

# FORM LM-3 LABOR ORGANIZATION ANNUAL REPORT

**FOR USE BY LABOR ORGANIZATIONS WITH LESS THAN \$250,000 IN TOTAL ANNUAL RECEIPTS**

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.

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

|                                       |                               |  |   |
|---------------------------------------|-------------------------------|--|---|
| For Official Use Only<br><br><b>E</b> | 1. FILE NUMBER<br><br>544-423 | 2. PERIOD COVERED<br>MON DAY YEAR<br><br>From 01/01/2010<br><br>Through 12/31/2010 | 3. (a) AMENDED – If this is an amended report correcting a previously filed report, check here: <input type="checkbox"/><br><br>(b) TERMINAL – If your organization ceased to exist and this is its terminal report, see section XII of the instructions and check here: <input type="checkbox"/><br><br>(c) SUBSIDIARY – If this is a report for a subsidiary organization of your union as defined in section X of the instructions, check here: <input type="checkbox"/> |
|---------------------------------------|-------------------------------|--|---|

|   |  |  |                                |
|---|--|--|--------------------------------|
| 4. AFFILIATION OR ORGANIZATION NAME<br>LABORERS   |  | 8. MAILING ADDRESS (Type or print in capital letters)        |                                |
| 5. DESIGNATION (Local, Lodge, etc.)<br>DISTRICT COUNCIL   |  | 6. DESIGNATION NUMBER  | 8. MAILING ADDRESS (continued) |
| 7. UNIT NAME (if any)<br>NATIONAL GUARD   |  | First Name<br>BIENVENIDO                                     |                                |
| 9. Are your organization's records kept at its mailing address? (If "No," provide address in Item 56.)<br><br>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |  | Last Name<br>BANCHS  |                                |
|   |  | P.O. Box – Building and Room Number (if any)<br>P O BOX 1794 |                                |
|   |  | Number and Street  |                                |
|   |  | City<br>ABITA SPRINGS  |                                |
|   |  | State<br>LA  | ZIP Code + 4<br>70420          |

56. ADDITIONAL INFORMATION

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Each of the undersigned, duly authorized officers of the above labor organization, declares, under penalty of perjury and other applicable penalties of 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 Section VI on penalties in the instructions.)

|   |                                     |   |                                     |
|---|-------------------------------------|---|-------------------------------------|
| 57. SIGNED: <u>ORIGINAL LOCATED @ DOL.GOV</u> | PRESIDENT                           | 58. SIGNED: <u>ORIGINAL LOCATED @ DOL.GOV</u> | TREASURER                           |
|   | (If other title, see instructions.) |   | (If other title, see instructions.) |
| _____   |                                     | _____   |                                     |
| Date  | Telephone Number                    | Date  | Telephone Number                    |

**COMPLETE ITEMS 10 THROUGH 23**

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10. During the reporting period did the labor organization have a 'subsidiary organization' as defined in section X of the instructions?

Yes  No

11. During the reporting period did the labor organization create or participate in the administration of a trust or other fund or organization, as defined in the instructions, which provides benefits for members or their beneficiaries?

Yes  No

12. During the reporting period did the labor organization have a political action committee (PAC) fund?

Yes  No

13. During the reporting period did the labor organization acquire or dispose of any assets in any manner other than by purchase or sale?

Yes  No

14. During the reporting period did the labor organization have an audit or review of its books and records by an outside accountant or by a parent body auditor/representative?

Yes  No

15. During the reporting period did the labor organization discover any loss or shortage of funds or other assets? (Answer "Yes" even if there has been repayment or recovery.)

Yes  No

16. During the reporting period did the labor organization have any officer who was paid \$10,000 or more by your organization and also received \$10,000 or more as an officer or employee of another labor organization or of an employee benefit plan?

Yes  No

17. During the reporting period did the labor organization pay any employee salary, allowances, and other expenses which, together with any payments from affiliates, totaled more than \$10,000?

Yes  No

18. During the reporting period did the labor organization have loans totaling more than \$250 to any officer, employee, or member, or make any loans to a business enterprise?

Yes  No

19. How many members did your organization have at the end of the reporting period?

1,018

20. What is the maximum amount recoverable under your organization's fidelity bond, for a loss caused by any officer or employee of your organization?

\$80,000

21. During the reporting period did the labor organization have any changes in its constitution and bylaws, other than the rates of dues and fees, or in practices/procedures listed in the instructions? (If the constitution and bylaws or practices/procedures have changed, see the instructions.)

Yes  No

22. What is the date of your organization's next regular election of officers?

05/2013

23. What are your organization's rates of dues and fees? (Enter a minimum and maximum if more than one rate applies for any line.)

| Rates of Dues and Fees |                  |           |         |         |
|------------------------|------------------|-----------|---------|---------|
| Dues/Fees              | Amount           | Unit      | Minimum | Maximum |
| (a) Regular Dues/Fees  | \$8.71 - \$13.80 | per MONTH | \$8.71  | \$13.80 |
| (b) Initiation Fees    | NA               | per       |         |         |
| (c) Transfer Fees      | NA               | per       |         |         |
| (d) Work Permits       | NA               | per       |         |         |

If the answer to any of the above questions is "Yes", provide details in Item 56 (Additional Information) as explained in the instructions for each item.

**24. ALL OFFICERS AND DISBURSEMENTS TO OFFICERS**

Enter Amounts in Dollars Only – Do Not Enter Cents

FILE NUMBER:

544-423

| (A) Name (List all persons who held office during the reporting period even if they received no salary or other disbursements. Use all capital letters.) |                                       |                       | (C) Status *   | Gross Salary (before taxes and other deductions) (D)   | Allowances and Other Disbursements (E) | Total (F) |
|--|---------------------------------------|-----------------------|----------------|--|--|-----------|
| (B) Title (Enter title of officer, such as PRESIDENT or TREASURER.)  |                                       |                       |                |  |  |           |
| 1.   | Last Name<br>COWLEY                   | First Name<br>JADE    | Middle Initial | \$0  | \$0                                    | \$0       |
|  | Title<br>PRESIDENT                    |                       | Status<br>N    |  |  |           |
| 2.   | Last Name<br>RICE                     | First Name<br>CHARLES | Middle Initial | \$0  | \$0                                    | \$0       |
|  | Title<br>VICE PRESIDENT               |                       | Status<br>N    |  |  |           |
| 3.   | Last Name<br>BROWDER                  | First Name<br>TOMMY   | Middle Initial | \$0  | \$0                                    | \$0       |
|  | Title<br>SGT-AT-ARMS                  |                       | Status<br>N    |  |  |           |
| 4.   | Last Name<br>BANCHS                   | First Name<br>BEN     | Middle Initial | \$2,693  | \$0                                    | \$2,693   |
|  | Title<br>BUSINESS MANAGER/SEC TRES    |                       | Status<br>N    |  |  |           |
| 5.   | Last Name<br>SHINTAKU                 | First Name<br>BRENT   | Middle Initial | \$0  | \$0                                    | \$0       |
|  | Title<br>AUDITORS                     |                       | Status<br>N    |  |  |           |
| 6.   | Last Name<br>GRASZLER                 | First Name<br>STEVE   | Middle Initial | \$0  | \$0                                    | \$0       |
|  | Title<br>AUDITORS                     |                       | Status<br>N    |  |  |           |
| 7.   | Last Name<br>RAGELS                   | First Name<br>SKIP    | Middle Initial | \$0  | \$0                                    | \$0       |
|  | Title<br>AUDITORS                     |                       | Status<br>N    |  |  |           |
| 8.   | Totals from additional pages (if any) |                       |                | \$0  | \$0                                    | \$0       |
| 9.   | Totals of Lines 1 through 8           |                       |                | \$2,693  | \$0                                    | \$2,693   |
|  |                                       |                       |                | 10. Less Deductions  |  | \$500     |
| The Total from Line 11 will be entered in Item 45  |                                       |                       |                | 11. Net Disbursements  |  | \$2,193   |
| * Code for (C) Status: past officer – P; continuing officer – C; new officer during the reporting period – N.  |                                       |                       |                | (If any officer was not elected at a regular election in accordance with your organization's constitution and bylaws, explain in Item 56 on page 1.) |  |           |

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| STATEMENT A<br>ASSETS AND LIABILITIES | ASSETS                       |                               | LIABILITIES                              |                        |                               |                             |
|---------------------------------------|------------------------------|-------------------------------|--|------------------------|-------------------------------|-----------------------------|
|                                       | Item                         | Start of Reporting Period (A) | End of Reporting Period (B)              | Item                   | Start of Reporting Period (C) | End of Reporting Period (D) |
|                                       | 25. Cash                     | \$0                           | \$37,007                                 | 32. Accounts Payable   | \$0                           | \$0                         |
|                                       | 26. Loans Receivable         | \$0                           | \$0                                      | 33. Loans Payable      | \$0                           | \$0                         |
|                                       | 27. U.S. Treasury Securities | \$0                           | \$0                                      | 34. Mortgages Payable  | \$0                           | \$0                         |
|                                       | 28. Investments              | \$0                           | \$0                                      | 35. Other Liabilities  | \$0                           | \$0                         |
|                                       | 29. Fixed Assets             | \$0                           | \$0                                      | 36. TOTAL LIABILITITES | \$0                           | \$0                         |
|                                       | 30. Other Assets             | \$0                           | \$0                                      |                        |                               |                             |
| 31. TOTAL ASSETS                      | \$0                          | \$37,007                      | 37. NET ASSETS<br>(Item 31 less Item 36) | \$0                    | \$37,007                      |                             |

| STATEMENT B<br>RECEIPTS AND DISBURSEMENTS  | CASH RECEIPTS                               |  | CASH DISBURSEMENTS                  |         |
|--|---|--|-------------------------------------|---------|
|  | Item  | AMOUNT                                     | Item                                | AMOUNT  |
|  | 38. Dues                                    | \$40,000                                   | 45. To Officers (from Item 24)      | \$2,193 |
|  | 39. Per Capita Tax                          | \$0  | 46. To Employees (less deductions)  | \$0     |
|  | 40. Fees, Fines, Assessments & Work Permits | \$0  | 47. Per Capita Tax                  | \$0     |
|  | 41. Interest & Dividends                    | \$0  | 48. Office & Administrative Expense | \$300   |
|  | 42. Sale of Investments & Fixed Assets      | \$0  | 49. Professional Fees               | \$0     |
|  | 43. Other Receipts                          | \$0  | 50. Benefits                        | \$0     |
|  | 44. TOTAL RECEIPTS                          | \$40,000                                   | 51. Contributions, Gifts & Grants   | \$0     |
| If total receipts reported in Item 44 are \$250,000 or more, your organization must file Form LM-2 instead of this form. |   | 52. Purchase of Investments & Fixed Assets | \$0                                 |         |
|  |   | 53. Loans Made                             | \$0                                 |         |
|  |   | 54. Other Disbursements                    | \$0                                 |         |
|  |   | 55. TOTAL DISBURSEMENTS                    | \$2,493                             |         |

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| (A) Name<br>(List all persons who held office during the reporting period even if they received no salary or other disbursements. Use all capital letters.) |                             |                      | (C) Status *   | Gross Salary (before taxes and other deductions)<br>(D) | Allowances and Other Disbursements<br>(E) | Total<br>(F) |
|---|-----------------------------|----------------------|----------------|---|---|--------------|
| (B) Title<br>(Enter title of officer, such as PRESIDENT or TREASURER.)  |                             |                      |                |   |   |              |
| 1.  | Last Name<br>HYMEL          | First Name<br>MARK   | Middle Initial | \$0   | \$0                                       | \$0          |
|   | Title<br>EXECUTIVE BOARD    |                      | Status<br>N    |   |   |              |
| 2.  | Last Name<br>JACKSON        | First Name<br>KEN    | Middle Initial | \$0   | \$0                                       | \$0          |
|   | Title<br>EXECUTIVE BOARD    |                      | Status<br>N    |   |   |              |
| 3.  | Last Name<br>BRASSEUR       | First Name<br>JUSTIN | Middle Initial | \$0   | \$0                                       | \$0          |
|   | Title<br>EXECUTIVE BOARD    |                      | Status<br>N    |   |   |              |
| 4.  | Last Name                   | First Name           | Middle Initial |   |   | \$0          |
|   | Title                       |                      | Status         |   |   |              |
| 5.  | Last Name                   | First Name           | Middle Initial |   |   | \$0          |
|   | Title                       |                      | Status         |   |   |              |
| 6.  | Last Name                   | First Name           | Middle Initial |   |   | \$0          |
|   | Title                       |                      | Status         |   |   |              |
| 7.  | Last Name                   | First Name           | Middle Initial |   |   | \$0          |
|   | Title                       |                      | Status         |   |   |              |
| 8.  |                             |                      |                |   |   |              |
| 9.  | Totals of Lines 1 through 8 |                      |                | \$0   | \$0                                       | \$0          |

\* Code for (C) Status: past officer – P; continuing officer – C; new officer during the reporting period – N.

(If any officer was not elected at a regular election in accordance with your organization's constitution and bylaws, explain in Item 56 on page 1.)

**56. ADDITIONAL INFORMATION**

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