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

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FORM LM-21 RECEIPTS AND DISBURSEMENTS REPORT

Form approved
Office of Management
and Budget
No. 1245-0003
Expires: 03-31-2019

This report is mandatory under P.L. 88-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.

Required of persons, including Labor Relations Consultants and Other Individuals and Organizations, Under section 203(b) of the Labor-Management Relations and Disclosure Act of 1959, as amended. (LMRDA)



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1 . File Number C- 00322	2. Period Covered Month/Day/Year (mm/dd/yyyy) Month/Day/Year (mm/dd/yyyy)
	By This Report From: 01/01/2017 Through: 12/31/201
A. Person Filing	
Name and mailing address (include ZIP Code):	4. Any other address where records necessary to verify this report are kept:
Name Peter A List	Name
Title Founder & CEO	Title
Organization Kulture Consulting, LLC	Organization
P.O. Box, Building and Room Number, if any PO Box 2877 Street City Pawleys Island State South Carolina ZIP Code + 4 29585	P.O. Box, Building and Room Number, if any Street City State ZIP Code + 4
	atures
Each of the undersigned declares, under penalty of perjury and other applicable penal information contained in any accompanying documents) has been examined by the correct, and complete. (See the Section on penalties in the instructions).	ies of law, that all of the information submitted in this report (including the e signatory and is, to the best of the undersigned's knowledge and belief, true,
17. Signed Title Other (Specify) Founder & CEO President (if other title, see instructions)	18. Signed Treasurer (If other title, see Intle Other (Specify) instructions) Manager of Administration
	02 03 / 15 / 2018 843-314-0383

Name of Person Filing: Peter List	File Number C- 00322
B. Statement of Receipts Report all receipts from employers in connection wi	th labor relations advice or services regardless of the purposes of the advice
or services.	
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any
Employer AAA of Northern CA, NV, UT	
Trade Name	Street 1277 Treat Boulevard, Ste 1000
Attention To Sue Hagen	City Walnut Creek
Title	State California ZIP Code + 4 94597
nue	State Carriornia Zir Code + 4 (24337)
5.b. Termination Date 5/31/16	5.c. Amount 3,,555
6. TOTAL RECEIPTS FROM ALL EMPLOYERS 3,521,547	
C. Statement of Disbursements Report all disbursements made by the report all disbursements made by the report all disbursements made by the report all disbursements are reported by the reported by	porting organization in connection with labor relations advice or services rendered
7. Disbursements to Officers and Employees:	
(a) Name (b) Salary (c) Expenses (d	Totals
	Office and Administrative Expenses
	10. Publicity
	11. Fees for Professional Services
	12. Loans Made
	13. Other Disbursements
8. Total disbursements to officers and employees:	14. Total Disbursements (Sum of Items 8-13)
D. Schedule of Disbursements for Reportable Activity Use this Sched	lule to report only disbursements made for the purposes described in Part D of the
instructions.	
15.a. Employer Name:	15.b. Trade Name, If any:
15.c. To Whom Paid	15.d. Amount
Name	15.e. Purpose
Title	
Organization	¬
P.O. Box, Building and Room Number, if any	
Street	
City	
State Washington ZIP Code + 4	۱ ا
16. TOTAL DISBURSEMENTS FOR ALL REPORTABLE ACTIVITY	
10. 10 ME DIODOROEMENTO FOR ALE REPORTABLE ACTIVITY	

Form LM-21 (2003)

Name of Person Filing: Peter List	File Number C- 00322
B. Statement of Receipts Report all receipts from employers in connecti advice or services.	on with labor relations advice or services regardless of the purposes of the
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:
Employer Abramson Center for Jewish Life	P.O. Box, Bldg., Room No., if any
	Street 1425 Horsham Road
Attention To: Carol A Irvine	City North Wales
Title	-
1106	
5.b. Termination Date 8/31/16	5.c. Amount 12, 997
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Bldg., Room No., if any
Employer Advanced Electrical Services Group	S. SOX, BIGG., TOOM TO., II GIT
Trade Name	Street 1612 Wendy Way
Attention To: Donna Vance	City Garnet Valley
Title	State Penńsylvania ZIP Code + 4 19060
5.b. Termination Date 5/31/17	5.c. Amount [11, 11'3]
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box. Bldg., Room No., if anv
Employer Albert Einstein Medical Center	
Trade Name	Street 5501 Old York Road
Attention To: Sally Chmielewski	City Philadelphia
Title	State Pennsylvania ZIP Code + 4 19141
5.b. Termination Date On-going	T
J.D. Tellillation Date [OII-qOIIIq	5.c. Amount 1265, 619
	5.c. Amount 265, 619
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:
5.a. Name and Address of Employer (including trade name, if any).	
	Mailing Address:
5.a. Name and Address of Employer (including trade name, if any). Employer Forged Metals Inc./Alcoa	Mailing Address: P.O. Box, Bldg., Room No., if any
5.a. Name and Address of Employer (including trade name, if any). Employer Forged Metals Inc./Alcoa Trade Name	Mailing Address: P.O. Box, Bldq., Room No., if any Street 201 Isabella Street City Pittsburgh
5.a. Name and Address of Employer (including trade name, if any). Employer Forged Metals Inc./Alcoa Trade Name Attention To: Scott Dietrich Title	Mailing Address: P.O. Box, Bldg., Room No., if any Street 201 Isabella Street City Pittsburgh State Pennsylvania ZIP Code + 4 15212
5.a. Name and Address of Employer (including trade name, if any). Employer Forged Metals Inc./Alcoa Trade Name Attention To: Scott Title 5.b. Termination Date 10/31/16	Mailing Address: P.O. Box, Bldq., Room No., if any Street 201 Isabella Street City Pittsburgh State Pennsylvania ZIP Code + 4 15212 5.c. Amount 13,835
5.a. Name and Address of Employer (including trade name, if any). Employer Forged Metals Inc./Alcoa Trade Name Attention To: Scott Dietrich Title	Mailing Address: P.O. Box, Bldq., Room No., if any Street 201 Isabella Street City Pittsburgh State Pennsylvania ZIP Code + 4 15212 5.c. Amount 13,835 Mailing Address:
5.a. Name and Address of Employer (including trade name, if any). Employer Forged Metals Inc./Alcoa Trade Name Attention To: Scott Title 5.b. Termination Date 10/31/16 5.a. Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Bldq., Room No., if any Street 201 Isabella Street City Pittsburgh State Pennsylvania ZIP Code + 4 15212 5.c. Amount 13,835
5.a. Name and Address of Employer (including trade name, if any). Employer Forged Metals Inc./Alcoa Trade Name Attention To: Scott Dietrich Title 5.b. Termination Date 10/31/16 5.a. Name and Address of Employer (including trade name, if any). Employer RBC Bearings Corp	Mailing Address: P.O. Box, Bldq., Room No., if any Street 201 Isabella Street City Pittsburgh State Pennsylvania ZIP Code + 4 15212 5.c. Amount 13,835 Mailing Address: P.O. Box, Bldq., Room No., if any *NOTE 4 - See Addendum
5.a. Name and Address of Employer (including trade name, if any). Employer Forged Metals Inc./Alcoa Trade Name Attention To: Scott Title 5.b. Termination Date 10/31/16 5.a. Name and Address of Employer (including trade name, if any). Employer RBC Bearings Corp Trade Name d/b/a All Power Manufacturing Co	Mailing Address: P.O. Box, Bldg., Room No., if any Street 201 Isabella Street City Pittsburgh State Pennsylvania ZIP Code + 4 15212 5.c. Amount 13,835 Mailing Address: P.O. Box, Bldg., Room No., if any *NOTE 4 - See Addendum Street 13141 Molette Street
5.a. Name and Address of Employer (including trade name, if any). Employer Forged Metals Inc./Alcoa Trade Name Attention To: Scott Dietrich Title 5.b. Termination Date 10/31/16 5.a. Name and Address of Employer (including trade name, if any). Employer RBC Bearings Corp Trade Name d/b/a All Power Manufacturing Co Attention To: Raeanne Norberg	Mailing Address: P.O. Box, Bldg., Room No., if any Street 201 Isabella Street City Pittsburgh State Pennsylvania ZIP Code + 4 15212 5.c. Amount 13,835 Mailing Address: P.O. Box. Bldg., Room No., if any *NOTE 4 - See Addendum Street 13141 Molette Street City Santa Fe Springs
5.a. Name and Address of Employer (including trade name, if any). Employer Forged Metals Inc./Alcoa Trade Name Attention To: Scott Title 5.b. Termination Date 10/31/16 5.a. Name and Address of Employer (including trade name, if any). Employer RBC Bearings Corp Trade Name d/b/a All Power Manufacturing Co Attention To: Raeanne Norberg Title	Mailing Address: P.O. Box, Bldq., Room No., if any Street 201 Isabella Street City Pittsburgh State Pennsylvania ZIP Code + 4 15212 5.c. Amount 13,835 Mailing Address: P.O. Box. Bldq., Room No., if any *NOTE 4 - See Addendum Street 13141 Molette Street City Santa Fe Springs State California ZIP Code + 4 90670
5.a. Name and Address of Employer (including trade name, if any). Employer Forged Metals Inc./Alcoa Trade Name Attention To: Scott Dietrich Title 5.b. Termination Date 10/31/16 5.a. Name and Address of Employer (including trade name, if any). Employer RBC Bearings Corp Trade Name d/b/a All Power Manufacturing Co Attention To: Raeanne Norberg	Mailing Address: P.O. Box, Bldg., Room No., if any Street 201 Isabella Street City Pittsburgh State Pennsylvania ZIP Code + 4 15212 5.c. Amount 13,835 Mailing Address: P.O. Box. Bldg., Room No., if any *NOTE 4 - See Addendum Street 13141 Molette Street City Santa Fe Springs
5.a. Name and Address of Employer (including trade name, if any). Employer Forged Metals Inc./Alcoa Trade Name Attention To: Scott Title 5.b. Termination Date 10/31/16 5.a. Name and Address of Employer (including trade name, if any). Employer RBC Bearings Corp Trade Name d/b/a All Power Manufacturing Co Attention To: Raeanne Norberg Title	Mailing Address: P.O. Box, Bldq., Room No., if any Street 201 Isabella Street City Pittsburgh State Pennsylvania ZIP Code + 4 15212 5.c. Amount 13,835 Mailing Address: P.O. Box, Bldq., Room No., if any *NOTE 4 - See Addendum Street 13141 Molette Street City Santa Fe Springs State California ZIP Code + 4 90670 5.c. Amount 8,043 Mailing Address:
5.a. Name and Address of Employer (including trade name, if any). Employer Forged Metals Inc./Alcoa Trade Name Attention To: Scott Title 5.b. Termination Date 10/31/16 5.a. Name and Address of Employer (including trade name, if any). Employer RBC Bearings Corp Trade Name d/b/a All Power Manufacturing Co Attention To: Raeanne Title 5.b. Termination Date On-going 5.a. Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Bldg., Room No., if any Street 201 Isabella Street City Pittsburgh State Pennsylvania ZIP Code + 4 15212 5.c. Amount 13,835 Mailing Address: P.O. Box, Bldg., Room No., if any *NOTE 4 - See Addendum Street 13141 Molette Street City Santa Fe Springs State California ZIP Code + 4 90670 5.c. Amount 8,043
5.a. Name and Address of Employer (including trade name, if any). Employer Forged Metals Inc./Alcoa Trade Name Attention To: Scott Title 5.b. Termination Date 10/31/16 5.a. Name and Address of Employer (including trade name, if any). Employer RBC Bearings Corp Trade Name d/b/a All Power Manufacturing Co Attention To: Raeanne Title 5.b. Termination Date On-going	Mailing Address: P.O. Box, Bldq., Room No., if any Street 201 Isabella Street City Pittsburgh State Pennsylvania ZIP Code + 4 15212 5.c. Amount 13,835 Mailing Address: P.O. Box, Bldq., Room No., if any *NOTE 4 - See Addendum Street 13141 Molette Street City Santa Fe Springs State California ZIP Code + 4 90670 5.c. Amount 8,043 Mailing Address:
5.a. Name and Address of Employer (including trade name, if any). Employer Forged Metals Inc./Alcoa Trade Name Attention To: Scott Dietrich Title 5.b. Termination Date 10/31/16 5.a. Name and Address of Employer (including trade name, if any). Employer RBC Bearings Corp Trade Name d/b/a All Power Manufacturing Co Attention To: Raeanne Norberg Title 5.b. Termination Date On-going 5.a. Name and Address of Employer (including trade name, if any). Employer Arbor Recycling Inc.	Mailing Address: P.O. Box, Bldq., Room No., if any Street 201 Isabella Street City Pittsburgh State Pennsylvania ZIP Code + 4 15212 5.c. Amount 13,835 Mailing Address: P.O. Box, Blda., Room No., if any *NOTE 4 - See Addendum Street 13141 Molette Street City Santa Fe Springs State California ZIP Code + 4 90670 5.c. Amount 8,043 Mailing Address: P.O. Box, Blda., Room No., if any Mailing Address: P.O. Box, Blda., Room No., if any
5.a. Name and Address of Employer (including trade name, if any). Employer Forged Metals Inc./Alcoa Trade Name Attention To: Scott Title 5.b. Termination Date 10/31/16 5.a. Name and Address of Employer (including trade name, if any). Employer RBC Bearings Corp Trade Name d/b/a All Power Manufacturing Co Attention To: Raeanne Title 5.b. Termination Date On-going 5.a. Name and Address of Employer (including trade name, if any). Employer Arbor Recycling Inc. Trade Name	Mailing Address: P.O. Box, Bldg., Room No., if any Street 201 Isabella Street City Pittsburgh State Pennsylvania ZIP Code + 4 15212 5.c. Amount 13,835 Mailing Address: P.O. Box. Bldg., Room No., if any *NOTE 4 - See Addendum Street 13141 Molette Street City Santa Fe Springs State California ZIP Code + 4 90670 5.c. Amount 8,043 Mailing Address: P.O. Box. Bldg., Room No., if any Street 1120 Grinnell Place

Name of Person Filing: Peter List		File Number C- 00322		
B. Statement of Receipts Report all receipts from employers in connection advice or services.	with labor relations advic	e or services regardless of the purposes of the		
5.a. Name and Address of Employer (including trade name, if any). Mailing Address:				
Employer Argosy Casino Hotel & Spa	P.O. Box, Bldg., Roo	n No., if any		
Trade Name	Street 777 NW A			
Attention To: Samir C Mowad, Jr.	City Riverside			
Title	State Missouri	ZIP Code + 4 64150		
5.b. Termination Date 5/31/17	5.c. Amount 44,425			
5.a. Name and Address of Employer (including trade name, if any).	Mailing Add			
Employer Benco Dental				
Trade Name	Street 295 Cente	rPoint Boulevard		
Attention To: George Rable	City Pittston			
Title	State Pennsylva	nia ZIP Code + 4 18640		
5.b. Termination Date 10/31/17	5.c. Amount 13, 086			
5.a. Name and Address of Employer (including trade name, if any).	Mailing Ad	dress:		
	P.O. Box. Blda Roo			
Employer Brenntag Pacific Inc.				
Trade Name	Street 4545 Ardi	ne Street		
Attention To: Tim Willenborg	City South Gat			
Title	State Californi	a ZIP Code + 4 90280		
The state of the	T			
5.b. Termination Date 12/31/16	5.c. Amount 40,519			
5.b. Termination Date 12/31/16 5.a. Name and Address of Employer (including trade name, if any).	5.c. Amount 40, 519 Mailing Add P.O. Box, Bldg., Roo		-	
	Mailing Add			
5.a. Name and Address of Employer (including trade name, if any).	Mailing Add	n No., if any		
5.a. Name and Address of Employer (including trade name, if any). Employer Cargill Meat Solutions Inc.	Mailing Add	n No., if any		
5.a. Name and Address of Employer (including trade name, if any). Employer Cargill Meat Solutions Inc. Trade Name	Mailing Add P.O. Box, Bldg., Roo Street 151 North	n No., if any		
5.a. Name and Address of Employer (including trade name, if any). Employer Cargill Meat Solutions Inc. Trade Name Attention To: Tanya Teeter	Mailing Add P.O. Box, Bldg., Roo Street 151 North City Wichita	Main Street		
5.a. Name and Address of Employer (including trade name, if any). Employer Cargill Meat Solutions Inc. Trade Name Attention To: Tanya Title 5.b. Termination Date 4/30/17	Mailing Add P.O. Box, Bldg., Roo Street 151 North City Wichita State Kansas 5.c. Amount 9, 427	Main Street ZIP Code + 4 67201		
5.a. Name and Address of Employer (including trade name, if any). Employer Cargill Meat Solutions Inc. Trade Name Attention To: Tanya Teeter Title 5.b. Termination Date 4/30/17 5.a. Name and Address of Employer (including trade name, if any).	Mailing Add P.O. Box, Bldg., Roo Street 151 North City Wichita State Kansas	Main Street ZIP Code + 4 67201 ress:		
5.a. Name and Address of Employer (including trade name, if any). Employer Cargill Meat Solutions Inc. Trade Name Attention To: Tanya Title 5.b. Termination Date 4/30/17	Mailing Add P.O. Box, Bldg., Roo Street 151 North City Wichita State Kansas 5.c. Amount 9, 427 Mailing Add	Main Street ZIP Code + 4 67201 ress:		
5.a. Name and Address of Employer (including trade name, if any). Employer Cargill Meat Solutions Inc. Trade Name Attention To: Tanya Teeter Title 5.b. Termination Date 4/30/17 5.a. Name and Address of Employer (including trade name, if any).	Mailing Add P.O. Box, Bldg., Roo Street 151 North City Wichita State Kansas 5.c. Amount 9, 427 Mailing Add P.O. Box, Bldg., Roo	Main Street ZIP Code + 4 67201 ress:		
5.a. Name and Address of Employer (including trade name, if any). Employer Cargill Meat Solutions Inc. Trade Name Attention To: Tanya Title 5.b. Termination Date 4/30/17 5.a. Name and Address of Employer (including trade name, if any). Employer Saint-Gobain Corporation	Mailing Add P.O. Box, Bldg., Roo Street 151 North City Wichita State Kansas 5.c. Amount 9, 427 Mailing Add P.O. Box, Bldg., Roo	Main Street ZIP Code + 4 67201 ress: n No if anv h Kaufman Street		
5.a. Name and Address of Employer (including trade name, if any). Employer Cargill Meat Solutions Inc. Trade Name Attention To: Tanya Teeter Title 5.b. Termination Date 4/30/17 5.a. Name and Address of Employer (including trade name, if any). Employer Saint-Gobain Corporation Trade Name d/b/a Certainteed Corporation	Mailing Add P.O. Box, Bldg., Roo Street 151 North City Wichita State Kansas 5.c. Amount 9, 42.7 Mailing Add P.O. Box. Bldg., Roo Street 2901 North	Main Street ZIP Code + 4 67201 Iress: n No if any		
5.a. Name and Address of Employer (including trade name, if any). Employer Cargill Meat Solutions Inc. Trade Name Attention To: Tanya Title 5.b. Termination Date 4/30/17 5.a. Name and Address of Employer (including trade name, if any). Employer Saint-Gobain Corporation Trade Name d/b/a Certainteed Corporation Attention To: Robert Cohen	Mailing Add P.O. Box, Bldg., Roo Street 151 North City Wichita State Kansas 5.c. Amount 9, 427 Mailing Add P.O. Box, Bldg., Roo Street 2901 Nort City Ennis	Main Street ZIP Code + 4 67201 ress: n No if anv h Kaufman Street		
5.a. Name and Address of Employer (including trade name, if any). Employer Cargill Meat Solutions Inc. Trade Name Attention To: Tanya Title 5.b. Termination Date 4/30/17 5.a. Name and Address of Employer (including trade name, if any). Employer Saint-Gobain Corporation Trade Name d/b/a Certainteed Corporation Attention To: Robert Cohen Title	Mailing Add P.O. Box, Bldg., Roo Street 151 North City Wichita State Kansas 5.c. Amount 9, 427 Mailing Add P.O. Box, BldgRoo Street 2901 Nort City Ennis State Texas	Main Street ZIP Code + 4 67201 ress: n No if anv A Kaufman Street ZIP Code + 4 75119		
5.a. Name and Address of Employer (including trade name, if any). Employer Cargill Meat Solutions Inc. Trade Name Attention To: Tanya Teeter Title 5.b. Termination Date 4/30/17 5.a. Name and Address of Employer (including trade name, if any). Employer Saint-Gobain Corporation Trade Name d/b/a Certainteed Corporation Attention To: Robert Cohen Title 5.b. Termination Date 9/30/17 5.a. Name and Address of Employer (including trade name, if any).	Mailing Add P.O. Box, Bldg., Roo Street 151 North City Wichita State Kansas 5.c. Amount 9, 42.7 Mailing Add P.O. Box. BldgRoo Street 2901 Nort City Ennis State Texas 5.c. Amount 38,909	Main Street ZIP Code + 4 67201 ress: n No if anv Line Street ZIP Code + 4 75119		
5.a. Name and Address of Employer (including trade name, if any). Employer Cargill Meat Solutions Inc. Trade Name Attention To: Tanya Teeter Title 5.b. Termination Date 4/30/17 5.a. Name and Address of Employer (including trade name, if any). Employer Saint-Gobain Corporation Trade Name d/b/a Certainteed Corporation Attention To: Robert Cohen Title 5.b. Termination Date 9/30/17 5.a. Name and Address of Employer (including trade name, if any). Employer Brambles Limited	Mailing Add P.O. Box, Bldg., Roo Street 151 North City Wichita State Kansas 5.c. Amount 9, 427 Mailing Add P.O. Box, Bldg., Roo Street 2901 Nort City Ennis State Texas 5.c. Amount 38, 909 Mailing Add P.O. Box, Bldg., Roo Mailing Add	Main Street ZIP Code + 4 67201 ress: n Noif anv LIP Code + 4 75119 ress: n Noif anv		
5.a. Name and Address of Employer (including trade name, if any). Employer Cargill Meat Solutions Inc. Trade Name Attention To: Tanya Teeter Title 5.b. Termination Date 4/30/17 5.a. Name and Address of Employer (including trade name, if any). Employer Saint-Gobain Corporation Trade Name d/b/a Certainteed Corporation Attention To: Robert Cohen Title 5.b. Termination Date 9/30/17 5.a. Name and Address of Employer (including trade name, if any).	Mailing Add P.O. Box, Bldg., Roo Street 151 North City Wichita State Kansas 5.c. Amount 9, 427 Mailing Add P.O. Box, Bldg., Roo Street 2901 Nort City Ennis State Texas 5.c. Amount 38, 909 Mailing Add	Main Street ZIP Code + 4 67201 ress: n Noif anv LIP Code + 4 75119 ress: n Noif anv		
5.a. Name and Address of Employer (including trade name, if any). Employer Cargill Meat Solutions Inc. Trade Name Attention To: Tanya Teeter Title 5.b. Termination Date 4/30/17 5.a. Name and Address of Employer (including trade name, if any). Employer Saint-Gobain Corporation Trade Name d/b/a Certainteed Corporation Attention To: Robert Cohen Title 5.b. Termination Date 9/30/17 5.a. Name and Address of Employer (including trade name, if any). Employer Brambles Limited	Mailing Add P.O. Box, Bldg., Roo Street 151 North City Wichita State Kansas 5.c. Amount 9, 427 Mailing Add P.O. Box, Bldg., Roo Street 2901 Nort City Ennis State Texas 5.c. Amount 38, 909 Mailing Add P.O. Box, Bldg., Roo Mailing Add	Main Street ZIP Code + 4 67201 ress: n No if anv ZIP Code + 4 75119 ZIP Code + 4 75119		
5.a. Name and Address of Employer (including trade name, if any). Employer Cargill Meat Solutions Inc. Trade Name Attention To: Tanya Teeter Title 5.b. Termination Date 4/30/17 5.a. Name and Address of Employer (including trade name, if any). Employer Saint-Gobain Corporation Trade Name d/b/a Certainteed Corporation Attention To: Robert Cohen Title 5.b. Termination Date 9/30/17 5.a. Name and Address of Employer (including trade name, if any). Employer Brambles Limited Trade Name CHEP Recycled Pallet Solutions	Mailing Add P.O. Box, Bldg., Roo Street 151 North City Wichita State Kansas 5.c. Amount 9, 42.7 Mailing Add P.O. Box. Bldg., Roo Street 2901 Nort City Ennis State Texas 5.c. Amount 38, 909 Mailing Add P.O. Box. Bldg., Roo Street 5897. Wind	Main Street ZIP Code + 4 67201 Tress: n No if anv ZIP Code + 4 75119 Tress: n No if anv Ward Parkway		

Name of Person Filing: Peter List	File Number C- 00322		
B. Statement of Receipts Report all receipts from employers in connection with labor relations advice or services regardless of the purposes of the advice or services.			
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:		
Employer Children's Specialized Hospital-RWJBH	P.O. Box, Bldg., Room No., if any		
Trade Name	Street 200 Somerset Street		
Attention To: Ruth K Bash	City New Brunswick		
Title	State New Jersey ZIP Code + 4 08901-1942		
5.b. Termination Date 8/31/17	5.c. Amount 63, 225		
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:		
Employer Coca-Cola Refreshments	P.O. Box, Bldg., Room No., if any *NOTE 5 - See Addendum		
Trade Name d/b/a Coca-Cola Bottling Company	Street 1 Coca-Cola Plaza, Suite CCP-3		
Attention To: Robin Gee	City Atlanta		
Title	State Georgia ZIP Code + 4 30313		
5.b. Termination Date 2/28/17	5.c. Amount 16, 746		
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:		
	P.O. Box, Bldg., Room No., if any		
Employer Coca-Cola Great Plains Bottling Company	COO N Man		
Trade Name	Street 600 N May		
Attention To: Robin Gee	City Oklahoma City State Oklahoma ZIP Code + 4 73107-6390		
Title	State Oklahoma ZIP Code + 4 73107-6390		
5.b. Termination Date 12/31/16	5.c. Amount 46, 447		
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Bldg., Room No., if any		
Employer DaVita Inc.	P.O. BOX, Biog., Room No., if any		
Trade Name	Street 15271 Laguna Canyon Road		
Attention To: Michael Freimann	City Irvine		
Title	State California ZIP Code + 4 92618		
5.b. Termination Date On-going	5.c. Amount 294, 874		
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:		
	P.O. Box. Bldg., Room No., if any		
Employer Eli Zabar Inc.			
Trade Name Eli's Bread	Street 1064 Madison Avenue		
Attention To: Eli Zabar	City New York		
Title	State New York ZIP Code + 4 10028		
5.b. Termination Date 1/31/17			
	5.c. Amount 15, 691		
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:		
Employer Flowers Baking Co of Modesto	Mailing Address: P.O. Box. Blda Room No if anv		
Employer Flowers Baking Co of Modesto Trade Name	Mailing Address: P.O. Box. Bldg Room No if anv Street 736 Mariposa Road		
Employer Flowers Baking Co of Modesto	Mailing Address: P.O. Box. Blda Room No if anv		

Name of Person Filing: Peter List	File Number C- 00322		
B. Statement of Receipts Report all receipts from employers in connection valvice or services.	with labor relations advice or services regardless of the purposes of the		
5.a. Name and Address of Employer (including trade name, if any). Mailing Address:			
Employer Flowers Baking Co of Oxford	P.O. Box, Bldg., Room No., if any		
	Street 1700 Yilly all Charach		
Trade Name	Street 700 Lincoln Street		
Attention To: Dan	City Oxford		
Title	State Pennsylvania ZIP Code + 4 19363		
5.b. Termination Date 8/31/17	5.c. Amount 63.,467		
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Bldg., Room No., if any		
Employer Fond du Lac Cold Storage	10.000, <u>Diag., 400 III 140, ii aili</u>		
Trade Name	Street 78 Saw Mill Pond Road		
Attention To: Ted Chan	City Edison		
Title	State New Jersey ZIP Code + 4 08817		
[
5.b. Termination Date 2/28/17	5.c. Amount 5 , 083		
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:		
UD Hood IIC	P.O. Box. Blda Room No if any		
Employer HP Hood, LLC	Street 6 Kimball Lane		
Trade Name			
Attention To: Corey Jackson	City Lynnfield		
Title	State Massachusetts ZIP Code + 4 01940		
5.b. Termination Date 12/31/17	5.c. Amount 33,.277		
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Bldg., Room No., if any		
Employer Huntington Höspital	1.0. Dox, Bidg., recommen, many		
Trade Name	Street 100 W California Boulevard		
Attention To: David Alexander	City Pasadena		
Title	State California ZIP Code + 4 91105		
	particular and the second seco		
5.b. Termination Date 9/11/16	5.c. Amount 33 , 092		
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:P.O. Box. BldaRoom Noif any		
Employer Security Guard Inc.	*NOTE 6 - See Addendum		
Trade Name d/b/a Imperial Security			
I lique Name 1 - 1 - 1 - 1 - 1	Street 1142 E Chestnut Avenue, Suite A		
	Street 1142 E Chestnut Avenue, Suite A		
Attention To: Cheryl Chalow	City Vineland		
	City Vineland State New Jersey ZIP Code + 4 08360		
Attention To: Cheryl Chalow	City Vineland		
Attention To: Cheryl Chalow Title	City Vineland State New Jersey ZIP Code + 4 08360 5.c. Amount 40,000 Mailing Address:		
Attention To: Cheryl Chalow Title 5.b. Termination Date On-going 5.a. Name and Address of Employer (including trade name, if any).	City Vineland State New Jersey ZIP Code + 4 08360 5.c. Amount 40,000		
Attention To: Cheryl Chalow Title 5.b. Termination Date On-going	City Vineland State New Jersey ZIP Code + 4 08360 5.c. Amount 40,000 Mailing Address: P.O. Box. Bldg Room No if any		
Attention To: Cheryl Chalow Title 5.b. Termination Date On-going 5.a. Name and Address of Employer (including trade name, if any). Employer Ingevity Corporation Trade Name	City Vineland State New Jersey ZIP Code + 4 08360 5.c. Amount 40,000 Mailing Address: P.O. Box. Bldg Room No if any Street 5255 Virginia Avenue		
Attention To: Cheryl Chalow Title 5.b. Termination Date On-going 5.a. Name and Address of Employer (including trade name, if any). Employer Ingevity Corporation	City Vineland State New Jersey ZIP Code + 4 08360 5.c. Amount 40,000 Mailing Address: P.O. Box. Bldg Room No if any Street 5255 Virginia Avenue City North Charleston		
Attention To: Cheryl Chalow Title 5.b. Termination Date On-going 5.a. Name and Address of Employer (including trade name, if any). Employer Ingevity Corporation Trade Name	City Vineland State New Jersey ZIP Code + 4 08360 5.c. Amount 40,000 Mailing Address: P.O. Box. Bldg Room No if any Street 5255 Virginia Avenue		

Name of Person F	iling: Peter List					File Number C	-00322
B. Statement of Receipts Report all receipts from employers in connection with labor relations advice or services regardless of the purposes of the advice or services.							
5.a. Name and Ad	5.a. Name and Address of Employer (including trade name, if any). Mailing Address:					<u></u>	
[77	iterlake Mecalux			1 P.O. B	ox, Bldg., Room N	o., if any	
1	Iteriake Mecalux		 -	l l	7.600 17	05-1	Walana Dla
Trade Name					1600 North	25th Avenue	, Melrose Pk
Attention To:	Nicole	Walters		City	Chicago	***************************************	77D Code 1 4
Title	<u> </u>			State	[Illinois		ZIP Code + 4 60160
5.b. Termination D	ate 12/16/16]	5.c. Amo	ount 4,270		
5.a. Name and Add	dress of Employer (inclu	ding trade name, if ar	ny).	P O Bo	Mailing Address ox, Bldg., Room N		
Employer JB	Hunt Transport	Inc.		.0.60	5 <u>x, Blag., 100m 14</u>	D., II GIIY	
Trade Name	ſ			Street	615 JB Hunt	Corporate I	Drive
	Bill	Dietrich	 '-	City	Lowell		
Title				State	Arkansas		ZIP Code + 4 72745
5.b. Termination D	Date 5/31/17		1	5.c. Amo	ount 18,746		
<u> </u>	dress of Employer (inclu	uding trade name if a		1	Mailing Addres		
			'iy).	P.O. Be	mailing Address ox. Bldg., Room N		
Employer JB	Hunt Transport	Inc.					
Trade Name				Street	615 JB Hunt	Corporate I	Prive
Attention To:	Bill	Dietrich		City	Lowell		
Title				State	Arkansas		ZIP Code + 4 72745
5.b. Termination D	ate 7/31/17			5.c. Amo	ount 69,449		
5.a. Name and Add	dress of Employer (inclu	ding trade name, if ar	ny).	•	Mailing Address		
	verside Health	& Rehah		P.O. Bo	x, Bldg., Room No *NOTE 7 - Se		
1	Medical Facilit			Street	234 Riversio		
						ie blive	7
Attention To:	Toda	Outney		_	Danville		ZIP Code + 4 24540
riue	<u> </u>			State	Virginia		21F Code + 4 24540
5.b. Termination D	Date 12/31/17			5.c. Amo	ount 24,869		
5.a. Name and Add	dress of Employer (inclu	ding trade name, if ar	ıy).		Mailing Address		
Mo	nmouth Medical	Center-PWIRH	,	P.O. Bo	ox. Blda Room No	o if any	
1 ' ' 1			=-	l Ctt	300 Second A	Vicenia.	
Trade Name Attention To:	Richard	B Kiernan			Long Branch	av citue	
Title	Richard	Bikiernan					ZIP Code + 4 07740
Title				State	New Jersey		21F Code + 4 07:/4/0
5.b. Termination D	Date 1.0/31/17]	5.c. Amo	ount 10,702		
5.a. Name and Add	dress of Employer (inclu	ding trade name, if ar	ıy).		Mailing Address		
Fac.	ciona Solar Pow	er. Inc		P.O. Bo	ox. Blda Room No *NOTE 3 - Se		
1 1	Nevada Solar On			Ctront	602 Eldorado		ve
made mame	<u> </u>						7
Attention To:	I DOD	Cable		- ·	Boulder City	<u> </u>	ZIP Code + 4 8 9 0 0 5
	<u> </u>		,	Tiale	Nevada		12 5000 - 189005
5.b. Termination D	ate 8/31/17			5.c. Amo	ount 33,595	İ	

Name of Person Filing: Peter List	Fi	ile Number C- 00322		
B. Statement of Receipts Report all receipts from employers in connection with labor relations advice or services regardless of the purposes of the advice or services.				
5.a. Name and Address of Employer (including trade name, if any). Mailing Address:				
Employer New Hudson Facades	P.O. Box, Bldg., Room No., if	any		
	Street 815 Columbia A			
Trade Name		venue		
Attention To: Dan Sassi	City Linwood	7ID Code + 4		
Title	State Pennsylvania	ZIP Code + 4 19061		
5.b. Termination Date On-going	5.c. Amount 226, 013			
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Bldg., Room No., if	any		
Employer North Star Seafood, LLĈ				
Trade Name	Street 2213 NW 30th	Place		
Attention To: Josh Burman	City Pompano Beach			
Title	State Florida	ZIP Code + 4 33069		
5.b. Termination Date On-going	5.c. Amount 7.3, 406			
	<u> </u>			
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box. Bldg., Room No., if	anv		
Employer Sonepar USA	*NOTE 1 - See			
Trade Name Northeast Electrical Distributors	Street 560 Oak Street			
Attention To: Kathleen O'Rourke	City Brockton			
Title	State Massachusetts	ZIP Code + 4 02301		
	Massachaseces			
5.b. Termination Date On-going	5.c. Amount 34, 964			
5.b. Termination Date On-going	5.c. Amount 34, 964			
5.b. Termination Date On-going 5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:	any		
5.a. Name and Address of Employer (including trade name, if any).		any		
5.a. Name and Address of Employer (including trade name, if any). Employer Omega Protein, Inc.	Mailing Address: P.O. Box, Bldg., Room No., if			
5.a. Name and Address of Employer (including trade name, if any). Employer Omega Protein, Inc Trade Name	Mailing Address: P.O. Box, Bldg., Room No., if Street 2105 City West	Boulevard, Suite 500		
5.a. Name and Address of Employer (including trade name, if any). Employer Omega Protein, Inc.	Mailing Address: P.O. Box, Bldq., Room No., if Street 2105 City West City Houston	Boulevard, Suite 500		
5.a. Name and Address of Employer (including trade name, if any). Employer Omega Protein, Inc Trade Name Attention To: John Held Title	Mailing Address: P.O. Box, Bldg., Room No., if Street 2105 City West City Houston State Texas			
5.a. Name and Address of Employer (including trade name, if any). Employer Omega Protein, Inc Trade Name Attention To: John Held Title 5.b. Termination Date 8/31/16	Mailing Address: P.O. Box, Bldq., Room No., if Street 2105 City West City Houston State Texas 5.c. Amount 13,900	Boulevard, Suite 500		
5.a. Name and Address of Employer (including trade name, if any). Employer Omega Protein, Inc Trade Name Attention To: John Held Title	Mailing Address: P.O. Box, Bldq., Room No., if Street 2105 City West City Houston State Texas 5.c. Amount 13,900 Mailing Address:	Boulevard, Suite 500 ZIP Code + 4 77042-2838		
5.a. Name and Address of Employer (including trade name, if any). Employer Omega Protein, Inc Trade Name Attention To: John Held Title 5.b. Termination Date 8/31/16 5.a. Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Bldq., Room No., if Street 2105 City West City Houston State Texas 5.c. Amount 13,900	Boulevard, Suite 500 ZIP Code + 4 77042-2838		
5.a. Name and Address of Employer (including trade name, if any). Employer Omega Protein, Inc Trade Name Attention To: John Held Title 5.b. Termination Date 8/31/16 5.a. Name and Address of Employer (including trade name, if any). Employer Party Rental Ltd.	Mailing Address: P.O. Box, Bldg., Room No., if Street 2105 City West City Houston State Texas 5.c. Amount 13,900 Mailing Address: P.O. Box, Bldg., Room No., if	Boulevard, Suite 500 ZIP Code + 4 77042-2838 anv		
5.a. Name and Address of Employer (including trade name, if any). Employer Omega Protein, Inc. Trade Name Attention To: John Held Title 5.b. Termination Date 8/31/16 5.a. Name and Address of Employer (including trade name, if any). Employer Party Rental Ltd. Trade Name	Mailing Address: P.O. Box, Bldq., Room No., if Street 2105 City West City Houston State Texas 5.c. Amount 13,900 Mailing Address: P.O. Box, Bldq., Room, No., if Street 275 North Street	Boulevard, Suite 500 ZIP Code + 4 77042-2838 anv		
5.a. Name and Address of Employer (including trade name, if any). Employer Omega Protein, Inc Trade Name Attention To: John Held Title 5.b. Termination Date 8/31/16 5.a. Name and Address of Employer (including trade name, if any). Employer Party Rental Ltd. Trade Name Attention To: Gary Halperin	Mailing Address: P.O. Box, Bldq., Room No., if Street 2105 City West City Houston State Texas 5.c. Amount 13,900 Mailing Address: P.O. Box, Bldq., Room, No., if Street 275 North Street City Teterboro	Boulevard, Suite 500 ZIP Code + 4 77042-2838 anvet		
5.a. Name and Address of Employer (including trade name, if any). Employer Omega Protein, Inc. Trade Name Attention To: John Held Title 5.b. Termination Date 8/31/16 5.a. Name and Address of Employer (including trade name, if any). Employer Party Rental Ltd. Trade Name	Mailing Address: P.O. Box, Bldq., Room No., if Street 2105 City West City Houston State Texas 5.c. Amount 13,900 Mailing Address: P.O. Box, Bldq., Room, No., if Street 275 North Street City Teterboro State New Jersey	Boulevard, Suite 500 ZIP Code + 4 77042-2838 anv		
5.a. Name and Address of Employer (including trade name, if any). Employer Omega Protein, Inc Trade Name Attention To: John Held Title 5.b. Termination Date 8/31/16 5.a. Name and Address of Employer (including trade name, if any). Employer Party Rental Ltd. Trade Name Attention To: Gary Halperin	Mailing Address: P.O. Box, Bldq., Room No., if Street 2105 City West City Houston State Texas 5.c. Amount 13,900 Mailing Address: P.O. Box, Bldq., Room, No., if Street 275 North Street City Teterboro	Boulevard, Suite 500 ZIP Code + 4 77042-2838 anvet		
5.a. Name and Address of Employer (including trade name, if any). Employer Omega Protein, Inc. Trade Name Attention To: John Held Title 5.b. Termination Date 8/31/16 5.a. Name and Address of Employer (including trade name, if any). Employer Party Rental Ltd. Trade Name Attention To: Gary Halperin Title	Mailing Address: P.O. Box, Bldq., Room No., if Street 2105 City West City Houston State Texas 5.c. Amount 13,900 Mailing Address: P.O. Box, Bldq., Room, No., if Street 275 North Street City Teterboro State New Jersey 5.c. Amount 20,525 Mailing Address:	Boulevard, Suite 500 ZIP Code + 4 77042-2838 anv et ZIP Code + 4 07608		
5.a. Name and Address of Employer (including trade name, if any). Employer Omega Protein, Inc. Trade Name Attention To: John Held Title 5.b. Termination Date 8/31/16 5.a. Name and Address of Employer (including trade name, if any). Employer Party Rental Ltd. Trade Name Attention To: Gary Halperin Title 5.b. Termination Date On-going 5.a. Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Bldq., Room No., if Street 2105 City West City Houston State Texas 5.c. Amount 13,900 Mailing Address: P.O. Box, Bldq., Room, No., if Street 275 North Street City Teterboro State New Jersey 5.c. Amount 20,525	Boulevard, Suite 500 ZIP Code + 4 77042-2838 anv et ZIP Code + 4 07608		
5.a. Name and Address of Employer (including trade name, if any). Employer Omega Protein, Inc. Trade Name Attention To: John Held Title 5.b. Termination Date 8/31/16 5.a. Name and Address of Employer (including trade name, if any). Employer Party Rental Ltd. Trade Name Attention To: Gary Halperin Title 5.b. Termination Date On-going 5.a. Name and Address of Employer (including trade name, if any). Employer Phillips Pet & Feed Supply	Mailing Address: P.O. Box, Bldg., Room No., if Street 2105 City West City Houston State Texas 5.c. Amount 13,900 Mailing Address: P.O. Box, Bldg., Room, No., if Street 275 North Street City Teterboro State New Jersey 5.c. Amount 20,525 Mailing Address: P.O. Box, Bldg., Room No., if	Boulevard, Suite 500 ZIP Code + 4 77042-2838 anv et ZIP Code + 4 07608,		
5.a. Name and Address of Employer (including trade name, if any). Employer Omega Protein, Inc. Trade Name Attention To: John Title 5.b. Termination Date 8/31/16 5.a. Name and Address of Employer (including trade name, if any). Employer Party Rental Ltd. Trade Name Attention To: Gary Title 5.b. Termination Date On-going 5.a. Name and Address of Employer (including trade name, if any). Employer Phillips Pet & Feed Supply Trade Name d/b/a A&K Logistics	Mailing Address: P.O. Box, Bldq., Room No., if Street 2105 City West City Houston State Texas 5.c. Amount 13,900 Mailing Address: P.O. Box, Bldq., Room, No., if Street 275 North Street City Teterboro State New Jersey 5.c. Amount 20,525 Mailing Address: P.O. Box, Bldq., Room No., if Street 3747 Hecktown	Boulevard, Suite 500 ZIP Code + 4 77042-2838 anv et ZIP Code + 4 07608,		
5.a. Name and Address of Employer (including trade name, if any). Employer Omega Protein, Inc. Trade Name Attention To: John Held Title 5.b. Termination Date 8/31/16 5.a. Name and Address of Employer (including trade name, if any). Employer Party Rental Ltd. Trade Name Attention To: Gary Halperin Title 5.b. Termination Date On-going 5.a. Name and Address of Employer (including trade name, if any). Employer Phillips Pet & Feed Supply Trade Name d/b/a A&K Logistics Attention To: Renee Daniels	Mailing Address: P.O. Box, Bldg., Room No., if Street 2105 City West City Houston State Texas 5.c. Amount 13,900 Mailing Address: P.O. Box, Bldg., Room, No., if Street 275 North Street City Teterboro State New Jersey 5.c. Amount 20,525 Mailing Address: P.O. Box, Bldg., Room No., if Street 3747 Hecktown City Easton	Boulevard, Suite 500 ZIP Code + 4 77042-2838 anv et ZIP Code + 4 07608.		
5.a. Name and Address of Employer (including trade name, if any). Employer Omega Protein, Inc. Trade Name Attention To: John Title 5.b. Termination Date 8/31/16 5.a. Name and Address of Employer (including trade name, if any). Employer Party Rental Ltd. Trade Name Attention To: Gary Title 5.b. Termination Date On-going 5.a. Name and Address of Employer (including trade name, if any). Employer Phillips Pet & Feed Supply Trade Name d/b/a A&K Logistics	Mailing Address: P.O. Box, Bldq., Room No., if Street 2105 City West City Houston State Texas 5.c. Amount 13,900 Mailing Address: P.O. Box, Bldq., Room, No., if Street 275 North Street City Teterboro State New Jersey 5.c. Amount 20,525 Mailing Address: P.O. Box, Bldq., Room No., if Street 3747 Hecktown	Boulevard, Suite 500 ZIP Code + 4 77042-2838 anv et ZIP Code + 4 07608,		

	File Number C- 00322		
B. Statement of Receipts Report all receipts from employers in connection with labor relations advice or services regardless of the purposes of the advice or services.			
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:		
Employer Rastelli Brothers Inc.	P.O. Box, Bldg., Room No., if any		
Trade Name Rastelli Foods	Street 300 Heron Drive		
Attention To: Sal Russo	City Swedesboro		
Title	State New Jersey ZIP Code + 4 08085-1707		
5.b. Termination Date 2/28/17	5.c. Amount 8 , 7.29		
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Bldg., Room No., if any		
Employer Second City Theater Chicago			
Trade Name	Street 1608 N Wells Street		
Attention To: Mike Conway	City Chicago		
Title	State Illinois ZIP Code + 4 60614		
5.b. Termination Date 11/30/17	5.c. Amount 9, 683		
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Bldg., Room No., if any		
Employer SJB Services			
Trade Name	Street 5167 South Park Avenue		
Attention To: Stan Blas	City Hamburg		
Title	State New York ZIP Code + 4 14075		
5.b. Termination Date 6/30/16	5.c. Amount 21, 116		
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:		
	Mailing Address: P.O. Box, Bldg., Room No., if any		
Employer Sugar House Casino			
Employer Sugar House Casino Trade Name	P.O. Box, Bldg., Room No., if any Street 1080 N Delaware Avenue, 8th Floor		
Employer Sugar House Casino	P.O. Box, Bldg., Room No., if any Street 1080 N Delaware Avenue, 8th Floor City Philadelphia		
Employer Sugar House Casino Trade Name Attention To: Kelly Williams Title	P.O. Box, Bldg., Room No., if any Street 1080 N Delaware Avenue, 8th Floor City Philadelphia State Pennsylvania ZIP Code + 4 19125		
Employer Sugar House Casino Trade Name Attention To: Kelly Williams	P.O. Box, Bldg., Room No., if any Street 1080 N Delaware Avenue, 8th Floor City Philadelphia		
Employer Sugar House Casino Trade Name Attention To: Kelly Williams Title	P.O. Box, Bldg., Room No., if any Street 1080 N Delaware Avenue, 8th Floor City Philadelphia State Pennsylvania ZIP Code + 4 19125 5.c. Amount 45, 911 Mailing Address:		
Employer Sugar House Casino Trade Name Attention To: Kelly Williams Title 5.b. Termination Date On-going 5.a. Name and Address of Employer (including trade name, if any).	P.O. Box, Bldg., Room No., if any Street 1080 N Delaware Avenue, 8th Floor City Philadelphia State Pennsylvania ZIP Code + 4 19125 5.c. Amount 45,911		
Employer Sugar House Casino Trade Name Attention To: Kelly Williams Title 5.b. Termination Date On-going 5.a. Name and Address of Employer (including trade name, if any). Employer Super Market Associates LLC	P.O. Box, Bldq., Room No., if any Street 1080 N Delaware Avenue, 8th Floor City Philadelphia State Pennsylvania ZIP Code + 4 19125 5.c. Amount 45, 911 Mailing Address: P.O. Box, Bldq., Room No., if any		
Employer Sugar House Casino Trade Name Attention To: Kelly Williams Title 5.b. Termination Date On-going 5.a. Name and Address of Employer (including trade name, if any). Employer Super Market Associates LLC Trade Name	P.O. Box, Bldq., Room No., if any Street 1080 N Delaware Avenue, 8th Floor City Philadelphia State Pennsylvania ZIP Code + 4 19125 5.c. Amount 45, 911 Mailing Address: P.O. Box, Bldq., Room No., if any Street 533 Doherty Avenue		
Employer Sugar House Casino Trade Name Attention To: Kelly Williams Title 5.b. Termination Date On-going 5.a. Name and Address of Employer (including trade name, if any). Employer Super Market Associates LLC	P.O. Box, Bldg., Room No., if any Street 1080 N Delaware Avenue, 8th Floor City Philadelphia State Pennsylvania ZIP Code + 4 19125 5.c. Amount 45, 911 Mailing Address: P.O. Box, Bldg., Room No., if any Street 533 Doherty Avenue City Modesto		
Employer Sugar House Casino Trade Name Attention To: Kelly Williams Title 5.b. Termination Date On-going 5.a. Name and Address of Employer (including trade name, if any). Employer Super Market Associates LLC Trade Name Attention To: Matthew Ray Title	P.O. Box, Bldg., Room No., if any Street 1080 N Delaware Avenue, 8th Floor City Philadelphia State Pennsylvania State Pennsylvania JIP Code + 4 19125 5.c. Amount 45, 911 Mailing Address: P.O. Box, Bldg., Room No., if any Street 533 Doherty Avenue City Modesto State California ZIP Code + 4 95354		
Employer Sugar House Casino Trade Name Attention To: Kelly Williams Title 5.b. Termination Date On-going 5.a. Name and Address of Employer (including trade name, if any). Employer Super Market Associates LLC Trade Name Attention To: Matthew Ray Title 5.b. Termination Date On-going	P.O. Box, Bldg., Room No., if any Street 1080 N Delaware Avenue, 8th Floor City Philadelphia State Pennsylvania State Pennsylvania Jup Code + 4 19125 5.c. Amount 45, 911 Mailing Address: P.O. Box, Bldg., Room No., if any Street 533 Doherty Avenue City Modesto State California ZIP Code + 4 95354 5.c. Amount 68, 500		
Employer Sugar House Casino Trade Name Attention To: Kelly Williams Title 5.b. Termination Date On-going 5.a. Name and Address of Employer (including trade name, if any). Employer Super Market Associates LLC Trade Name Attention To: Matthew Ray Title	P.O. Box, Bldq., Room No., if any Street 1080 N Delaware Avenue, 8th Floor City Philadelphia State Pennsylvania State Pennsylvania Jup Code + 4 19125 5.c. Amount 45, 911 Mailing Address: P.O. Box, Bldq., Room No., if any Street 533 Doherty Avenue City Modesto State California ZIP Code + 4 95354 5.c. Amount 68, 500 Mailing Address:		
Employer Sugar House Casino Trade Name Attention To: Kelly Williams Title 5.b. Termination Date On-going 5.a. Name and Address of Employer (including trade name, if any). Employer Super Market Associates LLC Trade Name Attention To: Matthew Ray Title 5.b. Termination Date On-going 5.a. Name and Address of Employer (including trade name, if any).	P.O. Box, Bldg., Room No., if any Street 1080 N Delaware Avenue, 8th Floor City Philadelphia State Pennsylvania State Pennsylvania Jup Code + 4 19125 5.c. Amount 45, 911 Mailing Address: P.O. Box, Bldg., Room No., if any Street 533 Doherty Avenue City Modesto State California ZIP Code + 4 95354 5.c. Amount 68, 500		
Employer Sugar House Casino Trade Name Attention To: Kelly Williams Title 5.b. Termination Date On-going 5.a. Name and Address of Employer (including trade name, if any). Employer Super Market Associates LLC Trade Name Attention To: Matthew Ray Title 5.b. Termination Date On-going	P.O. Box, Bldq., Room No., if any Street 1080 N Delaware Avenue, 8th Floor City Philadelphia State Pennsylvania ZIP Code + 4 19125 5.c. Amount 45, 911 Mailing Address: P.O. Box, Bldq., Room No., if any Street 533 Doherty Avenue City Modesto State California ZIP Code + 4 95354 5.c. Amount 68, 500 Mailing Address: P.O. Box, Bldq., Room No., if any		
Employer Sugar House Casino Trade Name Attention To: Kelly Williams Title 5.b. Termination Date On-going 5.a. Name and Address of Employer (including trade name, if any). Employer Super Market Associates LLC Trade Name Attention To: Matthew Ray Title 5.b. Termination Date On-going 5.a. Name and Address of Employer (including trade name, if any). Employer Super Market Associates LLC Trade Name Attention To: Matthew Ray Title 5.b. Termination Date On-going	P.O. Box, Bldg., Room No., if any Street 1080 N Delaware Avenue, 8th Floor City Philadelphia State Pennsylvania ZIP Code + 4 19125 5.c. Amount 45, 911 Mailing Address: P.O. Box. Bldg., Room No., if any Street 533 Doherty Avenue City Modesto State California ZIP Code + 4 95354 5.c. Amount 68, 500 Mailing Address: P.O. Box. Bldg., Room No., if any PO Box 9224		
Employer Sugar House Casino Trade Name Attention To: Kelly Williams Title 5.b. Termination Date On-going 5.a. Name and Address of Employer (including trade name, if any). Employer Super Market Associates LLC Trade Name Attention To: Matthew Ray Title 5.b. Termination Date On-going 5.a. Name and Address of Employer (including trade name, if any). Employer Sysco Food Services of Columbia, LLC Trade Name	P.O. Box, Bldq., Room No., if any Street 1080 N Delaware Avenue, 8th Floor City Philadelphia State Pennsylvania ZIP Code + 4 19125 5.c. Amount 45, 911 Mailing Address: P.O. Box, Bldq., Room No., if any Street 533 Doherty Avenue City Modesto State California ZIP Code + 4 95354 5.c. Amount 68, 500 Mailing Address: P.O. Box, Bldq., Room No., if any PO Box 9224 Street 131 Sysco Court		

Name of Person Fil	ling: Peter List	File Numbe	er C- 00322
B. Statement of R	Receipts Report all receipts from employers in connection values or services.	th labor relations advice or services rega	ordless of the purposes of the
5.a. Name and Add	dress of Employer (including trade name, if any).	Mailing Address:	
5 ISV	sco South Florida Inc	P.O. Box, Bldg., Room No., if any *NOTE 2 - See addend	Im
Trade Name		Street 12500 Sysco Way, NW	
l i	John Abreu	City Medley	112th Avenue
Title	Je janea	State Florida	ZIP Code + 4 33178
		1202200	33170
5.b. Termination Da		5.c. Amount 69 , 8:75	
5.a. Name and Add	lress of Employer (including trade name, if any).	Mailing Address: P.O. Bo <u>x, Bldg., Room No., if any</u>	
Employer Tre	ench Plate Rental Company	. S. Do <u>x, Digg., Room No., II any</u>	
Trade Name		Street 13217 Laureldale Ave	nue
Attention To:	William Fick	City Downey	
Title		State California	ZIP Code + 4 90242
5.b. Termination Da	- On-going	5.c. Amount 42, 566	
5.b. Termination Da	ate on-going	5.c. Amount 42,556	
5.a. Name and Add	fress of Employer (including trade name, if any).	Mailing Address: P.O. Box. Bldg Room No if any	
Employer The	e Tri-M Group, LLC	P.O. BOX. Bidd., ROOM No., II any	
Trade Name		Street 206 Gale Lane	
Attention To:	Amanda Novak	City Kennett Square	
Title		State Pennsylvania	ZIP Code + 4 19348
ļ <u>'</u>		<u> </u>	لسحم است
5.b. Termination Da	ate 6/30/17	5.c. Amount 5 , 465	
		Land Control of the C	
5.a. Name and Add	lress of Employer (including trade name, if any).	5.c. Amount 5, 465 Mailing Address: P.O. Box, Bldg., Room No., if any	
5.a. Name and Add		Mailing Address: P.O. Box, Bldg., Room No., if any	
5.a. Name and Add Employer Trade Name	ress of Employer (including trade name, if any).	Mailing Address:	
5.a. Name and Add	ress of Employer (including trade name, if any).	Mailing Address: P.O. Box, Bldg., Room No., if any	
5.a. Name and Add Employer Trade Name	ress of Employer (including trade name, if any).	Mailing Address: P.O. Box, Bldg, Room No., if any Street 225 Williamson Street	ZIP Code + 4 07207
5.a. Name and Add Employer Trade Name Attention To:	Iress of Employer (including trade name, if any). initas Regional Medical Center Glenn E Nacion	Mailing Address: P.O. Box, Bldq., Room No., if any Street 225 Williamson Street City Elizabeth	
5.a. Name and Add Employer Trade Name Attention To: Title 5.b. Termination Date	Iress of Employer (including trade name, if any). initas Regional Medical Center Glenn E Nacion	Mailing Address: P.O. Box, Bldg, Room No., if any Street 225 Williamson Street City Elizabeth State New Jersey 5.c. Amount 6,934 Mailing Address:	
5.a. Name and Add Employer Trade Name Attention To: Title 5.b. Termination Da 5.a. Name and Add	Iress of Employer (including trade name, if any). initas Regional Medical Center Glenn E Nacion ate 4/30/17 Iress of Employer (including trade name, if any).	Mailing Address: P.O. Box, Bldg, Room No., if any Street 225 Williamson Street City Elizabeth State New Jersey 5.c. Amount 6,934	
5.a. Name and Add Employer Trade Name Attention To: Title 5.b. Termination Date Sa. Name and Add Employer Unit	Iress of Employer (including trade name, if any). initas Regional Medical Center Glenn E Nacion ate 4/30/17 Iress of Employer (including trade name, if any). ited Natural Foods, Inc.	Mailing Address: P.O. Box, Bldg., Room No., if any Street 225 Williamson Street City Elizabeth State New Jersey 5.c. Amount 6, 934 Mailing Address: P.O. Box, Bldg., Room No., if any	
5.a. Name and Add Employer Trade Name Attention To: Title 5.b. Termination Da 5.a. Name and Add Employer United	Iress of Employer (including trade name, if any). initas Regional Medical Center Glenn E Nacion ate 4/30/17 Iress of Employer (including trade name, if any). ited Natural Foods, Inc. Albert's Organics	Mailing Address: P.O. Box, Bldg, Room No., if any Street 225 Williamson Street City Elizabeth State New Jersey 5.c. Amount 6, 934 Mailing Address: P.O. Box, Bldg, Room No., if any Street 313 Iron Horse Way	
5.a. Name and Add Employer Trade Name Attention To: Title 5.b. Termination Da 5.a. Name and Add Employer Uni Trade Name Attention To:	Iress of Employer (including trade name, if any). initas Regional Medical Center Glenn E Nacion ate 4/30/17 Iress of Employer (including trade name, if any). ited Natural Foods, Inc. Albert's Organics	Mailing Address: P.O. Box, Bldg., Room No., if any Street 225 Williamson Street City Elizabeth State New Jersey 5.c. Amount 6,934 Mailing Address: P.O. Box, Bldg., Room No., if any Street 313 Iron Horse Way City Providence	ZIP Code + 4 07207
5.a. Name and Add Employer Trade Name Attention To: Title 5.b. Termination Da 5.a. Name and Add Employer United	Iress of Employer (including trade name, if any). initas Regional Medical Center Glenn E Nacion ate 4/30/17 Iress of Employer (including trade name, if any). ited Natural Foods, Inc. Albert's Organics	Mailing Address: P.O. Box, Bldg, Room No., if any Street 225 Williamson Street City Elizabeth State New Jersey 5.c. Amount 6, 934 Mailing Address: P.O. Box, Bldg, Room No., if any Street 313 Iron Horse Way	
5.a. Name and Add Employer Trade Name Attention To: Title 5.b. Termination Da 5.a. Name and Add Employer Uni Trade Name Attention To:	Iress of Employer (including trade name, if any). initas Regional Medical Center Glenn E Nacion ate 4/30/17 Iress of Employer (including trade name, if any). ited Natural Foods, Inc. Albert's Organics Joseph Traficanto	Mailing Address: P.O. Box, Bldg., Room No., if any Street 225 Williamson Street City Elizabeth State New Jersey 5.c. Amount 6,934 Mailing Address: P.O. Box, Bldg., Room No., if any Street 313 Iron Horse Way City Providence	ZIP Code + 4 07207
5.a. Name and Add Employer Trade Name Attention To: Title 5.b. Termination Da 5.a. Name and Add Employer United Trade Name Attention To: Title Attention To: Title 5.b. Termination Da	Iress of Employer (including trade name, if any). initas Regional Medical Center Glenn E Nacion ate 4/30/17 Iress of Employer (including trade name, if any). ited Natural Foods, Inc. Albert's Organics Joseph Traficanto	Mailing Address: P.O. Box, Bldg, Room No., if any Street 225 Williamson Street City Elizabeth State New Jersey 5.c. Amount 6, 934 Mailing Address: P.O. Box, Bldg, Room No., if any Street 313 Iron Horse Way City Providence State Rhode Island 5.c. Amount 53, 700 Mailing Address:	ZIP Code + 4 07207
5.a. Name and Add Employer Trade Name Attention To: In Title 5.b. Termination Date Trade Name Attention To: In Trade Name Attention To: In Trade Name Attention To: In Title 5.b. Termination Date To: In Title 5.b. Termination Date To: In Title 5.b. Termination Date To: In Title	Iress of Employer (including trade name, if any). initas Regional Medical Center Glenn E Nacion ate 4/30/17 Iress of Employer (including trade name, if any). ited Natural Foods, Inc. Albert's Organics Joseph Traficanto ate 10/31/17 Iress of Employer (including trade name, if any).	Mailing Address: P.O. Box, Bldg, Room No., if any Street 225 Williamson Street City Elizabeth State New Jersey 5.c. Amount 6, 934 Mailing Address: P.O. Box, Bldg, Room No., if any Street 313 Iron Horse Way City Providence State Rhode Island 5.c. Amount 53,700	ZIP Code + 4 07207
5.a. Name and Add Employer Trade Name Attention To: Title 5.b. Termination Da Employer Uni Trade Name Attention To: Title 5.b. Termination Da 5.a. Name and Add Employer Uni Trade Name Attention To: Title 5.b. Termination Da 5.a. Name and Add Employer Uni	Iress of Employer (including trade name, if any). Initial Regional Medical Center Glenn E Nacion ate 4/30/17 Iress of Employer (including trade name, if any). Ited Natural Foods, Inc. Albert's Organics Joseph Traficanto ate 10/31/17 Iress of Employer (including trade name, if any). Ited Natural Foods, Inc.	Mailing Address: P.O. Box, Bldg., Room No., if any Street 225 Williamson Street City Elizabeth State New Jersey 5.c. Amount 6,934 Mailing Address: P.O. Box, Bldg., Room No., if any Street 313 Iron Horse Way City Providence State Rhode Island 5.c. Amount 53,700 Mailing Address: P.O. Box, Bldg., Room No., if any	ZIP Code + 4 07207
5.a. Name and Add Employer Trade Name Attention To: In Title 5.b. Termination Date Trade Name Attention To: In Trade Name Attention To: In Title 5.b. Termination Date Trade Name Attention Date In Title 5.b. Termination Date In Title 5.c. Name and Add Employer Unit In Title	Iress of Employer (including trade name, if any). initas Regional Medical Center Glenn E Nacion ate 4/30/17 Iress of Employer (including trade name, if any). ited Natural Foods, Inc. Albert's Organics Joseph Traficanto ate 10/31/17 Iress of Employer (including trade name, if any). ited Natural Foods, Inc. (Moreno Valley CA)	Mailing Address: P.O. Box, Bldg, Room No., if any Street 225 Williamson Street City Elizabeth State New Jersey 5.c. Amount 6, 934 Mailing Address: P.O. Box, Bldg, Room No., if any Street 313 Iron Horse Way City Providence State Rhode Island 5.c. Amount 53, 700 Mailing Address: P.O. Box, Bldg, Room No., if any Street 313 Iron Horse Way Street 313 Iron Horse Way	ZIP Code + 4 07207
5.a. Name and Add Employer Trade Name Attention To: Title 5.b. Termination Da 5.a. Name and Add Employer United Name Attention To: Title 5.b. Termination Da 5.a. Name and Add Employer United Name Attention To: Title 5.b. Termination Da 5.a. Name and Add Employer United Name Attention To: Trade Name Attention To:	Iress of Employer (including trade name, if any). initas Regional Medical Center Glenn E Nacion ate 4/30/17 Iress of Employer (including trade name, if any). ited Natural Foods, Inc. Albert's Organics Joseph Traficanto ate 10/31/17 Iress of Employer (including trade name, if any). ited Natural Foods, Inc. (Moreno Valley CA)	Mailing Address: P.O. Box, Bldg., Room No., if any Street 225 Williamson Street City Elizabeth State New Jersey 5.c. Amount 6, 934 Mailing Address: P.O. Box, Bldg., Room No., if any Street 313 Iron Horse Way City Providence State Rhode Island 5.c. Amount 53, 700 Mailing Address: P.O. Box, Bldg., Room No., if any Street 313 Iron Horse Way City Providence State Rhode Island 5.c. Amount 53, 700	ZIP Code + 4 07207
5.a. Name and Add Employer Trade Name Attention To: In Title 5.b. Termination Date Trade Name Attention To: In Trade Name Attention To: In Title 5.b. Termination Date Trade Name Attention Date In Title 5.b. Termination Date In Title 5.c. Name and Add Employer Unit In Title	Iress of Employer (including trade name, if any). initas Regional Medical Center Glenn E Nacion ate 4/30/17 Iress of Employer (including trade name, if any). ited Natural Foods, Inc. Albert's Organics Joseph Traficanto ate 10/31/17 Iress of Employer (including trade name, if any). ited Natural Foods, Inc. (Moreno Valley CA) Joseph Traficanti	Mailing Address: P.O. Box, Bldg, Room No., if any Street 225 Williamson Street City Elizabeth State New Jersey 5.c. Amount 6, 934 Mailing Address: P.O. Box, Bldg, Room No., if any Street 313 Iron Horse Way City Providence State Rhode Island 5.c. Amount 53, 700 Mailing Address: P.O. Box, Bldg, Room No., if any Street 313 Iron Horse Way Street 313 Iron Horse Way	ZIP Code + 4 07207

Name of Person Filing: Peter List			File Number C	-00322
B. Statement of Receipts Report all receipts from employers in connection	with labor r	elations advice o	r services regardle	ess of the purposes of the
advice or services. 5.a. Name and Address of Employer (including trade name, if any). Mailing Address:				
This is a National Baseline Tourist Control of the	,P.O. B	ox, Bldg., Room N	lo., if any	
Employer United Natural Foods, Inc.				
Trade Name (Chesterfield NH)			orse Way	7
Attention To: Joseph Traficanti	City	Providence]
Title	State	Rhode Islar	id	ZIP Code + 4 02908
5.b. Termination Date 9/30/17	5.c. Amo	ount 47,930		
5.a. Name and Address of Employer (including trade name, if any).	P.O. Bo	Mailing Addres		
Employer United Natural Foods, Inc.			, , , , , , , , , , , , , , , , , , ,	
Trade Name (Ridgefield WA)	Street	313 Iron Ho	rse Way	
Attention To: Joseph Traficanti	City	Providence		
Title	State	Rhode Islan	đ	ZIP Code + 4 02908
5.b. Termination Date On-going	5 c Am	ount 54,,318		
	3.C. Aire			
5.a. Name and Address of Employer (including trade name, if any).	PO B	Mailing Addres ox. Bldg Room N		
Employer Jacobsen Companies-Contract Logistics	1 .0. 0.	PO Box 1836		
Trade Name d/b/a XPO Logistics, Inc. (MI)	Street			
Attention To: Richard Valitutto	City	Greensboro		
Title	State	North Carol	ina	ZIP Code + 4 27419
5.b. Termination Date On-going		ount 1,897		, l
5.a. Name and Address of Employer (including trade name, if any).	<u> </u>	Mailing Addres	ss:	
	P.O. B	ox, Blda., Room N		
Employer XPO-CNW, Inc.				
Trade Name d/b/a XPO Logistics, Inc. (CT)	Street	2211 Old Ea	rhart Road	
Attention To: Richard Valitutto	City	Ann Arbor		
Title	State	Michigan		ZIP Code + 4 48105
5.b. Termination Date 10/31/16	5.c. Amo	ount 198, 789		
5.a. Name and Address of Employer (including trade name, if any).		Mailing Addres	SS:	
Con Wall Bright The (Condeshare NT)	P.O. Bo	ox. Blda Room N	lo <u>if anv</u>	
Employer Con-Way Freight, Inc. (Swedesboro NJ)		0011 011 7-	olerate preside	
Trade Name XPO Logistics Supply Chain, Inc.		2211 Old Ea	rnart Koad	7
Attention To: Richard Valitutto		Ann Arbor]] 710 Code : 4
Title	State	Michigan		ZIP Code + 4 48105
5.b. Termination Date 11/30/16	5.c. Amo	ount 8,924		
5.a. Name and Address of Employer (including trade name, if any).	•	Mailing Addres		
Employer XPO Logistics Freight, Inc. (GA)	P.O. B	ox. Blda . Room N	lo., if anv	
		2217 01-7-	rhart Bood	
Trade Name		2211 Old Ea	Inarc Road	
Attention To: Bruce Moss Title	-	Ann Arbor Michigan .		ZIP Code + 4 48105
5.b. Termination Date 10/31/16		ount 45, 032		J

Name of Person Filing: Peter List	File Number C- 00322			
B. Statement of Receipts Report all receipts from employers in connection with labor relations advice or services regardless of the purposes of the advice or services.				
5.a. Name and Address of Employer (including trade name, if any). Mailing Address:				
Employer CNWY Transport	P.O. Box, Bldg., Room No., if any			
	Street 2211 Old Earhart Road			
Trade Name d/b/a XPO Logistics, Inc. (GA) Attention To: Bruce Moss				
Attention To: Bruce Moss				
	State Michigan ZIP Code + 4 48105			
5.b. Termination Date 10/31/16	5.c. Amount 83-, 245			
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, <u>Bldg., Room No., if any</u>			
Employer CNWY Transport				
Trade Name d/b/a XPO Logistics, Inc. (VT)	Street 2211 Old Earhart Road			
Attention To: Bruce Moss	City Ann Arbor			
Title	State Michigan ZIP Code + 4 48105			
5.b. Termination Date 11/30/16	5.c. Amount 17, 632			
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:			
Employer Con-Way Freight, Inc. (Atlanta GA)	P.O. Box, Bldg., Room No., if any			
	Street 2211 Old Earhart Road			
Trace reality	**************************************			
Attention To: Dan Egeler	City Ann Arbor			
Title	State Michigan ZIP Code + 4 48105			
5.b. Termination Date 2/28/17	5.c. Amount 6 , 7,55			
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Bldg., Room No., if any			
Employer Con-Way Freight, Inc. (Birmingham AL)				
Trade Name d/b/a XPO Logistics, Inc.	Street 2211 Old Earhart Road			
Attention To: Dan. Egeler	City Ann Arbor			
Title	State Michigan ZIP Code + 4 48105			
5.b. Termination Date $\hat{f}^2/28/17$	5.c. Amount 28, 749			
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Bldg., Room No., if any			
Employer Con-Way Freight, Inc. (South Boston MA)				
Trade Name d/b/a XPO Logistics, Inc.	Street 2211 Old Earhart Road			
Attention To: Dan Egeler	City Ann Arbor			
Title	State Michigan ZIP Code + 4 48105			
5.b. Termination Date 12'/3'1/16	5.c. Amount 17,741			
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:			
	P.O. Box, Bldg., Room No., if any			
Employer Con-Way Freight, Inc. (Charleston SC)				
Trade Name d/b/a XPO Logistics Supply, Inc.	Street 2211 Old Earhart Road			
Attention To: Dan Egeler	City Ann Arbor			
Title	State Michigan ZIP Code + 4 48105			
5.b. Termination Date 2/28/17	5.c. Amount 17, 147			

Name of Person Filing: Peter List		File N	lumber C- (00322
B. Statement of Receipts Report all receipts from employers in connection valvice or services.	with labor i	relations advice or services	s regardles:	s of the purposes of the
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:		
Employer Con-Way Freight, Inc. (Cinnaminson NJ)	P.O. B	ox, Bldg., Room No., if any		
promise - 121 - 12	i Street	2011 012 Parkers	D 2'	
Trade Name d/b/a XPO Logistics, Inc.	City	2211 Old Earhart	Road	
Attention To: Dan Egeler Title	State	Ann Arbor		ZIP Code + 4 48105
Title	State	Michigan		21F Code + 4 [481.05]
5.b. Termination Date 2/28/17	5.c. Amo	ount 7,864		
5.a. Name and Address of Employer (including trade name, if any).	PO B	Mailing Address: ox, Bldg., Room No., if any	,	
Employer XPO Logistics Freight, Inc.	1.0.0	, <u>51341, 13311, 1311,</u>		
Trade Name (El Paso TX)	Street	2211 Old Earhart	Road	
Attention To: Dan Egèler	City	Ann Arbor		
Title	State	Michigan		ZIP Code + 4 48105
				<u> </u>
5.b. Termination Date On-going	5.c. Am	ount [150,345	<u></u>	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:		
Employer Con-Way Freight Inc. (El Paso TX)	P.O. B	ox, Blda., Room No., if any	<i></i>	
Trade Name d/b/a XPO Logistics Freight, Inc.	i Stroot	2211 Old Earhart	Road	
Attention To: Dan Egeler	City	Ann Arbor		
Title	State	<u> </u>		ZIP Code + 4 48105
	···	Michigan		0000 . [46405
5.b. Termination Date On-going	5.c. Amo	ount 60,268		
5.a. Name and Address of Employer (including trade name, if any).	P.O. B	Mailing Address: ox, Bldg., Room No., if any	<i>(</i>	
Employer Con-Way Freight, Inc. (Glen Mills PA)				
Trade Name d/b/a XPO Logistics Freight, Inc.	Street	2211 Old Earhart	Road	
Attention To: Dan Egeler	City	Ann Arbor		
Title	State	Michigan		ZIP Code + 4 48105
51 T 0 . 12/29/17	- A			<u> </u>
5.b. Termination Date 2/.28/17	5.C. Am	ount 84,718		
5.a. Name and Address of Employer (including trade name, if any).	D O B	Mailing Address: ox, Bldg., Room No., if any		
Employer XPO Logistics Supply Chain, Inc.		ox. <u>Bidd., Room No., ii all</u> y		
Trade Name (Lockport NY)	Street	2211 Old Earhart	Road	
Attention To: Dan Egeler		Ann Arbor		
Title				ZIP Code + 4 48105
	State	Michigan	1 .	
	Т	Michigan		[40103
5.b. Termination Date 12/31/16	r	Michigan ount 7,554		10103
5.b. Termination Date 12/31/16 5.a. Name and Address of Employer (including trade name, if any).	5.c. Am	ount 7,554 Mailing Address:		10103
5.a. Name and Address of Employer (including trade name, if any).	5.c. Am	ount 7,554		7
5.a. Name and Address of Employer (including trade name, if any). Employer XPO Logistics Freight, Inc.	5.c. Amo	ount 7,554 Mailing Address: ox. Bldg Room No if any	<u> </u>	
5.a. Name and Address of Employer (including trade name, if any). Employer XPO Logistics Freight, Inc. Trade Name (Baltimore MD)	5.c. Ame	Mailing Address: ox. Blda Room No if anv	<u> </u>	
5.a. Name and Address of Employer (including trade name, if any). Employer XPO Logistics Freight, Inc. Trade Name (Baltimore MD) Attention To: Dan Egeler	P.O. B. Street City	Mailing Address: ox. Bida Room No if anv 2211 Old Earhart Ann Arbor	Road	
5.a. Name and Address of Employer (including trade name, if any). Employer XPO Logistics Freight, Inc. Trade Name (Baltimore MD)	P.O. B. Street City State	Mailing Address: ox. Blda Room No if anv	Road	ZIP Code + 4 48105

Name of Person Filing: Peter List		File Number C	- 003:22
B. Statement of Receipts Report all receipts from employers in connection value advice or services.	vith labor r	relations advice or services regardle	ess of the purposes of the
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer XPO Logistics Freight, Inc. (NY)	P.O. B	ox, Bldg., Room No., if any	Topographic Control of the Control o
Trade Name d/b/a XPO Logistics Supply Inc.	Street	2211 Old Earhart Road	
Attention To: Dan Eggeler	City	Ann Arbor	1
Title	State	Michigan	ZIP Code + 4 48105
			48105
5.b. Termination Date 12/31/16	5.c. Amo	ount 8,653	
5.a. Name and Address of Employer (including trade name, if any).	BO B	Mailing Address:	
Employer Con-Way Freight, Inc. (San Bernadino CA)	P.O. B	ox, Bldg., Room No., if any	
Trade Name id/b/a XPO Logistics Freight, Inc.	Street	2211 Old Earhart Road	
Attention To: Dan, Egeler	City	Ann Arbor	A CONTRACTOR OF THE PROPERTY O
Title	State	Michigan	ZIP Code + 4 48105
10/01/16			
5.b. Termination Date 12/31/16	5.c. Amo	ount [13,138	
5.a. Name and Address of Employer (including trade name, if any).	D 0 D	Mailing Address:	
Employer Con-Way Freight, Inc. (Trenton NJ)	г.О. В	ox. Bldg., Room No., if anv	
Trade Name d/b/a XPO Logistics Freight, Inc.	Street	2211 Old Earhart Road	
Attention To: Dan Egeler		Ann Arbor	
Title	State	Michigan	ZIP Code + 4 48105
			10.103
5.b. Termination Date 2/28/17	5.c. Amo	ount [11, 121	
5.a. Name and Address of Employer (including trade name, if any).	D O D	Mailing Address:	
	P.O. B	ox, Bldg., Room No., if any	
Employer (Con-Way Freight, Inc. (Vineland NJ)	1)	į.
Employer Con-Way Freight, Inc. (Vineland NJ)	Street	2211 Old Earhart Road	
Trade Name d/b/a XPO Logistics Freight, Inc.		2211 Old Earhart Road	1
Trade Name d/b/a XPO Logistics Freight, Inc. Attention To: Dan Egeler	City	Ann Arbor	ZIP Code + 4 4 9 1 0 5
Trade Name d/b/a XPO Logistics Freight, Inc. Attention To: Dan Egeler Title	City State	Ann Arbor Michigan	ZIP Code + 4 48105
Trade Name d/b/a XPO Logistics Freight, Inc. Attention To: Dan Egeler	City State	Ann Arbor	ZIP Code + 4 48105
Trade Name d/b/a XPO Logistics Freight, Inc. Attention To: Dan Egeler Title	City State 5.c. Ame	Ann Arbor Michigan ount 5,216 Mailing Address:	ZIP Code + 4 48105
Trade Name d/b/a XPO Logistics Freight, Inc. Attention To: Dan Egeler Title 5.b. Termination Date 2/18/17 5.a. Name and Address of Employer (including trade name, if any).	City State 5.c. Ame	Ann Arbor Michigan ount 5,216	ZIP Code + 4 48105
Trade Name d/b/a XPO Logistics Freight, Inc. Attention To: Dan Egeler Title 5.b. Termination Date 2/18/17 5.a. Name and Address of Employer (including trade name, if any). Employer Carlow University	City State 5.c. Ame	Ann Arbor Michigan ount 5,216 Mailing Address: ox. Bldg Room No if any	
Trade Name d/b/a XPO Logistics Freight, Inc. Attention To: Dan Egeler Title 5.b. Termination Date 2/18/17 5.a. Name and Address of Employer (including trade name, if any). Employer Carlow University Trade Name	City State 5.c. Ame	Ann Arbor Michigan ount 5,216 Mailing Address: ox. Bldd Room No if anv	
Trade Name d/b/a XPO Logistics Freight, Inc. Attention To: Dan Egeler Title 5.b. Termination Date 2/18/17 5.a. Name and Address of Employer (including trade name, if any). Employer Carlow University Trade Name Attention To: Brigette N Cofield	City State 5.c. Ame P.O. Book Street City	Ann Arbor Michigan ount 5,216 Mailing Address: ox. Bldg. Room No. if any 3333 Fifth Avenue, 2nd Pittaburgh	Fl West Wing
Trade Name	City State 5.c. Ame P.O. B Street City State	Ann Arbor Michigan ount 5,216 Mailing Address: ox.BlddRoom.Noif.anv 3333 Fifth Avenue, 2nd Pittaburgh Pennsylvania	
Trade Name d/b/a XPO Logistics Freight, Inc. Attention To: Dan Egeler Title 5.b. Termination Date 2/18/17 5.a. Name and Address of Employer (including trade name, if any). Employer Carlow University Trade Name Attention To: Brigette N Cofield	City State 5.c. Ame P.O. Book Street City	Ann Arbor Michigan ount 5,216 Mailing Address: ox.BlddRoom.Noif.anv 3333 Fifth Avenue, 2nd Pittaburgh Pennsylvania	Fl West Wing
Trade Name	City State 5.c. Ame P.O. B Street City State 5.c. Ame	Ann Arbor Michigan ount 5,216 Mailing Address: ox.BlddRoom.Noif.anv 3333 Fifth Avenue, 2nd Pittaburgh Pennsylvania ount 0 Mailing Address:	Fl West Wing
Trade Name d/b/a XPO Logistics Freight, Inc. Attention To: Dan Egeler Title 5.b. Termination Date 2/18/17 5.a. Name and Address of Employer (including trade name, if any). Employer Carlow University Trade Name Attention To: Brigette N Cofield Title 5.b. Termination Date 11/30/17 5.a. Name and Address of Employer (including trade name, if any).	City State 5.c. Ame P.O. B Street City State 5.c. Ame	Ann Arbor Michigan ount 5,216 Mailing Address: ox.BlddRoom.Noif.anv 3333 Fifth Avenue, 2nd Pittaburgh Pennsylvania ount 0	Fl West Wing
Trade Name d/b/a XPO Logistics Freight, Inc. Attention To: Dan Egeler Title 5.b. Termination Date 2/18/17 5.a. Name and Address of Employer (including trade name, if any). Employer Carlow University Trade Name Attention To: Brigette N Cofield Title 5.b. Termination Date 11/30/17 5.a. Name and Address of Employer (including trade name, if any). Employer DaVita Inc.	City State 5.c. Ame P.O. B Street City State 5.c. Ame	Ann Arbor Michigan ount 5,216 Mailing Address: ox. Bldg Room No if any 3333 Fifth Avenue, 2nd Pittaburgh Pennsylvania ount 0 Mailing Address: ox. Bldg Room No if any	Fl West Wing ZIP Code + 4 15213
Trade Name	P.O. B. Street 5.c. Ame	Ann Arbor Michigan ount 5,216 Mailing Address: ox. Bldd Room.Noif.anv 3333 Fifth Avenue, 2nd Pittaburgh Pennsylvania ount 0 Mailing Address: ox. Bldg Room.Noif.anv	Fl West Wing ZIP Code + 4 15213
Trade Name d/b/a XPO Logistics Freight, Inc. Attention To: Dan Egeler Title 5.b. Termination Date 2/18/17 5.a. Name and Address of Employer (including trade name, if any). Employer Carlow University Trade Name Attention To: Brigette N Cofield Title 5.b. Termination Date 11/30/17 5.a. Name and Address of Employer (including trade name, if any). Employer DaVita Inc.	City State 5.c. Ame P.O. B Street City State 5.c. Ame	Ann Arbor Michigan ount 5,216 Mailing Address: ox. Bldg Room No if any 3333 Fifth Avenue, 2nd Pittaburgh Pennsylvania ount 0 Mailing Address: ox. Bldg Room No if any 15271 Laguna Canyon Roa Irvine	Fl West Wing ZIP Code + 4 15213
Trade Name	City State 5.c. Ame P.O. B Street City State 5.c. Ame P.O. B Street City City	Ann Arbor Michigan ount 5,216 Mailing Address: ox.Bldd.Room.Noif.any 3333 Fifth Avenue, 2nd Pittaburgh Pennsylvania ount 0 Mailing Address: ox.Bldd.Room.Noif.any 15271 Laguna Canyon Roa Irvine California	Fl West Wing ZIP Code + 4 15213

Name of Person Filing: Peter List				File Number C	-00322
B. Statement of Receipts Report all readvice or servi		with labor i	relations advice or s	services regardle	ess of the purposes of the
5.a. Name and Address of Employer (inc			Mailing Address		
Employer Security Guard 1	Tha	_P .O. B	ox, Bldg., Room No	o., if any	
· · · · · · · · · · · · · · · · · · ·		l Stroot	L Chart		
Trade Name d/b/a Imperia			1142 E Chest	nut Avenue	
Attention To: Cheryl	Chalow	City State	Vineland		ZIP Code + 4 08360
Title		State	New Jersey		JZIF Code + 4 [083,60
5.b. Termination Date On-going		5.c. Amo	ount 0		
5.a. Name and Address of Employer (inc	cluding trade name, if any).	PO B	Mailing Address ox, Bldg., Room No		
Employer P&B Intermodal S	Services				
Trade Name		Street	22 Hudson Pl	ace, 3rd Fl	
Attention To: Dale	Bartley	City	Hoboken		
Title	<u> </u>	State	New Jersey		ZIP Code + 4 07030
5.b. Termination Date On-going		5.c. Am	ount 0	1	
5.a. Name and Address of Employer (inc	cluding trade name, if any)		Mailing Address		
	, ,,	P.O. B	ox. Bldg Room No		
Employer Vivid Mechanical	l LLC				
Trade Name		Street	4539 Davis S	treet	
Attention To: Ernest	I Henick	City	Long Island	City	
Title		State	New York		ZIP Code + 4 11101
5.b. Termination Date On-going		5.c. Amo	ount 0		
5.a. Name and Address of Employer (inc	cluding trade name, if any).	B O B	Mailing Address		
Employer Albert Einstein	Medical Center	Р.О. В	ox, Bldg., Room No)., <u>11 arty</u>	
Trade Name		Street	5501 Old Yor	k Road	
Attention To: Sally	Chmielewski	City	Philadelphia]
Title	JL	State	Pennsylvania		ZIP Code + 4 19141
		1	p	·	19141
5.b. Termination Date On-going		5.c. Am	ount 0		-
5.a. Name and Address of Employer (inc	cluding trade name, if any).	D O B	Mailing Address		
Employer Becton Dickinson	i	Р.О. В	ox. Blda., Room No) <u>II aliv</u>	
Trade Name d/b/a BD Medic		Street	Route 7 & Gr	ace Wav	
Attention To: Heather	Waddell	City	Canaan		1
Title			Connecticut	- All and a second	ZIP Code + 4 06018
		·			
5.b. Termination Date 9/30/17		5.c. Am	ount 0		
5.a. Name and Address of Employer (inc	cluding trade name, if any).	<u>. </u>	Mailing Address		
Employer Cargill Meat Sol	lutions Inc.	P.O. B	ox. Blda Room No	oif_anv	
			434 18th Av	enue Sw	
Trade Name	· Image and · ·			CITUE DA	
Attention To: Tanya	Teeter		Fargo		ZIP Code + 4 5.8103
Title		State	North Dakota		1211 Code + 4 58103
5.b. Termination Date 12/31/17			ount 0		

Name of Person Filing: Peter List	File Number C- 00322
B. Statement of Receipts Report all receipts from employers in connection advice or services.	with labor relations advice or services regardless of the purposes of the
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:
Employer Saint-Gobain Corporation	P.O. Box, Bldg., Room No., if any
grant to the state of the state	Street 1999 I Washington
Trade Name d/b/a Certainteed Corporation	Street 2901 North Kaufman Street
Attention To: Robert Cohen	City Ennis
Title	State Texas ZIP Code + 4 75119
5.b. Termination Date On-going	5.c. Amount 0
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Bldg., Room No., if any
Employer CMC Logistics LLC	
Trade Name	Street 2396-A Aviation Avenue
Attention To: Kenneth Skipper	City North Charleston
Title	State South Carolina ZIP Code + 4 29406
5.b. Termination Date 12/31/17	5.c. Amount 0
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:
Employer Coca-Cola Bottling Co-Consolidated	P.O. Box, Bldg., Room No., if any
	1100 George Galler Plans
Trade Name	Street 4100 Coca-Cola Plaza
Attention To: Angela M French	City Charlotte
Title	State North Carolina ZIP Code + 4 28211
5.b. Termination Date On-going	5.c. Amount 0
5.b. Termination Date On-going 5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:
5.a. Name and Address of Employer (including trade name, if any).	
	Mailing Address:
5.a. Name and Address of Employer (including trade name, if any). Employer HP Hood LLC	Mailing Address: P.O. Box, Bldg., Room No., if any
5.a. Name and Address of Employer (including trade name, if any). Employer HP Hood LLC Trade Name	Mailing Address: P.O. Box, Bldg., Room No., if any Street 6 Kimball Lane City Lynnfield
5.a. Name and Address of Employer (including trade name, if any). Employer HP Hood LLC Trade Name Attention To: Title '	Mailing Address: P.O. Box, Bldg., Room No., if any Street 6 Kimball Lane City Lynnfield State Massachusetts ZIP Code + 4 01940
5.a. Name and Address of Employer (including trade name, if any). Employer HP Hood LLC Trade Name	Mailing Address: P.O. Box, Bldg., Room No., if any Street 6 Kimball Lane City Lynnfield
5.a. Name and Address of Employer (including trade name, if any). Employer HP Hood LLC Trade Name Attention To: Title '	Mailing Address: P.O. Box, Bldg., Room No., if any Street 6 Kimball Lane City Lynnfield State Massachusetts ZIP Code + 4 01940 5.c. Amount 0 Mailing Address:
5.a. Name and Address of Employer (including trade name, if any). Employer HP Hood LLC Trade Name Attention To: Title 5.b. Termination Date 5.a. Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Bldg., Room No., if any Street 6 Kimball Lane City Lynnfield State Massachusetts ZIP Code + 4 01940 5.c. Amount 0
5.a. Name and Address of Employer (including trade name, if any). Employer HP Hood LLC Trade Name	Mailing Address: P.O. Box, Bldg., Room No., if any Street 6 Kimball Lane City Lynnfield State Massachusetts ZIP Code + 4 01940 5.c. Amount 0 Mailing Address: P.O. Box, Bldg., Room No., if any
5.a. Name and Address of Employer (including trade name, if any). Employer HP Hood LLC Trade Name Attention To: Corey Jackson Title 5.b. Termination Date 12/31/17 5.a. Name and Address of Employer (including trade name, if any). Employer Hudson's Bay Company Trade Name d/b/a Saks Fifth Avenue	Mailing Address: P.O. Box, Bldg., Room No., if any Street 6 Kimball Lane City Lynnfield State Massachusetts ZIP Code + 4 01940 5.c. Amount 0 Mailing Address: P.O. Box, Bldg., Room No., if any Street 225 Liberty Street, 31st Floor
5.a. Name and Address of Employer (including trade name, if any). Employer HP Hood LLC Trade Name Attention To: Corey Jackson Title: 5.b. Termination Date 12/31/17 5.a. Name and Address of Employer (including trade name, if any). Employer Hudson's Bay Company Trade Name d/b/a Saks Fifth Avenue Attention To: Jessica Arnold	Mailing Address: P.O. Box, Bldg., Room No., if any Street 6 Kimball Lane City Lynnfield State Massachusetts ZIP Code + 4 01940 5.c. Amount 0 Mailing Address: P.O. Box, Bldg., Room No., if any Street 225 Liberty Street, 31st Floor City New York
5.a. Name and Address of Employer (including trade name, if any). Employer HP Hood LLC Trade Name Attention To: Corey Jackson Title 5.b. Termination Date 12/31/17 5.a. Name and Address of Employer (including trade name, if any). Employer Hudson's Bay Company Trade Name d/b/a Saks Fifth Avenue	Mailing Address: P.O. Box, Bldg., Room No., if any Street 6 Kimball Lane City Lynnfield State Massachusetts ZIP Code + 4 01940 5.c. Amount 0 Mailing Address: P.O. Box, Bldg., Room No., if any Street 225 Liberty Street, 31st Floor
5.a. Name and Address of Employer (including trade name, if any). Employer HP Hood LLC Trade Name Attention To: 5.b. Termination Date 5.a. Name and Address of Employer (including trade name, if any). Employer	Mailing Address: P.O. Box, Bldg., Room No., if any Street 6 Kimball Lane City Lynnfield State Massachusetts ZIP Code + 4 01940 5.c. Amount 0 Mailing Address: P.O. Box, Bldg., Room No., if any Street 225 Liberty Street, 31st Floor City New York
5.a. Name and Address of Employer (including trade name, if any). Employer HP Hood LLC Trade Name Attention To: Corey Jackson Title 5.b. Termination Date 12/31/17 5.a. Name and Address of Employer (including trade name, if any). Employer Hudson's Bay Company Trade Name d/b/a Saks Fifth Avenue Attention To: Jessica Arnold Title	Mailing Address: P.O. Box, Bldg., Room No., if any Street 6 Kimball Lane City Lynnfield State Massachusetts ZIP Code + 4 01940 5.c. Amount 0 Mailing Address: P.O. Box, Bldg., Room No., if any Street 225 Liberty Street, 31st Floor City New York State New York State New York ZIP Code + 4 10281 5.c. Amount 0 Mailing Address:
5.a. Name and Address of Employer (including trade name, if any). Employer HP Hood LLC Trade Name Attention To: Corey Jackson Title: 5.b. Termination Date 12/31/17 5.a. Name and Address of Employer (including trade name, if any). Employer Hudson's Bay Company Trade Name d/b/a Saks Fifth Avenue Attention To: Jessica Arnold Title 5.b. Termination Date On-going 5.a. Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Bldg., Room No., if any Street 6 Kimball Lane City Lynnfield State Massachusetts ZIP Code + 4 01940 5.c. Amount 0 Mailing Address: P.O. Box, Bldg., Room No., if any Street 225 Liberty Street, 31st Floor City New York State New York State New York ZIP Code + 4 10281
5.a. Name and Address of Employer (including trade name, if any). Employer HP Hood LLC Trade Name Attention To: Corey Jackson Title 5.b. Termination Date 12/31/17 5.a. Name and Address of Employer (including trade name, if any). Employer Hudson's Bay Company Trade Name d/b/a Saks Fifth Avenue Attention To: Jessica Arnold Title 5.b. Termination Date On-going 5.a. Name and Address of Employer (including trade name, if any). Employer Mailing Address: P.O. Box, Bldg., Room No., if any Street 6 Kimball Lane City Lynnfield State Massachusetts ZIP Code + 4 01940 5.c. Amount 0 Mailing Address: P.O. Box, Bldg., Room No., if any Street 225 Liberty Street, 31st Floor City New York State New York ZIP Code + 4 10281 5.c. Amount 0 Mailing Address: P.O. Box, Bldg., Room No., if any	
5.a. Name and Address of Employer (including trade name, if any). Employer HP Hood LLC Trade Name Attention To: Corey Jackson Title 5.b. Termination Date 12/31/17 5.a. Name and Address of Employer (including trade name, if any). Employer Hudson's Bay Company Trade Name d/b/a Saks Fifth Avenue Attention To: Jessica Arnold Title 5.b. Termination Date On-going 5.a. Name and Address of Employer (including trade name, if any). Employer! Trade Name Trade Name	Mailing Address: P.O. Box, Bldg., Room No., if any Street 6 Kimball Lane City Lynnfield State Massachusetts ZIP Code + 4 01940 5.c. Amount 0 Mailing Address: P.O. Box, Bldg., Room No., if any Street 225 Liberty Street, 31st Floor City New York State New York State New York State New York Street 0 Mailing Address: P.O. Box, Bldg., Room No., if any Street 1 Street 1 Street 1 Mailing Address: P.O. Box, Bldg., Room No., if any Street 1 Mailing Address: P.O. Box, Bldg., Room No., if any Street 1
5.a. Name and Address of Employer (including trade name, if any). Employer HP Hood LLC Trade Name Attention To: Corey Jackson Title 5.b. Termination Date 12/31/17 5.a. Name and Address of Employer (including trade name, if any). Employer Hudson's Bay Company Trade Name d/b/a Saks Fifth Avenue Attention To: Jessica Arnold Title 5.b. Termination Date On-going 5.a. Name and Address of Employer (including trade name, if any). Employer Trade Name Attention To: Trade Name Attention	Mailing Address: P.O. Box, Bldg., Room No., if any Street 6 Kimball Lane City Lynnfield State Massachusetts ZIP Code + 4 01940 5.c. Amount 0 Mailing Address: P.O. Box, Bldg., Room No., if any Street 225 Liberty Street, 31st Floor City New York State New York State New York State New York TIP Code + 4 10281 5.c. Amount 0 Mailing Address: P.O. Box, Bldg., Room No., if any Street City Street City
5.a. Name and Address of Employer (including trade name, if any). Employer HP Hood LLC Trade Name Attention To: Corey Jackson Title 5.b. Termination Date 12/31/17 5.a. Name and Address of Employer (including trade name, if any). Employer Hudson's Bay Company Trade Name d/b/a Saks Fifth Avenue Attention To: Jessica. Arnold Title 5.b. Termination Date On-going 5.a. Name and Address of Employer (including trade name, if any). Employer! Trade Name	Mailing Address: P.O. Box, Bldg., Room No., if any Street 6 Kimball Lane City Lynnfield State Massachusetts ZIP Code + 4 01940 5.c. Amount 0 Mailing Address: P.O. Box, Bldg., Room No., if any Street 225 Liberty Street, 31st Floor City New York State New York State New York State New York Street 0 Mailing Address: P.O. Box, Bldg., Room No., if any Street 1 Street 1 Street 1 Mailing Address: P.O. Box, Bldg., Room No., if any Street 1 Street 2 Street 3



KULTURE CONSULTING, LLG

Ms. Kay F. Bethea U.S. Department of Labor Employment Standards Administration Office of Labor-Management Standards 200 Constitution Avenue, NW, Room: N-5119 Washington, DC 20210

March 3, 2018

Addendum to 2017 LM-21

Note 1 – Agreement was entered into with: Northeast Electrical Distributors 560 Oak Street

Brockton, MA 02301

Payment was made by : Sonepar USA (d/b/a Northeast Electrical Dist) 495 North Keller Road, Suite 450 Maitland, FL 32751

Note 2 – Agreement was entered into with: Sysco South Florida Inc. 12500 Sysco Way, NW 112th Avenue Medley, FL 33178 Payment was made by: Sysco Corporate 24500 Hwy 290 Cypress, TX 77429

Note 3 – Agreement was entered into with:

Nevada Solar One

602 Eldorado Valley Drive

Boulder City, NV 89005

Payment was made by: Acciona Solar Power Inc. 55 East Monroe Street, Suite 1925 Chicago, IL 60603

Note 4 – Agreement was entered into with:
All Power Manufacturing Co.
13141 Molette Street
Santa Fe Springs, CA 90670

Payment was made by: RBC Bearings/RBC Corporate 1 Tribology Ctr 102 Willenbrock Road Oxford, CT 06478

Note 5 – Agreement was entered into with: Coca-Cola Bottling Company 1 Coca-Cola Plaza, Suite CCP-3 Atlanta, GA 30313 Payment was made by: Coca-Cola Refreshments 2500 Windy Ridge Pkwy SE Atlanta, GA 30339



KULTURE CONSULTING, LIG

Note 6 – Agreement was entered into with: Imperial Security 8459 Ridge Avenue Philadelphia, PA 19128

Note 7 – Agreement was entered into with:

Medical Facilities of America
2917 Penn Forest Boulevard
Roanoke, VA 24018

Payment was made by: Security Guard Inc. (d/b/a Imperial Security) 1141 E. Chestnut Avenue, Suite A Vineland, NJ 08360

Payment was made by: Riverside Health & Rehab (a div of Medical Facilities of America) 2344 Riverside Drive Danville, VA 24540



KULTURE CONSULTING, LEG

NOTE 8 -

Payment was received by Kulture Consulting LLC in 2017 from Sysco Louisville, Inc., 7705 National Turnpike, Louisville, KY 40214, in the amount of \$5,542.02.

Services rendered to this client were for management training only; no employees were met with, therefore no LM-20 was filed.

NOTE 9 -

Payment was received by Kulture Consulting LLC in 2017 from Interlake Mecalux, 1600 North 25th Avenue, Melrose Park, Chicago, IL 60160, in the amount of \$3,974.72.

Services rendered to this client at this time were for management training only; no employees were met with, therefore no LM-20 was filed.

Sincerely,

Peter List, Founder & CEO