

SCHEDULE 11 - BENEFITS

FILE NUMBER: 5 4 1 - 7 0 4

Description (A)	To Whom Paid (B)	Amount (C)
1. None	None	0
2.		
3.		
4.		
5. Total from additional pages (if any)		
6. Total of Lines 1 through 5		0
The total from Line 6 is entered in Item 63		

SCHEDULE 12 - CONTRIBUTIONS, GIFTS & GRANTS

SCHEDULE 13 - OFFICE & ADMINISTRATIVE EXPENSE

Description (A)	Amount (B)
1. Meinck Children Schol Fund	1 8 4 1
2. Flowers	1 4 1 4
3. Cond Entertnmnt Comm	2 8 0 0
4. Various gift certificates	3 0 0
5. Connecticut Hospice	2 0 0
6.	
7. Total from additional pages (if any)	
8. Total of Lines 1 through 7	6 5 5 5
The total from Line 8 is entered in Item 64	

Description (A)	Amount (B)
1. Division functions	2 8 3 3
2. Dues refund	2 0 8 0
3. Hall rental	2 5 7 5
4. Office equipment	2 2 9 9
5. Office supplies	3 4 4 7
6. Postage	7 2 2
7. Total from additional pages (if any)	
8. Total of Lines 1 through 7	1 3 9 5 6
The total from Line 8 is entered in Item 60	

SCHEDULE 14 - OTHER RECEIPTS

Description (A)	Amount (B)
1. Deposit error from 2002	4 8 0
2.	
3.	
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	4 8 0
The total from Line 17 is entered in Item 54	

SCHEDULE 15 - OTHER DISBURSEMENTS

Description (A)	Amount (B)
1. Newsletter printing	1 9 8 7
2.	
3.	
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	1 9 8 7
The total from Line 17 is entered in Item 73	

ORGANIZATION NAME:
COMMUTER RAIL EMPLOYEES, IND

FILE NUMBER: 5 4 1 - 7 0 4

ENDING DATE OF PERIOD COVERED:
12/31/2002

75. ADDITIONAL INFORMATION

Item Number	
14	Trustees

ORGANIZATION NAME:
COMMUTER RAIL EMPLOYEES, IND

FILE NUMBER: 5 4 1 - 7 0 4

ENDING DATE OF PERIOD COVERED:
12/31/2002

75. ADDITIONAL INFORMATION(continued)

Item Number	
22	By-law changes submitted to the OLMS

ORGANIZATION NAME:
COMMUTER RAIL EMPLOYEES, IND

FILE NUMBER: 5 4 1 - 7 0 4

ENDING DATE OF PERIOD COVERED:
12/31/2002

75. ADDITIONAL INFORMATION (continued)

Item Number	
23	\$9000 to the ACRE Executive Board for security deposit on office space

ORGANIZATION NAME:
COMMUTER RAIL EMPLOYEES, IND

FILE NUMBER: 5 4 1 - 7 0 4

ENDING DATE OF PERIOD COVERED:
12/31/2002

75. ADDITIONAL INFORMATION (continued)

Item Number	
9	1603 Eagles Ridge, Brewster, NY 10509

ORGANIZATION NAME:
COMMUTER RAIL EMPLOYEES, IND

FILE NUMBER: **5 4 1 - 7 0 4**

ENDING DATE OF PERIOD COVERED:
12/31/2002

TRUSTEE SIGNATURES

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.)

Trustee Sign: _____	TRUSTEE	Trustee Sign: _____	TRUSTEE
_____	_____	_____	_____
Date	Telephone Number	Date	Telephone Number