	\$7,860
	Total Itemized Transactions with this Payee/Payer		\$7,860
CT	Total Non-Itemized Transactions with this Payee/Payer		\$3,081
06023	Total of All Transactions with this Payee/Payer for This Schedule		\$10,941
Type or Classification	, , , ,	I	••••••
(B)			
Convention Giveaways/Promo Items	D		A ma a · · · · 4
Name and Address	Purpose (C)	Date (D)	Amount
(A)	(0)	(D)	(E)

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\$17,211
\$17,211
\$45,500
\$45,500
\$15,000
\$15,000
\$4,500
\$19,500
-

SCHEDULE 20 - BENEFITS

Description	To Whom Paid	Amount
(A)	(B)	(C)
EMPLOYEE HEALTH BENEFITS	ANTHEM BC/BS	\$174,959
EMPLOYEE DENTAL/LIFE BENEFITS	PRINCIPAL LIFE INS CO	\$42,977
HRA/FSA ADMINISTRATION FEES	BENEFIT CENTER	\$2,896
TUITION FOR R. SALTO	CENTRAL CT STATE UNIVERSITY	\$950
TUITION REIMBURSEMENT	EVA BERMUDEZ	\$2,312
TUITION REIMBURSEMENT	BENJAMIN PHILLIPS	\$2,600
RETIREE HEALTH BENEFITS	CSEA RETIREE HEALTH FUND	\$79,445
HRA REIMBURSEMENTS	BENEFIT CENTER	\$78,911
EMPLOYEE LIFE INSURANCE	JACKSON LIFE	\$264
PENSION PAYMENTS	SEIU EMPLOYEE/OFFICER PENSION FUND	\$448,390
Total of all lines above (Total will be automatically entered in Item 55.)		\$833,704

Question 18: New Constitution and Bylaws attached.

Question 11(a): The Connecticut State Employees Association, SEIU, Local 2001 has a Connecticut State PAC named Connecticut State Employees Association PAC. Local 2001 maintains a separate, segregated account. No Union money is used for the CSEA PAC. All PAC funds come from voluntary contributions from members. Copies of the CSEA PAC reports are mandated by the State of Connecticut and are available at the State Elections Enforcement Commission, 20 Trinity Street, Hartford, CT 06106.

Question 12: An audit was conducted by Certified Public Accountants, WHITTLESEY & HADLEY, P.C., 280 Trumbull Street, Hartford, CT 06103

Schedule 8, Row1:

Schedule 8, Row1:

Schedule 13, Row1:

Schedule 13, Row1:Active members are employees who are not retired and pay dues.

Schedule 13, Row1:

Schedule 13, Row1:

Schedule 13, Row2:

Schedule 13, Row2:Any person who is retired under the provisions of a state sponsored system, or the spouse or domestic or civil union partner, or the surviving spouse or domestic or civil union partner of said person or any person who is retired from a retirement system of a political subdivision of the State of Connecticut, or the spouse or domestic or civil union partner who is receiving a pension payment from a retirement system of said political subdivision or a person who has terminated state service with vested rights or a person who has terminated service from a political subdivision with vested rights in the retirement system of that subdivision, or a CSEA member who has retired, may choose to retain membership in the CSEA by becoming a member of a chapter established for retirees. A spouse or domestic or civil union partner or the surviving spouse or domestic or civil union partner would have the same rights as those of an affiliate member, and only those rights. Council 400 delegates may vote to expand retirement membership to other retirees subject to the approval by the CSEA Executive Council. Retiree members have voting rights as defined in the CSEA SEIU, Local 2001 Constitution.

Schedule 13, Row2:

Schedule 13, Row2:Council 400 delegates may vote to expand retirement membership to other retirees subject to the approval by the CSEA Executive Council. Retiree members have voting rights as defined in the CSEA SEIU, Local 2001 Constitution. Form LM-2 (Revised 2010)