Labor Organization Officer and Employee Report

U.S. Department of Labor
Office of Labor-Management Standards

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 439,440.

Form approved - OMB No. 1215-0188
Expires 11-30-99

045314

1. Name and address of person filing	2. Name and address of labor organization
Lonnie K. Harkness 345 N. Main St. SLC, UT 84103	IATSE Local 99 526 W. 800 S. SLC, UT 84101

3. Position in labor organization	4. Date fiscal year ended	5. File number (if assigned)
Dispatcher	12-31-00	4-1381

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 of Employer — Address of Employer

Utah Theatrical Payroll Svc., Inc. 526 W. 800 S. SLC UT 84101

7. Nature of Interest, Transaction or Income

Board of Director - $1,200.00
Payroll Clerk - $19,592.03

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 of business — Address of business

9. Business deals with—	10. If 9B or 9C is checked give trust or employer's name
☐ A. Labor Organization ☐ B. Trust ☐ C. Employer	

11. Nature and approximate dollar value of such dealings

12. Nature of interest held or income received

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. Name and address of employer ☐ or consultant ☐	14. Nature of payment

IF MORE SPACE IS NEEDED ATTACH ADDITIONAL SHEETS

15. **Signature and verification**—The undersigned declares, under the applicable penalties of the law, that all of the information in this report, including the attachments incorporated therein or referred to in this report, has been examined by him and is, to the best of his knowledge and belief, true, correct and complete.

Signed: _____ at Salt Lake City (City) Utah (State) on 3-5-01 (Date)

Form LM-30 (Rev. 1986)