U.S. Department of Labor
Employment Standards Administration
Office of Labor-Management Standards
Washington, DC 20210

FORM LM-2 LABOR ORGANIZATION ANNUAL REPORT

MUST BE USED BY LABOR ORGANIZATIONS WITH $200,000 OR MORE IN TOTAL ANNUAL RECEIPTS AND LABOR ORGANIZATIONS IN TRUSTEESHIP

Form Approved
Office of Management and Budget
No. 1215-0188
Expires: 11-30-2002

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

USDOL/ESA Received JUN 26 '00

1. FILE NUMBER: 043-598

2. PERIOD COVERED

	MO	DAY	YEAR
From	04	01	1999
Through	03	31	2000

3. (a) AMENDED — If this is an amended report correcting a previously filed report, check here: ☐
(b) TERMINAL — If your organization ceased to exist and this is its terminal report, see Section XII of the instructions and check here: ☐
(c) SUBSIDIARY — If this is a report for a subsidiary organization of your union as defined in Section X of the instructions, check here: ☐

IMPORTANT

Peel off the address label from the back of the package and place it here.

If the label information is correct, leave Items 4 through 8 blank.

If any of the label information is incorrect, complete Items 4 through 8.

Seattle Professional Engineering

4. AFFILIATION OR ORGANIZATION NAME: Employees Association

5. DESIGNATION *(Local, Lodge, etc.)*:

6. DESIGNATION NUMBER:

7. UNIT NAME *(if any)*:

9. Are your organization's records kept at its mailing address? *(If "No," provide address in Item 75.)* Yes X No ☐

8. MAILING ADDRESS *(Type or print in capital letters.)*

First Name: Craig

Last Name: Buckham

P.O. Box • Building and Room Number *(if any)*:

Number and Street: 15205 52nd Ave S

City: Seattle

State: WA ZIP Code + 4: 98188 –

75. ADDITIONAL INFORMATION *(If more space is needed, attach additional pages properly identified.)*

Item Number	
10	See attached schedule
14	See attached schedule

Each of the undersigned, duly authorized officers of the above labor organization, declares, under the 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.)*

76. SIGNED: C A Buckham — PRESIDENT *(If other title, see instructions.)*
6/22/2000 — Date
(206) 433-0991 — Telephone Number

77. SIGNED: Richard L. Taylor — TREASURER *(If other title, see instructions.)*
6/22/00 — Date
(206) 433-0991 — Telephone Number

During the Reporting Period Did Your Organization:

	Yes	No
10. Have a "subsidiary organization" as defined in Section X of the instructions?	X	
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?		X
12. Have a political action committee (PAC) fund?		X
13. Acquire or dispose of any goods or property in any manner other than by purchase or sale?		X
14. Have an audit or review of its books and records by an outside accountant or by a parent body auditor/representative?	X	
15. Discover any loss or shortage of funds or other property? *(Answer "Yes" even if there has been repayment or recovery.)*		X
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?		X
17. Liquidate or reduce any liabilities without disbursement of cash?		X

(If the answer to any of the above questions is "Yes," provide details in Item 75 on page 1 as explained in the instructions for each item.)

18. How many members did your organization have at the end of the reporting period? 13,376

19. What is the date of your organization's next regular election of officers? MO 04 YEAR 2001

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? $ 200000

21. 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
(a) Regular Dues/Fees	$ 22.81 per month *(Month, Year, etc.)*
(b) Initiation Fees	$
(c) Transfer Fees	$
(d) Work Permits	$ per *(Month, Year, etc.)*

	Yes	No
22. 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 have changed, attach two new dated copies. If practices/procedures have changed, see the instructions.)*		X
23. Were any of your organization's assets pledged as security or encumbered in any other way at the end of the reporting period?		X
24. Did your organization have any contingent liabilities at the end of the reporting period?		X

(If the answer to Item 23 or 24 is "Yes," provide details in Item 75 on page 1.)

STATEMENT A — ASSETS AND LIABILITIES

FILE NUMBER: 043 — 598

Complete Schedules 1 Through 15 Before Completing Statement A

Enter Amounts in Dollars Only — Do Not Enter Cents

	ASSETS Item	From SCH #	Start of Reporting Period (A)	End of Reporting Period (B)
ASSETS	25. Cash		454108	505803
	26. Accounts Receivable			21035
	27. Loans Receivable	1		
	28. U.S. Treasury Securities		382264	349786
	29. Investments	2	1328779	1002045
	30. Fixed Assets	5	408370	491865
	31. Other Assets	3	157644	172059
	32. TOTAL ASSETS		2731165	2542593

	LIABILITIES Item	From SCH #	Start of Reporting Period (C)	End of Reporting Period (D)
LIABILITIES	33. Accounts Payable		73729	337988
	34. Loans Payable	8		
	35. Mortgages Payable			
	36. Other Liabilities	4	109651	119638
	37. TOTAL LIABILITIES		183380	457626
	38. NET ASSETS *(Item 32 less Item 37)*		2547785	2084967

STATEMENT B — RECEIPTS AND DISBURSEMENTS

FILE NUMBER: 0 4 3 — 5 9 8

Complete Schedules 1 Through 15 Before Completing Statement B

Enter Amounts in Dollars Only — Do Not Enter Cents

CASH RECEIPTS Item	From SCH #	AMOUNT	CASH DISBURSEMENTS Item	From SCH #	AMOUNT
39. Dues		2 7 9 2 9 3 1	56. To Officers	9	1 0 2 0 4
40. Per Capita Tax			57. To Employees	10	1 7 7 2 2 6 3
41. Fees			58. Per Capita Tax		
42. Fines			59. Fees, Fines, Assessments, etc.		
43. Assessments			60. Office & Administrative Expense	13	1 6 5 0 5 9
44. Work Permits			61. Educational & Publicity Expense		3 0 9 5 2
45. Sale of Supplies			62. Professional Fees		5 0 9 7 4
46. Interest		2 1 5 3 3	63. Benefits	11	3 8 0 2 8 3
47. Dividends		4 2 0 7 9	64. Contributions, Gifts & Grants	12	
48. Rents			65. Supplies for Resale		
49. Sale of Investments & Fixed Assets	6	1 1 5 3 9 4 1	66. Direct Taxes		1 4 7 4 2 2
50. Loans Obtained	8		67. Withholding Taxes		
51. Repayments of Loans Made	1		68. Purchase of Investments & Fixed Assets	7	8 2 4 2 2 6
52. On Behalf of Affiliates for Transmittal to Them			69. Loans Made	1	
53. From Members for Disbursement on Their Behalf			70. Repayment of Loans Obtained	8	
54. Other Receipts	14	6 8 8 8 3 8	71. To Affiliates of Funds Collected on Their Behalf		
			72. On Behalf of Individual Members		
			73. Other Disbursements	15	1 2 6 6 2 4 4
55. TOTAL RECEIPTS		4 6 9 9 3 2 2	74. TOTAL DISBURSEMENTS		4 6 4 7 6 2 7

If more space is needed to complete Schedules 1 through 8 or 11 through 15, continue on additional pages, using the same column headings used on the schedule, and enter the totals on the line provided for additional pages in each schedule. For Schedules 9 and 10, use the continuation pages provided.

FILE NUMBER: 0 4 3 – 5 9 8

Enter Amounts in Dollars Only — Do Not Enter Cents

SCHEDULE 1 — LOANS RECEIVABLE

List below loans to officers, employees, or members which at any time during the reporting period exceeded $250 and list all loans to business enterprises regardless of amount. (A)	Loans Outstanding at Start of Period (B)	Loans Made During Period (C)	Repayments Received During Period		Loans Outstanding at End of Period (E)
			Cash (D)(1)	Other Than Cash (D)(2)	
1. Name: Purpose: Security: Terms of Repayment:					
2. Name: Purpose: Security: Terms of Repayment:					
3. Name: Purpose: Security: Terms of Repayment:					
4. Totals from additional pages *(if any)*					
5. Totals of loans not listed above					
6. Totals of Lines 1 through 5					
Enter the Totals from Line 6 in	Item 27 Column (A)	Item 69	Item 51	Item 75 with Explanation	Item 27 Column (B)

FILE NUMBER: 043-598

SCHEDULE 2 — INVESTMENTS
(OTHER THAN U.S. TREASURY SECURITIES)

Description (A)	Amount (B)
Marketable Securities	
1. Total Cost	987,100
2. Total Book Value	1,002,045
3. List each marketable security which has a book value over $1,000 and exceeds 20% of Line 2.	
(a)	
(b)	
(c)	
(d)	
Other Investments	
4. Total Cost	
5. Total Book Value	
6. List each other investment which has a book value over $1,000 and exceeds 20% of Line 5. Also list each subsidiary for which separate reports are attached.	
(a)	
(b)	
(c)	
(d)	
(e) Total from additional pages *(if any)*	
7. Total of Lines 2 and 5	1002045

Enter the Total from Line 7 in ..... Item 29, Column (B)

SCHEDULE 3 — OTHER ASSETS

Description (A)	Book Value (B)
1. Prepaid expense	32,059
2. Investment in subsidiary	140,000
3.	
4.	
5.	
6. Total from additional pages *(if any)*	
7. Total of Lines 1 through 6	172059

Enter the Total from Line 7 in ..... Item 31, Column (B)

SCHEDULE 4 — OTHER LIABILITIES

Description (A)	Amount at End of Period (B)
1. Severence & Comp. Time	119,638
2.	
3.	
4.	
5.	
6. Total from additional pages *(if any)*	
7. Total of Lines 1 through 6	119638

Enter the Total from Line 7 in ..... Item 36, Column (D)

SCHEDULE 5 — FIXED ASSETS

FILE NUMBER: 0 4 3 - 5 9 8

Description (A)	Cost or Other Basis (B)	Total Depreciation or Amount Expensed (C)	Book Value (D)	Fair Market Value (E)
1. Land (*give location*):	74,200		74,200	370,000
2. Totals from additional pages *(if any)*				
3. Buildings (*give location*):	747,196	498,010	249,186	670,000
4. Totals from additional pages *(if any)*				
5. Automobiles and Other Vehicles				
6. Office Furniture and Equipment	653,879	485,400	168,479	168,479
7. Other Fixed Assets				
8. Totals of Lines 1 through 7	1,475,275	983,410	4 9 1 8 6 5	1,208,479

Enter the Total from Line 8, Column (D) in ..... Item 30, Column (B)

SCHEDULE 6 — SALE OF INVESTMENTS AND FIXED ASSETS

Description *(if land or buildings, give location)* (A)	Cost (B)	Book Value (C)	Gross Sales Price (D)	Amount Received (E)
1. Marketable Securities	962,664	962,664	1,153,941	1,153,941
2.				
3.				
4.				
5. Totals from additional pages *(if any)*				
6. Totals of Lines 1 through 5				
		7. Less Reinvestments		
		8. Net Sales	1 1 5 3 9 4 1	

Enter the Total from Line 8 in ..... Item 49

SCHEDULE 7 — PURCHASE OF INVESTMENTS AND FIXED ASSETS

FILE NUMBER: 0 4 3 — 5 9 8

Description *(if land or buildings, give location)* (A)	Cost (B)	Book Value (C)	Cash Paid (D)
1. Marketable Securities	660,216	660,216	660,216
2. Equipment	164,010	164,010	164,010
3.			
4.			
5. Totals from additional pages *(if any)*			
6. Totals of Lines 1 through 5			
	7. Less Reinvestments		
	8. Net Purchases		8 2 4 2 2 6

Enter the Total from Line 8 in ..... Item 68

SCHEDULE 8 — LOANS PAYABLE

Source of Loans Payable at Any Time During the Reporting Period (A)	Loans Owed at Start of Period (B)	Loans Obtained During Period (C)	Repayment Made During Period		Loans Owed at End of Period (E)
			Cash (D)(1)	Other Than Cash (D)(2)	
1.					
2.					
3.					
4.					
5. Totals from additional pages *(if any)*					
6. Totals of Lines 1 through 5					

Enter the Totals from Line 6 in ..... Item 34 Column (C) ..... Item 50 ..... Item 70 ..... Item 75 with Explanation ..... Item 34 Column (D)

SCHEDULE 9 — ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

FILE NUMBER: 043 — 598

(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) Title *(Enter title of officer, such as PRESIDENT or TREASURER.)*	Status (C)*	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
1. Last Name / First Name / Title	Status					
2. Last Name / First Name / Title	Status					
3. Last Name / First Name / Title	Status					
4. Last Name / First Name / Title	Status					
5. Last Name / First Name / Title	Status					
6. Last Name / First Name / Title	Status					
7. Last Name / First Name / Title	Status					
8. Totals from additional pages *(if any)*		4,000		6,204		10,204
9. Totals of Lines 1 through 8						
				10. Less Deductions		
Enter the Total from Line 11 in ..... Item 56 ⇨				11. Net Disbursements		10204

*Code for Status (C): 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 75 on page 1.)

SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES

FILE NUMBER: 043-598

(A) Name *(List all employees who received more than $10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)* (B) Position *(Enter employee's job title.)* (C) Name of Affiliated Organization *(if applicable)*	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
1. Last Name / First Name Position Name of Affiliated Organization					
2. Last Name / First Name Position Name of Affiliated Organization					
3. Last Name / First Name Position Name of Affiliated Organization					
4. Last Name / First Name Position Name of Affiliated Organization					
5. Last Name / First Name Position Name of Affiliated Organization					
6. Totals from additional pages *(if any)*	1,741,875		30,387		1,772,263
7. Totals for all employees who, during the reporting period, received $10,000 or less in total disbursements from your organization and any affiliates					
8. Totals of Lines 1 through 7					
			9. Less Deductions		
Enter the Total from Line 10 in ..... Item 57 ⇨			10. Net Disbursements		1772263

SCHEDULE 11 — BENEFITS

FILE NUMBER: 0 4 3 — 5 9 8

Description (A)	To Whom Paid (B)	Amount (C)
1.		
2.		
3.		
4.		
5. Total from additional pages *(if any)*		380,283
6. Total of Lines 1 through 5		3 8 0 2 8 3
Enter the Total from Line 6 ..... Item 63		

SCHEDULE 12 — CONTRIBUTIONS, GIFTS & GRANTS

Description (A)	Amount (B)
1.	
2.	
3.	
4.	
5.	
6.	
7. Total from additional pages *(if any)*	
8. Total of Lines 1 through 7	
Enter the Total from Line 8 in ..... Item 64	

SCHEDULE 13 — OFFICE & ADMINISTRATIVE EXPENSE

Description (A)	Amount (B)
1. Stationary	18,445
2. Supplies	39,151
3. Reproduction costs	35,262
4. Postage	60,374
5. Other	11,827
6.	
7. Total from additional pages *(if any)*	
8. Total of Lines 1 through 7	1 6 5 0 5 9
Enter the Total from Line 8 in ..... Item 60	

FILE NUMBER: 0 4 3 — 5 9 8

SCHEDULE 14 — OTHER RECEIPTS

Description (A)	Amount (B)
1. Payroll reimbursements	280,836
2. Strike Fund income	392,653
3. Other	15,349
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	
13.	
14.	
15.	
16. Total from additional pages *(if any)*	
17. Total of Lines 1 through 16	6 8 8 8 3 8
Enter the Total from Line 17 in ..... Item 54	

SCHEDULE 15 — OTHER DISBURSEMENTS

Description (A)	Amount (B)
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	
13.	
14.	
15.	
16. Total from additional pages *(if any)*	1,266,244
17. Total of Lines 1 through 16	1 2 6 6 2 4 4
Enter the Total from Line 17 in ..... Item 73	

ORGANIZATION NAME:

ENDING DATE OF PERIOD COVERED:

FILE NUMBER: 0 4 3 – 5 9 8

PAGE ____ OF ____ ADDITIONAL PAGES

SCHEDULE 9 — ALL OFFICERS AND DISBURSEMENTS TO OFFICERS *(continued)*

(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) Title *(Enter title of officer, such as PRESIDENT or TREASURER.)*	Status (C)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
Last Name / First Name Title	Status					
Last Name / First Name Title	Status					
Last Name / First Name Title	Status					
Last Name / First Name Title	Status					
Last Name / First Name Title	Status					
Last Name / First Name Title	Status					
Last Name / First Name Title	Status					
Last Name / First Name Title	Status					
	Totals	4,000		6,204		10,204

ORGANIZATION NAME:

ENDING DATE OF PERIOD COVERED:

FILE NUMBER: 0 4 3 — 5 9 8

PAGE ____ OF ____ ADDITIONAL PAGES

SCHEDULE 9 — ALL OFFICERS AND DISBURSEMENTS TO OFFICERS *(continued)*

(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) Title *(Enter title of officer, such as PRESIDENT or TREASURER.)*	Status (C)	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
Last Name	First Name	Title	Status					
Last Name	First Name	Title	Status					
Last Name	First Name	Title	Status					
Last Name	First Name	Title	Status					
Last Name	First Name	Title	Status					
Last Name	First Name	Title	Status					
Last Name	First Name	Title	Status					
Last Name	First Name	Title	Status					
			Totals					

ORGANIZATION NAME.

ENDING DATE OF PERIOD COVERED:

FILE NUMBER: 043-598

PAGE ____ OF ____ ADDITIONAL PAGES

SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES *(continued)*

(A) Name *(List all employees who received more than $10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)* (B) Position *(Enter employee's job title.)* (C) Name of Affiliated Organization *(if applicable)*	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
Last Name First Name Position Name of Affiliated Organization					
Last Name First Name Position Name of Affiliated Organization					
Last Name First Name Position Name of Affiliated Organization					
Last Name First Name Position Name of Affiliated Organization					
Last Name First Name Position Name of Affiliated Organization					
Totals	1,741,875		30,387		1,772,263

ORGANIZATION NAME:

ENDING DATE OF PERIOD COVERED:

FILE NUMBER: 0 4 3 – 5 9 8

PAGE ____ OF ____ ADDITIONAL PAGES

SCHEDULE 10 — DISBURSEMENTS TO EMPLOYEES *(continued)*

(A) Name *(List all employees who received more than $10,000 in total disbursements from your organization and any affiliates. Use all capital letters.)* (B) Position *(Enter employee's job title.)* (C) Name of Affiliated Organization *(if applicable)*	Gross Salary (before taxes and other deductions) (D)	Allowances (E)	Disbursements for Official Business (F)	Other Disbursements (G)	Total (H)
Last Name ____ First Name ____ Position Name of Affiliated Organization					
Last Name ____ First Name ____ Position Name of Affiliated Organization					
Last Name ____ First Name ____ Position Name of Affiliated Organization					
Last Name ____ First Name ____ Position Name of Affiliated Organization					
Last Name ____ First Name ____ Position Name of Affiliated Organization					
Totals					

1999-2000
SPEEA – 043-598
LINE 21, FEES & DUES

ARTICLES 12.6 DUES

The monthly dues of each regular member, as defined in Article 2.1.1, shall be identical.

On January 5 of each year, the dues obligation will be established as follows:

> The average rate used to establish the uniform monthly dues obligation is the average hourly rate for all employees in both the Professional and Technical Bargaining Units. The average hourly rate will contain all cost-of-living adjustments pools and lump sum payments which are due the bargaining unit members at the time of computation. The dollar amount of the monthly dues obligation is the sum realized by multiplying the average hourly rate by 0.85, rounded to the nearest cent.

Effective January 2000 the uniform dues obligation will be $22.81 per month per member.

Dues not paid by payroll deduction shall be the responsibility of the member who owes the dues. Such dues are due at the SPEEA office no later than the date of the second paycheck of each month.

(b) Dues of associate and special members:

The dues of Associate and special Members shall be:

a. One-quarter of the annual dues rate of regular members, rounded to the nearest cent, for Associate Members.

b. One twelfth of the annual dues rate of regular members, rounded to the nearest cent, for Special Members.

1999-2000
SPEEA – 043-598
LINE 75, ADDITIONAL INFORMATION

Line 10

The Board of Directors authorized the formation of a new corporation to purchase land and construct a building to be used as SPEEA headquarters. SPEEA occupies the entire building. Its assets are consolidated with those of SPEEA.

Line 14

The financial statements of SPEEA for the year ended March 31, 2000 have been audited by an independent outside auditor – Stanford, Munko & Co., P.L.L.C. – Certified Public Accountants.

1999-2000
SPEEA -0043-598
SCHEDULE 9, LINE 8, DISBURSEMENTS TO OFFICERS:

NAME: (A)	TITLE: (B)	STATUS: (C)	GROSS SALARY (D)	DISBURSEMENTS FOR OFFICIAL BUSINESS (F)	TOTAL (G)
BUCKHAM	PRESIDENT	C	$ 500	$ 202	$ 702
RICE	V.PRESIDENT	N	500	1,624	2,124
ROBINSON	SECRETARY	C	500	1,855	2,355
TAYLOR	TREASURER	C	500	268	768
SORSCHER	BOARD MEMBER	C	500	1,294	1,794
MCLAREN	BOARD MEMBER	N	500	0	500
RITTER	BOARD MEMBER	C	500	289	789
WATERS	COUNCIL CHAIR	C	500	672	1,172
TOTALS TO LINE 8:			$ 4,000	$ 6,204	$ 10,204

1999-2000
SPEEA -0043-598
SCHEDULE 10, LINE 6, DISBURSEMENTS TO EMPLOYEES:

NAME: (A)	TITLE: (B)	GROSS SALARY (D)	DISBURSEMENTS FOR OFFICIAL BUSINESS (F)	TOTAL (G)
BOFFERDING	EXECUTIVE DIR.	$ 146,624	$ 449	$ 147,073
ALBERTS	ADM. ASSISTANT	82,892	1,919	84,811
BERGERON	COMPTROLLER	85,231	1,440	86,671
BERGSMA	RECORDS/RECEPTION	38,318		38,318
BONEBRIGHT	RESEARCH DIRECTOR	69,598	2,523	72,121
FARR	CONTRACT ADMIN.	64,324	1,686	66,010
FLEMING	SECRETARY	13,780		13,780
GREGORY	COMPUTER PROG.	53,672		53,672
HALL	RECORDS	37,601		37,601
HANSON	ED WELLS DIRECTOR	116,380	5	116,385
KING	CONTRACT ADMIN.	45,332	600	45,932
KREMENTZ	PRINT SHOP	83,728	56	83,784
LANDIS	RECEPTIONIST	41,353		41,353
LARSSON	SECRETARY	80,329	3,324	83,653
MILANOVICH	CONTRACT ADMIN.	82,952	1,440	84,392
MURPHY	SECRETARY/RECEPT.	23,626		23,626
MYHRE	TYPESETTER	13,805	106	13,911
NELSON	CONTRACT ADMIN.	60,929	1,031	61,960
PALMER	SECRETARY	64,083	161	64,244
PLUNKETT	CONTRACT ADMIN.	77,072	2,382	79,454
ROGERS	COUNSEL	76,094	10	76,104
ROMMEL	CONTRACT ADMIN.	96,706	2,797	99,503
SCHWISOW	GRAPHIC ARTIST	33,764		33,764
SHEARON	CONTRACT ADMIN.	67,484	1,572	69,056
SINGLETARY	CONTRACT ADMIN.	75,168	7,393	82,561
TUDOR	CONTRACT ADMIN.	68,322	1,493	69,815
WHITFORD	SECRETARY	42,709		42,709
TOTALS TO LINE 10:		$ 1,741,876	$ 30,387	$ 1,772,263
UNDER $10,000		0		0
TOTALS TO LINE 6:		$ 1,741,876	$ 30,387	$ 1,772,263

1999-2000
SPEEA -0043-598
SCHEDULE 11, LINE 5, BENEFITS:

DESCRIPTION (A)	TO WHOM PAID (B)	AMOUNT ©
401 K PROVISION	UNION BANK & TRUST	$ 54,436
MONEY PURCHASE PENSION PROVISION	UNION BANK & TRUST	129,905
HEALTH BENEFITS	PUGET SOUND BENEFITS	71,645
HEALTH BENEFITS	GROUP HEALTH COOPERATIVE	15,858
HEALTH BENEFITS	N.W ADMINISTRATORS	67,312
LIFE INSURANCE	UNUM LIFE INSURANCE CO.	28,408
OTHER	OTHER	12,719
TOTALS TO LINE 5:		$ 380,283

1999-2000
SPEEA -0043-598
SCHEDULE 15, LINE 16, OTHER DISBURSEMENTS:

FEES PAID TO THE BOEING CO. ON BEHALF OF OFFICERS & BOARD MEMBERS:			
BUCKHAM	PRESIDENT		$ 30,754
RICE	V.PRESIDENT		8,166
ROBINSON	SECRETARY		2,348
TAYLOR	TREASURER		264
SORSCHER	BOARD MEMBER		14,177
RITTER	BOARD MEMBER		3,298
WATERS	COUNCIL CHAIR		227
			$ 59,234
ADDITIONAL FEES PAID TO THE BOEING CO.			58,049
			$ 117,283
RENT			26,714
TELEPHONE			42,802
FACILITIES MAINTENANCE			34,905
INSURANCE			17,092
DELIVERY			2,788
FOOD			43,095
MILEAGE			20,628
AUTO			7,515
SURVEYS			28,954
TRAVEL			16,207
ORGANIZATION			43,028
MEMBER SUPPLIES			64,904
NEWSLETTERS			15,451
MEETINGS			24,170
CESO DUES			42,088
NEGOTIATIONS			610,498
STRIKE FUND			380,159
UTILITIES			14,398
			$ 1,552,679
DEDUCT EXPENSE REIMBURSEMENTS INCLUDED:			
SCHEDULE 9, COLUMN F		$ (6,204)	
SCHEDULE 10, COLUMN F		(30,387)	(36,591)
			$ 1,516,088
DEDUCT:			
INCREASE IN OTHER ASSETS (LINE 31)		$ 14,415	
INCREASE IN ACCOUNTS PAYABLE (LINE 33)		(264,259)	(249,844)
TOTALS TO LINE 16:			1,266,244

NOTE: FEES PAID TO THE BOEING CO. REPRESENT A CONTRACTUAL AGREEMENT WITH BOEING THAT SPEEA REIMBURSE BOEING FOR EMPLOYEES THAT ARE ENGAGED IN SPEEA BUSINESS AT THE EMPLOYEE'S CURRENT RATE OF PAY.