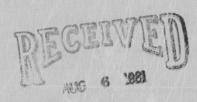
RB-036005 GARMENT TRUCKMEN ASSOCIATION OF NJ, INC. 1980

ORIGINAL

Rate Bureaus and Organizations

1980

Date Due: March 31, 1981



ICC - P.O. 10

ANNUAL REPORT FORM RBO

Approved by GAO B-180230 (R0257)

30 ?

Expires 5-31-82 Check one: Class I

Class II

ANNUAL REPORT TO THE INTERSTATE COMMERCE COMMISSION

CORRECT NAME AND ADDRESS IF DIFFERENT THAN SHOWN. (See instructions)

RB036005 GARMENTTRUC 2 0 GARMENT TRUCKMEN ASSOCIATION OF

25-W-ST-34TH NEW YORK

450 SEVENTH AVENUE

NEW YORK, N.Y. 10123

ROOM 2303

FOLLOW ALL INSTRUCTIONS CAREFULLY

1. Remove the mailing label from the cover and attach the label to the top of page 1 of the report form to be filed. The mailing label should NOT be altered. If the name and address on the mailing label are incorrect, insert your correct name and address in the space provided to the left. The carrier mailing address is the company address where correspondence regarding accounting and reporting matters is to be directed, but not the address of an independent auditor or CAP.

2. Ali conferences, bureaus, committees, or other organizations, subject to Section 111145 (49 U.S.C. §10706) Part I of the Interstate Commerce Act, are required to file annual report Form RBO. This Form for annual report should be filled out in triplicate and 2 copies, the original of which must be the copy containing the mailing label, returned to the Interstate Commerce Commission, Bureau of Accounts, P.O. Box 2040, Rockville Pike Station, Rockville, MD. 20852, by March 31 of the year following the year for which the report is made. One copy is to be retained for reference in case of correspondence relative to the report. Attention is directed to Section 11145. Part I of the Interstate Commerce Act.

3. Carrier rate-making organizations as described in instruction 2., above, are classified into two classes. Class I rate bureaus are those with annual operating revenues of \$100,000 or more. Class II rate bureaus are those with annual operating revenues of less than \$100,000 Class I rate bureaus shall file the full report, Annual Report Form RBO. Class II rate bureaus shall file only the carrier statistics (ITEMS 1-9) and certification (page 4) portions of the Annual Report Form RBO.

4. The instructions in this Form should be carefully observed, and each question should be answered fully and accurately. If any inquiry does not apply to the respondent, such fact should be shown on the inquiry by the words "Not applicable." Where the word "None" truly and completely states the fact, it should be given as the answer to any particular inquiry or any particular portion of any inquiry. Where dates are called or, the month and day should be stated as well as the year. Customary abbreviations may be used in stating dates.

5. If it is necessary or desirable to insert additional statements, typewritten or other, in a report, they should be legibly made on durable paper, on sheets not larger than a page of the Form. The inserts should be securely bound in the report.

6. All entries must be made in permanent black ink. Those of a contrary and unusual character must be indicated by use of parentheses.

7. Throughout this report the Commission means the Interstate Commerce Commission; the respondent means the rate bureau or organization in whose behalf the report is made; the year ended December 31 for which the report is made; the close of the year means the close of business on December 31 of the year for which the report is made or, in case the report is made for a shorter period than one year, it means the close of the period covered by the report; the beginning of the year means the beginning of business on January 1 of the year for which the report is made or, in case the report is made for a shorter period than one year, it means the beginning of the period covered by the report.

8. Should there be doubt as to the reporting of any item or items or parts thereof, or advice is desired relative to the preparation of the report, address an inquiry to the Bureau of Accounts for consideration and decision.

. Date of whose	laws the respondent was organi				
	NEW JERSEY				
2. State	form of business organization	i.e., corporation, associ	ation, etc.		
	type of transport affiliation	(railroad, motor carrier,			etc.)
4. Give	the names and office addresses	of directors, if any, of t	The state of the s		year.
	NAME		OFFICE ADDRESS		
	Note				
	the names, title (if any), and ne year.			espondent at	close
	NAME.	TITLE	TOWNSEND ST	NOT BRU	WSW19K
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Annual Report Form RBO - Attachment Garment Truckmen Association of N.J., Inc.

RATE COMMITTEE

M. Lustberg C. DiPiazza

S. Hayes S. Hare

D. Maita H. Brody

S. Ferber

J. Mazzeo

H. Starr

Number taken without filing of proposals. Number taken after filing of regular or emergency proposals. Number taken after filing of regular or emergency proposals. BALANCE SHEET NE NO. ITEM BALANCE AT CLOSE OF YEAR OF YEAR ASSETS Current Assets 33359 \$ 373/2 Accounts Receivable. Accounts Receivable. Other Current Assets. Total Current Assets. Total Current Assets. Total Fixed Assets (Net of \$ accumulated depreciation and amortization). Other Assets. Total Other Assets. TOTAL ASSETS. LIABILITIES AND EQUITY Current Liabilities 10. Notes Payable. Accounts Payable. Accounts Payable. Other Current and Accrued Liabilities. Other Current and Accrued Liabilities. Other Liabilities. Other Liabilities. Other Liabilities. Total Other Liabilities. Other Liabilities. Total Other Liabilities. Other Liabilities. Total Other Liabilities. Figuity Assets 33359 373/2 373/2	15 10 7	ITEM		NUMBER
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18 TOTAL LIABILITIES AND EQUITY	17.	Membership Equity		37/3/2
	18.	TOTAL LIABILITIES AND EQUITY		

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11. INCOME STATEMENT

State, in dollars only, the receipts and disbursements of the respondent for the year.

LINE NO.	ITEM	(Dollars Only)
	OPERATING REVENUES:	27/1/2
1.	Membership Fees	\$ 3/192
2,	1 Tariff Fees	
3.	Other Income (List individual items in excess of \$25,000)	
4.		
5.		38520
6.	Total Operating Revenues	38520
	OPERATING EXPENSES:	11600
7.	Salaries and Wages	
8.	Employee Benefits	
9.	Payroll Taxes	• • • •
10.	Depreciation and Amortization	
11.	Property and Other Taxes	
12.	Other (List individual items in excess of \$25,000)	
13.		
14.		
15.		1055
16.	Total Operating Expenses	1 2542
17.	Net Income	

12. Give the number of persons employed at the close of the year and the amount of compensation paid or payable to all employees during the year by the respondent, classified as indicated.

LINE NO.	CLASSIFICATION	NO. OF PERSONS EMPLOYED AT THE CLOSE OF YEAR	AMOUNT OF COMPENSATION
1.	Officer's and Supervisors		15600
3.	Total		15600
4. 5.	Number of Employees Working With SRC		

f the person to be contacted concerning this report.
TITLE REG I.C. G. GRACTITIONER
716 671-8200
4 North Newle
EN MY 14580
CERTIFICATION
ON HARE Association
Garnent Truckmen Association of the Of New Jersey, Inc. Company (Full name of reporting company)
ts) (Full name of reporting company)
196 Signature Miller Mark 116
REMARKS
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