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

FORM LM-30
LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

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.

For Official Use Only

U.S. DOL ESA Rec'd NOV 22 2005 B OLMS DRDA E

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 10493	2. Fiscal Year Covered From 1 / 1 / 2004 Through: 12 / 31 / 2004
3. Name and address of person filing. Name Timothy W Moore P.O. Box, Bldg , Room No., if any Street 6949 Harrison Avenue City Hammond State Indiana ZIP Code + 4 46324	4. Name, file number, and address of labor organization. Name Laborers International Union of N. America-269 Labor Organization File Number 000-131 P.O. Box, Building and Room Number, if any Street 13256 S. Brandon Avenue City Chicago State Illinois ZIP Code + 4 60633
5. Position in labor organization. Sceretary/Treasurer	

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.a. Nature of Interest, Transaction, or Income. 7.b. 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 Timothy W Moore On 8-12-05 (773) 646-5999
Date Telephone Number

Name of Person Filing Timothy Moore	File Number U-

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).	9. Business deals with:
Name Laborers-Employers Cooperation and Edu Trust Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 999 McClintock Dr. - Suite 302 City Burr Ridge State Illinois ZIP Code + 4 60527	X a. Labor Organization b. Trust 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. Laborers-Employers Cooperation and Education Trust (LECET) secures projects and jobs, increases union sector market share, advertises their services, developes a work force and advances shared market related interests. 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received. 3/25/04 Safety Incentive Program Lunch & gave a coaster. 12.b. Amount. $56

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).	14.a. Nature of payment.
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.

Name of Person Filing Timothy Moore	File Number U-

Part B Continuation Page

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).	9. Business deals with:
Name Laborers Training & Apprentice Fund Trade Name, if any: P.O. Box, Bldg., Room No., if any P.O. BOX 88658 Street 1200 Old Gary Avenue City Carol Stream State Illinois ZIP Code + 4 60188	X a. Labor Organization b. Trust 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. Training center for Union members and apprentices
	11.b. Approximate dollar value of such dealing.
	12.a. Nature of interest held or income received. 2/2004 Apprentice Graduation Banquet
	12.b. Amount. $67

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Part B Continuation Page

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

Name Laborers-Employers Cooperation and Edu Trust

Trade Name, if any:

P.O. Box, Bldg., Room No., if any

Street 999 McClintock Dr. - Suite 302

City Burr Ridge

State Illinois ZIP Code + 4 60527

9. Business deals with:

X a. Labor Organization

b. Trust

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.

Laborers-Employers Cooperation and Education Trust (LECET) secures projects and jobs, increases union sector market share, advertises their services, developes a work force and advances shared market related interests.

11.b. Approximate dollar value of such dealing.

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

10/14/04
Shirt

12.b. Amount. $25