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 8872

2 Fiscal Year Covered From 1 / 1 / 2004 Through 12 / 31 / 2004

3 Name and address of person filing

Name Stanley L Johnson

P O Box Bldg Room No if any

Street 3403 Apple Blossom Lane

City Boise

State Idaho ZIP Code + 4 83705

4 Name file number and address of labor organization

Name International Brotherhood of Teamsters LU 483

Labor Organization File Number 041-134

P O Box Building and Room Number if any

Street 225 N 16th St Suite 112

City Boise

State Idaho ZIP Code + 4 83702

5 Position in labor organization Secretary-Treasurer IBT LU # 483

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 N/A

Trade Name if any N/A

P O Box Bldg Room No if any N/A

Street N/A

City N/A

State ZIP Code + 4

7 a Nature of Interest, Transaction or Income

N/A

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 Stanley L Johnson On 8/12/05 Date 208-343-5439 Telephone Number

Name of Person Filing Stanley Johnson	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: Group Benefits

Trade Name if any:

P O Box Bldg Room No if any: P O Box 30749

Street: 2621 S 3270 W

City: Salt Lake City

State: Utah ZIP Code + 4: 84119

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: Group Benefits

Trade Name if any:

P O Box Bldg Room No if any: P O Box 30749

Street: 2621 S 3270 W

City: Salt Lake City

State: Utah ZIP Code + 4: 84130

11 a Nature of such dealing

Attend quartley health trust meeting as a trustee
Attend a International Foundationg educational seminar in Orlando Fl on Feb 22-25 2004

11 b Approximate dollar value of such dealing: $4 671

12 a Nature of interest held or income received

Refunds from Group Benefits a H & W trust for travel and substance expenses for myself as a union trustee

A copy of all itemised expense reports and checks for reimbursements are attached to this filing

12 b Amount: $4 671

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

Expense Report

Utah - Idaho Teamsters Trust

NAME Stanley Johnson

PERIOD ENDING 2-25 04

		2 22	2-23	2 24	2-25					Totals
Miles Driven										
Reimbursement	$0 375									
Parking And Tolls										
Auto Rental										123 54
Taxi / Limo										
Other (Rail Or Bus)										7 00
Airfare										389 00
TRANSPORTATION TOTAL										519 54
Lodging		274 29	274 29	274 29	274 29					1097 16
Breakfast										
Lunch		12 64	35 05	20 08	17 92					85 69
Dinner		13 80	28 56	22 00	36 23					100 59
SUB TOTAL MEALS										
LODGING & MEALS SUBTOTAL										1283 44
Supplies / Equipment										
Phone Fax										
ENTERTAINMENT										
TOTAL PER DAY										1802 98

DETAILED ENTERTAINMENT RECORD

DATE	ITEM	PERSONS ENTERTAINED BUSINESS RELATIONSHIP	PLACE NAME & LOCATION	BUSINESS PURPOSE	AMOUNT

PURPOSE OF TRIP

SUMMARY	
TOTAL EXPENSES	1802 98
LESS CASH ADVANCE	350 00
LESS COMPANY CHARGES	
AMOUNT DUE EMPLOYEE	1452 98
AMOUNT DUE COMPANY	

Arlene Bingham 3-31 04
PREPARED BY DATE

Dean F. Lorbett 3 31-04
APPROVED BY DATE

PAY One Thousand Fifty Six Dollars and 98/100 * * * * *

DATE 3-31-04

AMOUNT $ 1,056.98

THE ORDER OF Stanley Tomson

NOT NEGOTIABLE

SP2000 CARBONLESS IC SECURITY PRINTE S, INC

PAYEE DETACH THIS STATMENT BEFORE DEPOSITING CHECK

DATE	INVOICE NO	DESCRIPTION	AMOUNT	DISCOUNT OR DEDUCTION	NET AMOUNT
		Trustee travel reimbursement for International Foundation meeting held February 22 - 25, 2004	1,056.98		

PAY Three Hundred Ninety Six Dollars and no/100 * * * *

DATE 3-31 04

AMOUNT $ 396

TO THE ORDER OF Stanley Johnson

NOT NEGOTIABLE

SP2000 CARBONLESS IC SECURITY PRINTERS, INC.

PAYEE DETACH THIS STATMENT BEFORE DEPOSITING CHECK

DATE	INVOICE NO	DESCRIPTION	AMOUNT	DISCOUNT OR DEDUCTION	NET AMOUNT
		Trustee travel reimbursement for International Foundation meeting held 2-22 - 25, 2004	396.00		

TRUSTEE EXPENSE VOUCHER

Ut Id trust
(Name of Trust Fund(s))

THIS VOUCHER IS FOR

☒ EXPENSES IN CONNECTION WITH ATTENDANCE AT TRUST MEETING AT SLC (Location) ON 3-31-04 (Date(s))

☐ EXPENSES IN CONNECTION WITH ATTENDANCE AT EDUCATIONAL MEETING AT _____ (Location)

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

☐ OTHER _____ (Describe Reason for Incurring Expenses)

TRANSPORTATION

DATE OF DEPARTURE _____ DATE OF RETURN _____

☒ PRIVATE AUTOMOBILE 722 MILES AT 36 ¢ PER MILE $ 259.92

☐ AIRFARE ☐ TRAIN ☐ BUS — (ATTACH COPY OF TICKET) $ _____

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

HOTEL OR MOTEL

☒ HOTEL OR MOTEL EXPENSE (ATTACH COPY OF BILL) $ 77.00

MEETING REGISTRATION FEE

☐ MEETING REGISTRATION FEE EXPENSE (ATTACH RECEIPT) $ _____

DAILY EXPENSES

☐ DAILY EXPENSES (FROM REVERSE SIDE OF VOUCHER) $ 12.00

TOTAL EXPENSES $ _____

SETTLEMENT

TOTAL EXPENSES WHICH I INCURRED $ _____

LESS THE AMOUNT I RECEIVED AS AN ADVANCE (IF ANY) $ _____

EQUALS

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

OR

☐ AMOUNT OWING ME BY TRUST FUND I REQUEST REIMBURSEMENT $ 348.92

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 31st DAY OF March 04

Stanley Johnson (Signature of Trustee) 3403 Apple Blossom Ln Boise ID 83703 (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 except (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 Reimbursements 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)

374 M

UTAH-IDAHO TEAMSTERS SECURITY FUND
P O Box [illegible]
SALT LAKE CITY UTAH 84130

№ 7517

US bank
24-Hour Banking
1-800-673-2565
97 215/1243

PAY Three Hundred Forty Eight Dollars and 92/100 * * * *

DATE 3-31-04

AMOUNT $ 348 92

TO THE ORDER OF Stanley Johnson

NOT NEGOTIABLE

⑈0007517⑈ ⑆243021501⑆153100480398⑈

SP2000 CARBONLESS IC SECURITY PRINTERS INC.

PAYEE DETACH THIS STATMENT BEFORE DEPOSITING CHECK

UTAH-IDAHO TEAMSTERS SECURITY FUND S L C Utah 84130

DATE	INVOICE NO	DESCRIPTION	AMOUNT	DISCOUNT OR DEDUCTION	NET AMOUNT
		Trustee travel reimbursement for meeting held 3/31/04 in Salt Lake City	348 92		

Expense Report

Utah - Idaho Teamsters Trust

NAME Stan Johnson

PERIOD ENDING 6-30-04

										Totals
Miles Driven		712								
Reimbursement	$0 375	267 00								
Parking And Tolls										
Auto Rental										
Taxi / Limo										
Other (Rail Or Bus)										
Airfare										
TRANSPORTATION TOTAL										
Lodging		65.84								
Breakfast										
Lunch		3 70								
Dinner		11.15								
SUB-TOTAL MEALS										
LODGING & MEALS SUBTOTAL										
Supplies / Equipment										
Phone Fax										
ENTERTAINMENT										
TOTAL PER DAY		34769								

DETAILED ENTERTAINMENT RECORD

DATE	ITEM	PERSONS ENTERTAINED BUSINESS RELATIONSHIP	PLACE NAME & LOCATION	BUSINESS PURPOSE	AMOUNT

PURPOSE OF TRIP

Ut-ID trustee meeting

SUMMARY

TOTAL EXPENSES	34769
LESS CASH ADVANCE	
LESS COMPANY CHARGES	
AMOUNT DUE EMPLOYEE	
AMOUNT DUE COMPANY	34769

Stanley Johnson 6-30-04
PREPARED BY DATE

Dean F Corbett 6-30-04
APPROVED BY DATE

UTAH-IDAHO TEAMSTERS SECURITY FUND
P.O. BOX 30749 (801) 972-1377
SALT LAKE CITY, UTAH 84130

3/33

№ 7613

usbank.
24-Hour Banking
1-800-673-2266
87-215/1243

PAY Three Hundred Forty Seven Dollars and 69/100 * * *

DATE 6-30-04

AMOUNT $ 347.69

TO THE ORDER OF Stan Johnson

NOT NEGOTIABLE

⑈0007613⑈ ⑆124302150⑆ 153100⑈60398⑈

SP2000 CARBONLESS IC SECURITY PRINTERS, INC.

PAYEE DETACH THIS STATEMENT BEFORE DEPOSITING CHECK

UTAH-IDAHO TEAMSTERS SECURITY FUND S.L.C. Utah 84130

DATE	INVOICE NO	DESCRIPTION	AMOUNT	DISCOUNT OR DEDUCTION	NET AMOUNT
		Trustee travel reimbursement for meeting held 6/30/04 in Salt Lake City	347.69		

Expense Report

Utah - Idaho Teamsters Trust

NAME Stan Johnson

PERIOD ENDING

										Totals
Miles Driven										
Reimbursement	$0 375	730								273 75
Parking And Tolls										
Auto Rental										
Taxi / Limo										
Other (Rail Or Bus)										
Airfare										
TRANSPORTATION TOTAL										
Lodging		86 16								
Breakfast										
Lunch										
Dinner		10 75								
SUB-TOTAL MEALS										
LODGING & MEALS SUBTOTAL		96 91								96 91
Supplies / Equipment										
Phone Fax										
ENTERTAINMENT										
TOTAL PER DAY										

DETAILED ENTERTAINMENT RECORD

DATE	ITEM	PERSONS ENTERTAINED BUSINESS RELATIONSHIP	PLACE NAME & LOCATION	BUSINESS PURPOSE	AMOUNT

PURPOSE OF TRIP

SUMMARY

TOTAL EXPENSES	
LESS CASH ADVANCE	
LESS COMPANY CHARGES	
AMOUNT DUE EMPLOYEE	
AMOUNT DUE COMPANY	370 66

Stanley Johnson 9-15-04 PREPARED BY DATE

Dean F. Larsen 9-16-04 APPROVED BY DATE

UTAH-IDAHO TEAMSTERS SECURITY FUND
P.O BOX 30749 (801) 972 1177
SALT LAKE CITY, UTAH 84 30

8/83

No 768

usbank.
24-Hour Banking
1-800-673-8555
97-815/1243

PAY Three Thousand Seventy Dollars and 66/100 * * * * *

DATE 9-16-04

AMOUNT $ 370 66

TO THE ORDER OF Stanley Johnson

NOT NEGOTIABLE

⑈0007687⑈ ⑆124302150⑆ 153100480398⑈

SP 001 CARBONLESS IC SECU ITY PRINTERS, INC

PAYEE DETACH THIS STATEMENT BEFORE DEPOSITING CHECK

UTAH-IDAHO TEAMSTERS SECURITY FUND S L.C., Utah 84130

DATE	INVOICE NO	DESCRIPTION	AMOUNT	DISCOUNT OR DEDUCTION	NET AMOUNT
		Trustee travel reimbursement for meeting held 9/16/04 in Salt Lake City	370.66		

Expense Report

Utah - Idaho Teamsters Trust

NAME Stanley Johnson

PERIOD ENDING

									Totals
Miles Driven		361	x2 =	722					
Reimbursement	$0 375								270 75
Parking And Tolls									
Auto Rental									
Taxi / Limo									
Other (Rail Or Bus)									
Airfare									
TRANSPORTATION TOTAL									
Lodging		12-10-04	1 Night	77.00					77 00
Breakfast									
Lunch									
Dinner									
SUB-TOTAL MEALS									
LODGING & MEALS SUBTOTAL									
Supplies / Equipment									
Phone Fax									
ENTERTAINMENT									
TOTAL PER DAY									

DETAILED ENTERTAINMENT RECORD

DATE	ITEM	PERSONS ENTERTAINED BUSINESS RELATIONSHIP	PLACE NAME & LOCATION		BUSINESS PURPOSE	AMOUNT

PURPOSE OF TRIP

SUMMARY

TOTAL EXPENSES	347 75
LESS CASH ADVANCE	
LESS COMPANY CHARGES	
AMOUNT DUE EMPLOYEE	
AMOUNT DUE COMPANY	347 75

Stanley Johnson 12-12-04
PREPARED BY DATE

Dean F. Corbett 12-17-04
APPROVED BY DATE

UTAH-IDAHO TEAMSTERS SECURITY FUND
P.O. BOX 30749 (801) 972-1177
SALT LAKE CITY UTAH 84130

3/83

NO 7765

US bank.
24-Hour Banking
1-800-673-3555
87-215/1243

PAY Three Hundred Forty Seven Dollars and 75/100 * * * *

DATE 12-17-04

AMOUNT $ 347 75

TO THE ORDER OF Stanley Johnson

NOT NEGOTIABLE

⑈0007765⑈ ⑆124302150⑆ 153100480398⑈

SP 880 CARBON SS IC URI PRINTERS, INC

PAYEE DETACH THIS STATEMENT BEFORE DEPOSITING CHECK

UTAH-IDAHO TEAMSTERS SECURITY FUND S.L.C., Utah 84130

DATE	INVOICE NO	DESCRIPTION	AMOUNT	DISCOUNT OR DEDUCTION	NET AMOUNT
		Trustee travel reimbbrsement for meeting held December 16-17, 2004 in Salt Lake Cffy	347.75		