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

FORM LM-3 LABOR ORGANIZATION ANNUAL REPORT

FOR USE BY LABOR ORGANIZATIONS WITH LESS THAN $200,000 IN TOTAL ANNUAL RECEIPTS

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

US DOL ESA Rec'd OCT 10 2002 M OLMS DRDA

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1. FILE NUMBER: 036-867

2. PERIOD COVERED

	MO	DAY	YEAR
From	07	01	2001
Through	06	30	2002

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: ☐

JAMES WRIGHT (3) 036-867
CARPENTERS IND 240
LU 319
1202 JAMISON AVE SE
ROANOKE, VA 24013 6/2002

4. AFFILIATION OR ORGANIZATION NAME: CARPENTERS IND

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

6. DESIGNATION NUMBER: 319

7. UNIT NAME *(if any)*:

8. MAILING ADDRESS

First Name: JAMES

Last Name: WRIGHT

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

Number and Street: 1202 JAMISON AVE SE

City: ROANOKE

State: VA

ZIP Code + 4: 24013 – 1909

9. Are your organization's records kept at its mailing address? Yes ☒ No ☐
(If "No," provide address in Item 56.)

02-288-023 *0368967*

56. ADDITIONAL INFORMATION

Item Number	

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.)

57. SIGNED: Christopher L. Montgomery — PRESIDENT *(If other title, see instructions.)*
09/08/02 — Date
540-962-2557 — Telephone Number

58. SIGNED: James E. Wright — TREASURER *(If other title, see instructions.)*
9-30-02 — Date
540 343-2621 — Telephone Number

During the Reporting Period Did Your Organization:

	Yes	No
10. Have a "subsidiary organization" as defined in Section X of the instructions?	☐	☒
11. Create or participate in the adminstration of a trust or other fund or organization, as defined in the instructions, which provides benefits for members or their beneficiaries?	☐	☒
12. Have a political action committee (PAC) fund?	☐	☒
13. Acquire or dispose of any goods or property in any manner other than by purchase or sale?	☐	☒
14. Have an audit or review of its books and records by an outside accountant or by a parent body auditor/representative?	☒	☐
15. Discover any loss or shortage of funds or other property? *(Answer "Yes" even if there has been repayment or recovery.)*	☐	☒
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?	☐	☒
17. Pay any employee salary, allowances, and other expenses which, together with any payments from affiliates, totaled more than $10,000?	☒	☐
18. Have loans totaling more than $250 to any officer, employee, or member, or make any loans to a business enterprise?	☐	☒

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

19. How many members did your organization have at the end of the reporting period? **141**

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? **$ 50000**

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? ☐ Yes ☒ No
(If the constitution and bylaws or practices/ procedures have changed, see the instructions.)

22. What is the date of your organization's next regular election of officers? MO **06** YEAR **2003**

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
(a) Regular Dues/Fees	$ 26.50 / 32.50 per MONTH *(Month, Year, etc.)*
(b) Initiation Fees	$ 300
(c) Transfer Fees	$ 0
(d) Work Permits	$ 26.50 / 32.50 per MONTH *(Month, Year, etc.)*

24. ALL OFFICERS AND DISBURSEMENTS TO OFFICERS

Enter Amounts in Dollars Only - Do Not Enter Cents

FILE NUMBER: 036-867

	(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 and Other Disbursements (E)	Total (F)
1.	MONTGOMERY PRESIDENT	CHRIS C	0	0	0
2.	ALL VICE-PRESIDENT	CHARLES C	0	0	0
3.	WRIGHT TREASURER FIN SEC	JAMES C	0	435	435
4.	JOHNSON RECORDING SECRETARY	GARY C	0	0	0
5.	BIGGS CONDUCTOR	MARK C	0	0	0
6.	TAYLOR WARDEN	JAMES C	0	0	0
7.					
8.	Totals from additional pages *(if any)*				
9.	Totals of Lines 1 through 8		0	435	435
				10. Less Deductions	0
	The Total from Line 11 in .....Item 45			11. Net Disbursements	435

* 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 56 .)

Enter Amounts in Dollars Only - Do Not Enter Cents

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STATEMENT A ASSETS AND LIABILITIES

ASSETS Item	Start of Reporting Period (A)	End of Reporting Period (B)	LIABILITIES Item	Start of Reporting Period (C)	End of Reporting Period (D)
25. Cash	22812	14786	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	910	815
29. Fixed Assets	0	0	36. TOTAL LIABILITIES	910	815
30. Other Assets	0	0			
31. TOTAL ASSETS	22812	14786	37. NET ASSETS *(Item 31 less Item 36)*	21902	13971

STATEMENT B RECEIPTS AND DISBURSEMENTS

CASH RECEIPTS Item	AMOUNT	CASH DISBURSEMENTS Item	AMOUNT
38. Dues	19545	45. To Officers *(from Item 24)*	435
39. Per Capita Tax	0	46. To Employees *(less deductions)*	17542
40. Fees, Fines, Assessments & Work Permits	3849	47. Per Capita Tax	490
41. Interest & Dividends	92	48. Office & Administrative Expense	14386
42. Sale of Investments & Fixed Assets	0	49. Professional Fees	1150
43. Other Receipts	13807	50. Benefits	0
44. TOTAL RECEIPTS	37293	51. Contributions, Gifts & Grants	0
		52. Purchase of Investments & Fixed Assets	0
		53. Loans Made	0
		54. Other Disbursements	11316
		55. TOTAL DISBURSEMENTS	45319

If total receipts reported in Item 44 are $200,000 or more, your organization must file Form LM-2 instead of this form.

ORGANIZATION NAME:
CARPENTERS IND

ENDING DATE OF PERIOD COVERED:
06/30/2002

FILE NUMBER: 0 3 6 - 8 6 7

56. ADDITIONAL INFORMATION *(continued)*

Item Number	
14	REVIEW BY BARBER & GARDNER, PLC, CERTIFIED PUBLIC ACCOUNTANTS

ORGANIZATION NAME:
CARPENTERS IND

FILE NUMBER: 0 3 6 - 8 6 7

ENDING DATE OF PERIOD COVERED:
06/30/2002

56. ADDITIONAL INFORMATION *(continued)*

Item Number	
17	WANDA WRIGHT, SECRETARY AND ASSISTANT, GROSS SALARY $ 24,308