

FORM LM-3 LABOR ORGANIZATION ANNUAL REPORT

FOR USE ONLY 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 RECEIVED AUG 24 2015 OLM-3-2015	1. FILE NUMBER	2. PERIOD COVERED	3. (a) AMENDED - If this is an amended report correcting a previously filed report, check here: <input type="checkbox"/> (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"/>
	543-686	MO DAY YEAR From 01/01/2014 Through 12/31/2014	

4. AFFILIATION OR ORGANIZATION NAME COMMITTEE FOR FAIR AND EQUAL	6. DESIGNATION NUMBER	8. MAILING ADDRESS (Type or print in capital letters)
		First Name CRYSTAL Last Name COBEN P.O. Box - Building and Room Number (if any)

7. UNIT NAME (if any) REPRESENTATION	Number and Street 450 PRAIRIE AVE STE:106
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9. Are your organization's records kept at its mailing address? (If "No," provide address in Item 56.)	City CALUMET CITY	State IL	ZIP Code + 4 60409-2125
Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			

56. ADDITIONAL INFORMATION (Text entered will appear on last page of form. To enter comments, press the "General Additional Information" button.)

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:	PRESIDENT	58. SIGNED:	TREASURER
[Signature] Date 8-15-2015 Telephone Number 773-5628714	(if other title, see instructions.)	[Signature] Date 8/15/2015 Telephone Number 773-501-6227	(if other title, see instructions.)

During the Reporting Period Did Your Organization:

- 10. Have a 'subsidiary organization' as defined in Section X of the instructions? Yes No
- 11. 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. Have a political action committee (PAC) fund? Yes No
- 13. Acquire or dispose of any goods or property in any manner other than by purchase or sale? Yes No
- 14. Have an audit or review of its books and records by an outside accountant or by a parent body auditor/representative? Yes No
- 15. Discover any loss or shortage of funds or other property? (Answer "Yes" even if there has been repayment or recovery.) Yes No
- 16. 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. Pay any employee salary, allowances, and other expenses which, together with any payments from affiliates, totaled more than \$10,000? Yes No
- 18. 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 the labor organization have at the end of the reporting period? 482

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? \$50,000

21. During the reporting period, did your organization have any changes in its constitution and bylaws (other than 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 the labor organization's next regular election of officers? 12/2016

23. What are the labor 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	52.43	per 2.5hours	49.94	55.12
(b) Initiation Fees	50	per Member	50	50
(c) Transfer Fees		per		
(d) Work Permits		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: 543-686

(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.)		(B) Name	(Enter title of officer, such as PRESIDENT or TREASURER)	(C) Status *	Gross Salary (before taxes and other deductions)	(D)	Allowances and Other Disbursements	(E)	TOTAL	(F)
7.	Last Name	First Name	Initial	Moss	WT	Status	\$12,907				\$12,907	
	Title		Status									
	Chief Steward		C									
8.	Last Name	First Name	Initial	Upshaw	Carrie	Status	\$37,772				\$37,772	
	Title		Status									
	President		N									
9.	Last Name	First Name	Initial	Crystal	Coben	Status	\$17,829				\$17,829	
	Title		Status									
	Treasurer		N									
10.	Last Name	First Name	Initial	Davis	Will	Status	\$14,528				\$14,528	
	Title		Status									
	Vice-President		N									
11.	Last Name	First Name	Initial	Boone	Shawn	Status	\$867				\$867	
	Title		Status									
	Union Steward		P									
12.	Last Name	First Name	Initial			Status						
	Title		Status									
	Total						\$122,017				\$122,017	
								Less Deductions	\$0		\$0	
								Net Disbursements			\$122,017	

The Total from Net Disbursements will be entered in Item 45

* Code for (C) Status: past officer - P; continuing officer - C; new officer during the reporting period - N (If the 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 ASSETS AND LIABILITIES							
Item	ASSETS	Start of Reporting Period (A)	End of Reporting Period (B)	Item	LIABILITIES	Start of Reporting Period (C)	End of Reporting Period (D)
25. Cash		\$8,608	\$-10,114	32. Accounts Payable		\$0	\$13,455
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 LIABILITIES		\$0	\$13,455
30. Other Assets		\$15,385	\$11,190	37. NET ASSETS (Item 31 Less Item 36)		\$23,993	-\$12,379
31. TOTAL ASSETS		\$23,993	\$1,076				

STATEMENT B RECEIPT AND DISBURSEMENTS					
Item	CASH RECEIPTS	AMOUNT	Item	CASH DISBURSEMENTS	AMOUNT
38. Dues		\$212,444	45. To Officers (from Item 24)		\$122,017
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		\$0
42. Sale of Investments & Fixed Assets		\$0	49. Professional Fees		\$33,595
43. Other Receipts		\$0	50. Benefits		\$0
44. TOTAL RECEIPTS		\$212,444	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		\$75,554
			55. TOTAL DISBURSEMENTS		\$231,166

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1.	Last Name	First Name	Initial	JENNINGS			\$6,614		\$6,614
	Title		Status	ANTHONY					
	SECRETARY		N						
2.	Last Name	First Name	Initial	Holland			\$9,904		\$9,904
	Title	Donald	Status						
	President		P						
3.	Last Name	First Name	Initial	Ragucci			\$0		\$0
	Title	Nicholas	Status						
	Vice President		P						
4.	Last Name	First Name	Initial	Fleck			\$13,867		\$13,867
	Title	Christopher	Status						
	IN Vice President		C						
5.	Last Name	First Name	Initial	Gilbert			\$6,429		\$6,429
	Title	Reginald	Status						
	Recording Secretary		P						
6.	Last Name	First Name	Initial	Desmond			\$1,300		\$1,300
	Title	Michael	Status						
	Treasurer		P						

56. ADDITIONAL INFORMATION SUMMARY

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