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 Office Use Only
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Rec'd AUG 19 2005 B

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U-12009	2. Fiscal Year Covered From: 1 / 1 / 2004 Through: 12 / 31 / 2004
3. Name and address of person filing. Name FRANK N BENISH P.O. Box, Bldg., Room No., if any Street 716 SALMON RUN City SULTAN State Washington ZIP Code + 4 98294	4. Name, file number, and address of labor organization. Name CEMENT MASONS LOCAL 528 Labor Organization File Number 047366 P.O. Box, Building and Room Number, if any Street 552 DENNY WAY, SUITE 102 City SEATTLE State Washington ZIP Code + 4 98109
5. Position in labor organization. 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). Name CEMENT MASONS & PLASTERERS TRUST Trade Name, if any: P.O. Box, Bldg., Room No., if any PO BOX 34203 Street 2815 SECOND AVENUE, SUITE 300 City SEATTLE State Washington ZIP Code + 4 98124	7.a. Nature of Interest, Transaction, or Income. 2004 REIMBURSED EXPENSES FOR ATTENDANCE AT EDUCATIONAL SEMINARS/CLASSES TO ENHANCE SKILLS OF JOB AS TRUSTEE FOR THE CEMENT MASONS UNION's Trust. REIMBURSED EXPENSES INCLUDE AIRFARE, LODGING, MEALS AND ALSO PAID FOR TIME SPENT AT CLASSES. (SEE ATTACHED DETAIL) 7.b. Amount. $2,706

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 _____ On 8/12/05 (Date) 206-441-9386 (Telephone Number)

Name of Person Filing FRANK BENISH	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 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 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. 11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received. 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 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	14.a. Nature of payment.
13.b. Is the Business an Employer or Consultant ?	14.b. Amount of payment

CEMENT MASONS AND PLASTERERS
RETIREMENT TRUST

25620

LOST WAGES IFEBP 2003	995 006	1,597.60 + reported on F.1099-misc.
IFEBP EXPENSES 2003	836 010	582.17
		2,179.77

CEMENT MASONS AND PLASTERERS
RETIREMENT TRUST

P.O. BOX 34203
SEATTLE, WA 98124-1203

Bank of America
Central Branch, 600 Olive Way
Seattle, Washington 98101
CASC

19-2/1250

25620

TWO THOUSAND ONE HUNDRED SEVENTY NINE AND 77/100 DOLLARS

DATE JANUARY 26, 2004

AMOUNT 2,179.77

TO THE ORDER OF: FRANK BENISH
CEMENT MASONS LOCAL 528
552 DENNY WAY SUITE 102
SEATTLE WA 98109

NOT NEGOTIABLE

TRUSTEE EXPENSE VOUCHER

Cement Masons and Plasterer H+W/Pension 2003 exp paid 2004

(Name of Trust Fund(s))

THIS VOUCHER IS FOR:

☐ EXPENSES IN CONNECTION WITH ATTENDANCE AT TRUST MEETING AT _____ (Location) ON _____ (Date(s))

☒ EXPENSES IN CONNECTION WITH ATTENDANCE AT EDUCATIONAL MEETING AT San Diego, Ca (Location)

ON _____ (Date(s)) SPONSORED BY International Foundation (Meeting Sponsor)

☐ OTHER: _____ (Describe Reason for Incurring Expenses)

TRANSPORTATION:

DATE OF DEPARTURE 11-7 DATE OF RETURN 11-13

☐ PRIVATE AUTOMOBILE _____ MILES AT _____ ¢ PER MILE . . . . . $ _____

☑ AIRFARE ☐ TRAIN ☐ BUS — (ATTACH COPY OF TICKET) . . . . . $ 1266.25

☐ RENTACAR AT MEETING LOCATION (ATTACH COPY OF BILL) . . . . . $ _____

HOTEL OR MOTEL:

☑ HOTEL OR MOTEL EXPENSE (ATTACH COPY OF BILL) . . . . . $ 1012.74

MEETING REGISTRATION FEE:

☐ MEETING REGISTRATION FEE EXPENSE (ATTACH RECEIPT) . . . . . $ _____

DAILY EXPENSES:

☑ DAILY EXPENSES (FROM REVERSE SIDE OF VOUCHER) . . . . . $ 2167.03

TOTAL EXPENSES . . . . . $ 3446.02

SETTLEMENT

TOTAL EXPENSES WHICH I INCURRED . . . . . $ 3446.02

LESS THE AMOUNT I RECEIVED AS AN ADVANCE (IF ANY) . . . . . $ 1,266.25

EQUALS

☐ REFUND WHICH I OWE TO TRUST FUND. MY CHECK IS ATTACHED . . . $ _____

OR

☑ AMOUNT OWING ME BY TRUST FUND. I REQUEST REIMBURSEMENT . . . $ 2179.77

I HEREBY CERTIFY THAT THE EXPENSES DETAILED ON THIS VOUCHER ARE THE PROPER AND ACTUAL EXPENSES WHICH I INCURRED IN CONNECTION WITH THE TRUST FUND ACTIVITY NOTED ABOVE.

DATED THIS 21st DAY OF Jan, ~~19~~ 2004

(Signature of Trustee) 716 Salmon Run, Sultan 98294 (Address and City)

Note: This voucher is for expenses personally incurred by you as a Trustee. If transportation charges hotel deposits, registration fees, or any other item, has been paid directly by the Trust Fund, do not list on this voucher. If you travel with a family member or other person not connected with the Trust Fund, the expenses of such person are not reimburseable. If such expenses are included on any of the attached bills or receipts, you should note the necessary adjustments on the bill or receipt (For example: If the hotel or motel bill contains a charge for a double room because of occupancy by a family member, subtract the difference between the double room and a single room and indicate on the bill that only the balance is being charged to the Trust Fund). Meals should not be listed if they are otherwise included with air transportation or included on hotel or motel bills. If any expense item requires an explanation, mark the item with an asterisk and write the explanation on the reverse side of this voucher. Reimbursement of expenses claimed on this voucher is subject to any expense policy or limitation which may have been adopted by the Board of Trustees.

SPACE FOR USE OF ADMINISTRATIVE AGENT OR FOR APPROVAL OF TRUST OFFICERS (IF REQUIRED):

EXPENSES
NUMBER OF DAYS
DATE: 11-

DAILY EXPENSES (ATTACH RECEIPTS FOR ANY SINGLE ITEM OF $25 OR MORE):

NUMBER OF DAYS SPENT ON THIS TRUST FUND ACTIVITY INCLUDING TRAVEL DAYS _____

DATE: 11-7		DATE: 11-8		DATE: 11-9	
BREAKFAST & TIP	$ 5.99	BREAKFAST & TIP	$ —	BREAKFAST & TIP	$ —
LUNCH & TIP	$ 16.46	LUNCH & TIP	$ —	LUNCH & TIP	$ —
DINNER & TIP	$ 36.17	DINNER & TIP	$ 37.00	DINNER & TIP	$ —
BEVERAGES & TIP	$ 3.19	BEVERAGES & TIP	$ 3.00	BEVERAGES & TIP	$ 4.80
PORTERS - BELLMEN	$ 5.00	PORTERS - BELLMEN	$ —	PORTERS - BELLMEN	$ —
LIMOS-TAXIS-BUSES	$ 15.00	LIMOS-TAXIS-BUSES	$ 36	LIMOS-TAXIS-BUSES	$ 20.00
Wages (Other)	$ 319.52	(Other)	$	(Other)	$ —
TOTAL THIS DATE	$ ~~319.52~~ 401.33	TOTAL THIS DATE	$ 76	TOTAL THIS DATE	$ 24.80

DATE: 11-10		DATE: 11-11	
BREAKFAST & TIP	$ —	BREAKFAST & TIP	$ —
LUNCH & TIP	$ —	LUNCH & TIP	$ 49.82
DINNER & TIP	$ —	DINNER & TIP	$ 93.00
BEVERAGES & TIP	$ 7.50	BEVERAGES & TIP	$ 6.50
PORTERS - BELLMEN	$ —	PORTERS - BELLMEN	$ —
LIMOS-TAXIS-BUSES	$ 42.00	LIMOS-TAXIS-BUSES	$ —
Wages (Other)	$ 319.52	Wages (Other)	$ 319.52
TOTAL THIS DATE	$ 369.02	TOTAL THIS DATE	$ 468.84

IF MORE THAN FIVE DAYS, ATTACH AN ADDITIONAL VOUCHER SHEET

TOTAL OF ALL DAILY EXPENSES $ 1339.99
(Transfer amount to front side of voucher)

EXPLANATIONS (IF NEEDED):

EXPENSES (ATTACH RECEIPTS FOR ANY SINGLE ITEM OF $25 OR MORE):

BER OF DAYS SPENT ON THIS TRUST FUND ACTIVITY INCLUDING TRAVEL DAYS _____

DATE: 11-12		DATE: 11-13		DATE:	
BREAKFAST & TIP	$ 12.34	BREAKFAST & TIP	$ —	BREAKFAST & TIP	$
LUNCH & TIP	$ ~~40.92~~	LUNCH & TIP	$ 1.69	LUNCH & TIP	$
DINNER & TIP	$ 40.92	DINNER & TIP	$ —	DINNER & TIP	$
VERAGES & TIP	$ 7.75	BEVERAGES & TIP	$ —	BEVERAGES & TIP	$
RTERS - BELLMEN	$ —	PORTERS - BELLMEN	$ 12.00	PORTERS - BELLMEN	$
LIMOS-TAXIS-BUSES	$ 9.00	~~LIMOS-TAXIS-BUSES~~ Parking	$ 86.70	LIMOS-TAXIS-BUSES	$
Wages (Other)	$ 319.52	Wages (Other)	$ 319.52	(Other)	$
Snacks	17.60				
TOTAL THIS DATE	$ 407.13	TOTAL THIS DATE	$ 419.91	TOTAL THIS DATE	$

DATE:		DATE:	
BREAKFAST & TIP	$	BREAKFAST & TIP	$
LUNCH & TIP	$	LUNCH & TIP	$
DINNER & TIP	$	DINNER & TIP	$
VERAGES & TIP	$	BEVERAGES & TIP	$
PORTERS - BELLMEN	$	PORTERS - BELLMEN	$
LIMOS-TAXIS-BUSES	$	LIMOS-TAXIS-BUSES	$
(Other)	$	(Other)	$
TOTAL THIS DATE	$	TOTAL THIS DATE	$

IF MORE THAN FIVE DAYS, ATTACH AN ADDITIONAL VOUCHER SHEET

TOTAL OF ALL DAILY EXPENSES $ 827.04
(Transfer amount to front side of voucher)

EXPLANATIONS (IF NEEDED):

11-13 Porter - Bellman. Tip is for Maid
11-13 Parking = Airport Parking

CEMENT MASONS AND PLASTERERS
RETIREMENT TRUST

32774

AIRFAIR/PRKG IFEBP CANCEL. 2004 836 010 525.89

525.89

CEMENT MASONS AND PLASTERERS
RETIREMENT TRUST

P.O. BOX 34203
SEATTLE, WA 98124-1203

Bank of America
Central Branch, 600 Olive Way
Seattle, Washington 98101
CASC
19-2/1250

32774

FIVE HUNDRED TWENTY FIVE AND 89/100 DOLLARS

DATE SEPTEMBER 21, 2004

AMOUNT 525.89

TO THE ORDER OF: FRANK BENISH
CEMENT MASONS LOCAL 528
552 DENNY WAY SUITE 102
SEATTLE WA 98109

NOT NEGOTIABLE