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

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US DOL ESA Rec'd NOV 22 2005 B OLMS DRDA

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1 File Number U 18396

2 Fiscal Year Covered From 01 / 01 / 2004 Through 12 / 3 / 2004

3 Name and address of person filing

Name PETER A NUNEZ

P O Box Bldg Room No if any

Street 1140 W OLIVE AVE

City FRESNO

State CA ZIP Code + 4 93728-2815

4 Name file number and address of labor organization

Name GENERAL TEAMSTERS UNION LOCAL #431

Labor Organization File Number 028-816

P O Box Building and Room Number if any

Street 1140 W OLIVE AVE

City FRESNO

State CA ZIP Code + 4 93728-2815

5 Position in labor organization SECRETARY-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 Peter N On 8-15-05 Date (559) 486-5410 Telephone Number

Name of Person Filing PETER NUNEZ	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)

Name: BRIGHT NOW DENTAL

Trade Name if any:

P O Box Bldg Room No if any: SUITE 700

Street: 201 EAST SANDPOINT AVE

City: SANTA ANA

State: CA ZIP Code + 4: 92707

9 Business deals with

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

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

Name: NOR CAL GENERAL TEAMSTERS SECURITY TRUST FUND

Trade Name if any:

P O Box Bldg Room No if any: P O BOX 1227

Street:

City: STOCKTON

State: CA ZIP Code + 4: 95201-1227

11 a Nature of such dealing

MULTIPEMPLOYER WELFARE TRUST FUND

11 b Approximate dollar value of such dealing:

12 a Nature of interest held or income received

SEE CONTINUATION PAGE

12 b Amount: 100.00

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 a Nature of payment

14 b Amount of payment

Name of Person Filing PETER NUNEZ	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 of Business from Pg 2	12 a Nature of interest held or income received (con t from Pg 2)
Bright Now Dental	The person identified in item 3 is a Union Trustee on the Board of Trustees of the entity identified in item 10 which is a jointly administered trust fund under the Labor Management Relations Act of 1947 as amended (the Trust Fund ') In performance of his duties as a trustee on the Trust Fund he has met with representative(s) of the entity identified in item 8 for the purpose of discussing trust fund-related matters During the course of such meeting(s) said representative(s) paid for food, beverages and/or incidental expenses The amount entered in item 12 b is the estimated value of such food and beverage and related expenditures on or about May 20 2004 This estimate is based on a review of a business calendar for appointments and meetings in 2004