U S Department of Labor
Office of Labor Management Standards
Washington DC 20210

US DOL ESA Rec'd

# 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

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

| | |
|---|---|
| 1 File Number U ~~728~~ 10897 | 2 Fiscal Year Covered From 1/1/04 Through 12/31/04 |
| 3 Name and address of person filing<br>Name James R Walker<br>P O Box Bldg Room No If any<br>Street 100 Nina Celestia Lane<br>City Fayetteville<br>State GA ZIP Code + 4 30215 | 4 Name file number and address of labor organization<br>Name Teamster Local 728<br>Labor Organization File Number 000-000 035292<br>P O Box Building and Room Number if any<br>Street 2540 Lakewood Ave SW<br>City Atlanta<br>State GA ZIP Code + 4 |
| 5 Position in labor organization Union Trustee | |

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)<br>Name<br>Trade Name If any<br>P O Box Bldg Room No If any<br>Street<br>City<br>State ZIP Code + 4 | 7 a Nature of Interest Transaction or Income<br>N/A<br>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 James R Walker On 8/15/05 Date 404 557-0054 Telephone Number

Form LM 30 (2003)

Name of Person Filing James Walker | File Number U 728

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

Trade Name If any

P O Box Bldg Room No If any

Street

City

State ZIP Code + 4

9 Business deals with

[ ] a Labor Organization

[X] b Trust

[ ] c Employer

N/A

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

N/A

11 a Nature of such de ling

N/A

11 b Approximate dollar value of such dealing

12 a Nature of interest held or income received

N/A

12 b Amount

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 Relat ons Consultant (includ ng trade name if any)

Name

Trade Name If any

P O Box Bldg Room No If any

Street

City

State ZIP Code + 4

14 a Nature of payment

N/A

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

14 b Amount of payment