**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-6424</td>
<td>1/1/2005 Through: 12/31/2005</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: Gary Jones</td>
<td>Name: International Union, UAW</td>
</tr>
<tr>
<td>P.O. Box, Bldg., Room No., if any</td>
<td>Labor Organization File Number: 660 149</td>
</tr>
<tr>
<td>Street: 721 Dunn Road</td>
<td>P.O. Box, Building and Room Number, if any</td>
</tr>
<tr>
<td>City: Hazelwood</td>
<td>Street: 8000 E. Jefferson</td>
</tr>
<tr>
<td>State: Missouri</td>
<td>City: Detroit</td>
</tr>
<tr>
<td>ZIP Code: 63042</td>
<td>State: Michigan</td>
</tr>
</tbody>
</table>

5. Position in labor organization: Assistant Director

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.  

7.a. Nature of Interest, Transaction, or Income.  

7.b. Amount.  

Signature

Signed:  
On: 02/20/2006  
Date: 314/731-2800  
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 UAW LETC
Trade Name, if any: 
P.O. Box, Bldg., Room No., if any Ste. 150 
Street 790 E. Willow 
City Long Beach 
State California ZIP Code + 4 90806

9. Business deals with:

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

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

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

11.a. Nature of such dealing.

Develop training and administer programs for various UAW-represented employers.

11.b. Approximate dollar value of such dealing. **unknown**

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

Coordinate training programs for the Region and attended the LETC quarterly board meetings. The LETC provided the hotel accommodations for the quarterly board meetings.

12.b. Amount. **$811**

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 
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.b. Amount of payment.