

Part D.. REMARKS

Part E. IDENTIFICATION AND SIGNATURE

To the best of my knowledge and belief, the information contained in this report is true and complete. It is further certified that to the extent any data in Schedule I, Items 1 or 2, are based on self-identification by individuals, this information was gathered only after they were advised of its confidential nature and purposes.

1. Type or print name, title, address and telephone number for union business of designated representative

Name _____
 Title _____
 Work address _____
 Telephone number (including area code) _____

2. Signature of designated representative

3. Date

"Whoever, in any matter within the jurisdiction of any department or agency of the United States knowingly and willfully falsifies, conceals, or covers up by any trick, scheme, or device a material fact, or makes any false, fictitious or fraudulent statements or representations, or makes or uses any false writing or document knowing the same to contain any false, fictitious or fraudulent statement or entry, shall be fined not more than \$10,000 or imprisoned not more than 5 years, or both." Title 18, Section 1001, United States Code.

SCHEDULE I—LOCAL UNION REPORT (EEO—3)

MEMBERSHIP, APPLICANT and REFERRAL INFORMATION

1. Method of identification

How was information as to race/ethnic identification and sex in Item 2 below obtained?

This information may be obtained by visual survey, from records made after employment, from personal knowledge or by self-identification. The self-identification method may be used subject to the conditions set forth in the instructions. No State law prohibiting the self-identification method applies, since the Equal Employment Opportunity Commission's regulations supersede such laws.

Check all applicable boxes

a. Existing Record	
b. Visual Survey	
c. Tally from Personal Knowledge	
d. Self-Identification	
e. Other (Specify)	

2. Statistics

	TOTAL (COLUMNS 3-K) A	MALE					FEMALE				
		NON-HISPANIC ORIGIN		HISPANIC D	ASIAN OR PACIFIC ISLANDER E	AMERICAN INDIAN OR ALASKAN NATIVE F	NON-HISPANIC ORIGIN		HISPANIC I	ASIAN OR PACIFIC ISLANDER J	AMERICAN INDIAN OR ALASKAN NATIVE K
		WHITE B	BLACK C				WHITE G	BLACK H			
a. MEMBERSHIP IN REFERRAL UNIT											
(1) MEMBERS											
(2) APPLICANTS FOR MEMBERSHIP DURING THE PAST YEAR											
b. REFERRALS DURING 2-MONTH PERIOD											
(1) NUMBER OF PERSONS REFERRED											
(2) NUMBER OF REFERRALS											
(3) APPLICANTS FOR REFERRAL											

3. Period Used For Referral Date

You should obtain the figures reported in Item 2 "Statistics" using any 2-month period between August 1 and November 30.

Dates of 2-month Period _____