**FORM LM-30**  
**LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT**

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.

<table>
<thead>
<tr>
<th>1. File Number</th>
<th>2. Fiscal Year Covered From:</th>
</tr>
</thead>
<tbody>
<tr>
<td>U - 1115</td>
<td>1/01/2004 Through: 12/31/2004</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3. Name and address of person filing:</th>
<th>4. Name, file number, and address of labor organization:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name: MICHAEL J. LAQUATRA</td>
<td>Name: LABORERS DISTRICT COUNCIL OF WPA</td>
</tr>
<tr>
<td>P.O. Box, Bldg., Room No., if any</td>
<td>Labor Organization File Number: 042083</td>
</tr>
<tr>
<td>Street: 1101 5th Ave</td>
<td>P.O. Box, Building and Room Number, if any</td>
</tr>
<tr>
<td>City: Pittsburgh</td>
<td>Street: 1101 5th Ave</td>
</tr>
<tr>
<td>State: PA</td>
<td>City: Pittsburgh</td>
</tr>
<tr>
<td>ZIP Code + 4: 15219</td>
<td>State: PA</td>
</tr>
<tr>
<td>ZIP Code + 4: 15219</td>
<td></td>
</tr>
</tbody>
</table>

5. Position in labor organization: STAFF REPRESENTATIVE

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.

<table>
<thead>
<tr>
<th>6. Name and address of Employer (including trade name, if any):</th>
<th>7.a. Nature of Interest, Transaction, or Income:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td></td>
</tr>
<tr>
<td>Trade Name, if any:</td>
<td></td>
</tr>
<tr>
<td>P.O. Box, Bldg., Room No., if any</td>
<td></td>
</tr>
<tr>
<td>Street</td>
<td></td>
</tr>
<tr>
<td>City</td>
<td></td>
</tr>
<tr>
<td>State</td>
<td>ZIP Code + 4</td>
</tr>
<tr>
<td>ZIP Code + 4</td>
<td></td>
</tr>
</tbody>
</table>

7.b. Amount: 

Signature: 

Signed: Michael J. Laquatra  
On: 8/15/05  
Date: 412-391-1712  
Telephone Number

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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).

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

9. Business deals with:

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

10. If 9.b. or 9.c. is checked give trust or employer's name.

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

11.a. Nature of such dealing.

[Redacted]

11.b. Approximate dollar value of such dealing. [Redacted]

12.a. Nature of interest held or income received.

[Redacted]

12.b. Amount. [Redacted]

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

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

Name: Highmark Blue Cross Blue Shield
Trade Name, if any: [Redacted]
P.O. Box, Bldg., Room No., if any: Fifth Avenue Place
Street: 120 Fifth Avenue
City: Pittsburgh
State: PA ZIP Code + 4 15222

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


August 31, 2004 - Golf Outing

14.b. Amount of payment. $247.84