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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READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 2545

2. Fiscal Year Covered From: 001 / 01 / 2005 Through: 12 / 31 / 22005

3. Name and address of person filing.

Name: Ronnie Gray

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

Street: 623 5th.Avenue North

City: Texas City

State: Texas ZIP Code + 4: 77590

4. Name, file number, and address of labor organization.

Name: Communications_Workers_America_L6228

Labor Organization File Number: 000-188

P.O. Box, Building and Room Number, if any:

Street: 623 5th.Avenue North

City: Texas City

State: Texas ZIP Code + 4: 77590

5. Position in labor organization: President

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: A T &T/SBC

Trade Name, if any:

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

Street: 6500 River Place,Bldg3 ste419

City: Austin

State: Texas ZIP Code + 4: 78730

7.a. Nature of Interest, Transaction, or Income.

Travel,Lodging,Per Diem and Social while attending joint company union 5 state productivity task force committee meetings.

7.b. Amount.

$545.00

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: [signature] On 4-25-06 (Date) 409.948.1133 (Telephone Number)