FORM LM-30
LABOR ORGANIZATION OFFICER AND
EMPLOYEE REPORT

This report is mandatory under P.L. 88-257, 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.

1. File Number: 240680
   2679

2. Fiscal Year Covered From: 01/01/2004 Through: 12/31/2004

3. Name and address of person filing.
   Name: LARRY ROBERTSON
   P.O. Box, Bldg., Room No., if any:
   Street: 5610 WAREN AVE.
   City: E. ST. LOUIS
   State: ILLINOIS ZIP Code + 4: 63204

4. Name, file number, and address of labor organization.
   Name: UAW LOCAL 110
   Labor Organization File Number: 575-491
   P.O. Box, Building and Room Number, if any: PO Box 1140
   Street: 995 LPRIN WILLIAMS RD
   City: PENTON
   State: MISSOURI ZIP Code + 4: 63026

5. Position in labor organization: Past President

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

6. Name and address of Employer (including trade name, if any).
   Name:
   Trade Name, if any:
   P.O. Box, Bldg., Room No., if any:
   Street:
   City:
   State ZIP Code + 4:

7. Nature of Interest, Transaction, or Income.
   7a. Nature of Interest, Transaction, or Income:
   7b. Amount:

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed: Larry D. Robertson
On: 6-31-05

Telephone Number: 618-295-1313
618-875-1338

Form LM-30 (2005)
8. Name and address of Business (including trade name, if any).

Name: GERALD KRETZM AR
Trade Name, if any: KRETZM AR, Beatty & Stone
P.O. Box, Bldg., Room No., if any: Suite 900
Street: 8000 Maryland Ave.
City: Clay ton
State: Missouri ZIP Code + 4: 63105

9. Business deals with:

- [ ] a. Labor Organization
- [ ] b. Trust
- [ ] c. Employer

11.a. Nature of such dealing.

GERALD KRETZM AR AND HIS LAW FIRM REPRESENT IAW LOCAL 110

11.b. Approximate dollar value of such dealing: \$10,362.00

12.a. Nature of interest, yield or income received.

I received 4 tickets (37.00 per ticket) to the St. Louis Cardinals baseball game in June 24, 2004.

12.b. Amount: \$148.00

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name:
Trade Name, if any:
P.O. Box, Bldg., Room No., if any:
Street:
City:
State ZIP Code + 4:

13.b. Is the Business an Employer [ ] or Consultant [ ]?

14.a. Nature of payment:


14.b. Amount of payment: 