Receipts and Disbursements Report

U.S. Department of Labor

Employment Standards Administration Office of Labor-Management Standards



Office of Labor-Management Standards Washington, D.C. 20210 (Feb. 1990) Required of Persons, Including Labor Relations
Consultants and Other Individuals and Organizations,
Under Section 203(b) of the Labor-Management
Reporting and Disclosure Act of 1959, As Amended (LMRDA)

Form approved - OMB No. 1215-0188 Expires 11-30-2002

		Reporting an	d Disclosure Act o	f 1959, As A	mended (LMRD)A)			
		A PERSO	N FILING						
1. NAME AND ADDRESS (include ZIP code)					SS WHERE REC		ECESSAI	RY	
0117.4			TO VERIF	TO VERIFY THIS REPORT ARE KEPT:					
B.H. Troxel Western Employers Count tants P.O.Box 2055			8704 Montmely Ct. Bokers Fill, CA 93311						
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Bakers Field (A 93303			000		REPORT To:	13	5/	104	
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NAME AND ADDRESS OF EM	•			•	. TERMINATIO	ON DATE	7. AM	OUNT	
5. NAME AND ADDRESS OF EMPLOYER (Include ZIP code)								<u> </u>	
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E- VERIFICATION AND SIGNA	ATURE. The pers	ion in item 1 abo	ive and each of hi	is undersign	ned authorized	officers d	eclares,	under pena ad hy him a	
of law, that all information in this is, to the best of this knowledge as	eport, including a nd belief, true, cor	m attachments inc rect, and comple	te.		o ar ans report	, וופט טטטו			
SIGNED: DATE TO THE STATE OF TH		PRESIDENT	SIGNED:	אוןעו				REASURER	
at: Bakersfield CA on:	10.77	title, cross out e in correct title ab-	at:	· /·	_ on:	·	title, cross	out t title above	
City State Date			ove.) City S	State	Date				