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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US DOL Rec'd MAY 25 2006 B OLMS DRDA

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1 File Number U 25783	2 Fiscal Year Covered From 1 / 1 / 2005 Through 12 / 31 / 2005
3 Name and address of person filing Name Benjamin Castillo P O Box Bldg Room No if any Suite 200 Street 2333 N Lake Ave City Altadena State California ZIP Code + 4 91001	4 Name file number and address of labor organization Name Painter AFL CIO DC 36 Labor Organization File Number 030-396 P O Box Building and Room Number if any Suite 200 Street 2333 N Lake Ave City Altadena State California ZIP Code + 4 91101
5 Position in labor organization Business Representative	

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 _____ On May 8 2006 (626) 584 9925
Date Telephone Number

Name of Person Filing Benjamin Castillo	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 SCPD Labor Management Cooperation Committee

Trade Name if any So Cal Drywall Finishers LMCC

P O Box Bldg Room No if any Suite 220

Street 2333 N Lake Ave

City Altadena

State California ZIP Code + 4 91001

9 Business deals with

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

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

Name Los Angeles Paint Finishing Contractors Assc

Trade Name if any LAP & FCA

P O Box Bldg Room No if any

Street 1106 Colorado Blvd

City Los Angeles

State California ZIP Code + 4 90041

11 a Nature of such dealing

The LMCC isa jointly administered labor and management fund established underthe termsof the Collective Bargaining Agreement The LMCC arbitrates disputes and issues interpretations of the Agreement

11 b Approximate dollar value of such dealing $0

12 a Nature of interest held or income received

LAP FCA Instl of officers 1/2005

12 b Amount $130

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

Name of Person Filing Benjamin Castillo	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

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Trade Name if any LAP & FCA

P O Box Bldg Room No if any

Street 1106 Colorado Blvd

City Los Angeles

State California ZIP Code + 4 90041

11 a Nature of such dealing

The LMCC is a jointly administered labor and management fund established under the terms of the Collective Bargaining Agreement The LMCC arbitrates disputes and issues interpretations of the Agreement

11 b Approximate dollar value of such dealing $0

12 a Nature of interest held or income received

LAP FCA Holiday Event on Novemeber 18 2005

12 b Amount $219