

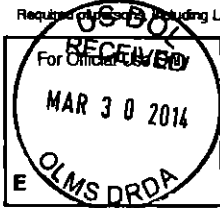
# FORM LM-21

## RECEIPTS AND DISBURSEMENTS REPORT

Form approved  
Office of Management  
and Budget  
No. 1215-0188  
Expires 09-30-2011

lm-21 ☐ QA

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 438 or 440.  
Required 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

551583

1. File Number C-00272	2. Period Covered By This Report From:	Month/Day/Year (mm/dd/yyyy)	Through:	Month/Day/Year (mm/dd/yyyy)
		1 / 1 / 2013		12 / 31 / 2013

A. Person Filing	
3. Name and mailing address (include ZIP Code):	
Name Philip Craft	Name Debbie O'Kelley
Title President	Title Administrative Assistant
Organization CBC Consulting, LTD	Organization CBC Consulting, LTD
P.O. Box, Building and Room Number, if any	P.O. Box, Building and Room Number, if any
Street 3001 W. Big Beaver Road	Street 17235 Lechlade Lane
City Troy	City Dallas
State Michigan ZIP Code + 4 48084-3105	State Texas ZIP Code + 4 75252

### Signatures

Each of the undersigned declares, under penalty of perjury and other applicable penalties of law, that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the Section on penalties in the instructions).

17. Signed	18. Signed
Title President (if other title, see instructions)	Title Chairman of the Board (if other title, see instructions)
On 3 / 28 / 2014 248-760-4558	On 3 / 28 / 2014 248-922-0141
Date Telephone Number	Date Telephone Number

Sign/Print

Submit to OLMS

Code Tester

Reset

Spawn List

Name of Person Filing: <u>Philip Craft</u>	File Number C- <u>00272</u>
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**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	Nestle	P.O. Box, Building and Room Number, if any	
Trade Name	Nestle	Street	800 North Brand Blvd
Attention To	Angela Green	City	Glendale
Title	VP of Human Resources	State	California ZIP Code + 4 91203

5.b. Termination Date 3/29/13 5.c. Amount \$183,273

6. TOTAL RECEIPTS FROM ALL EMPLOYERS

**C. Statement of Disbursements** Report all disbursements made by the reporting organization in connection with labor relations advice or services rendered to the employers listed in Part B.

7. Disbursements to Officers and Employees:

(a) Name	(b) Salary	(c) Expenses	(d) Totals
Philip Craft	135250	62753	198003
Jazzie Garcia	43500	40832	84332
Maxile Adelman	27625	25274	52899
Liz Casale	57215	42293	99508
Frank Barbera	60000	17888	77888

8. Total disbursements to officers and employees:	694184	9. Office and Administrative Expenses	8406
		10. Publicity	
		11. Fees for Professional Services	
		12. Loans Made	
		13. Other Disbursements	
		14. Total Disbursements (Sum of Items 8-13)	702590

**D. Schedule of Disbursements for Reportable Activity** Use this Schedule 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 ZIP Code + 4	

16. TOTAL DISBURSEMENTS FOR ALL REPORTABLE ACTIVITY

## Additional Employer Addresses

### 5.a. Name and Address of Employer

Employer Covenant Community Care  
Trade Name  
Attention To Jim Cole  
Title Chief Operating Officer  
Street 559 West Grand Blvd  
City Detroit  
State MI 48216

5.b. Termination Date 8/30/2013

5.c. 4,136.40

### 5.a. Name and Address of Employer

Employer ConAgra Foods  
Trade Name Lamb Weston  
Attention To Travis Clemens  
Title Vice President of Labor Relations  
Street 2013 Saint Street  
City Richland  
State WA 99354

5.b. Termination Date 12/31/2013

5.c. 192,169.66

### 5.a. Name and Address of Employer

Employer CB Harvesting  
Trade Name  
Attention To Maria LeRoy  
Title Human Resource Manager  
Street 19065 Portola Drive, Suite C  
City Salinas  
State CA 93908

5.b. Termination Date 10/31/2013

5.c. 75,075.08

## Additional Employer Addresses

### 5.a. Name and Address of Employer

Employer Jasper's Food Management  
Trade Name  
Attention To Susan Herzog  
Title Director of Operations  
Street 363 High Street  
City Eugene  
State OR 97401

5.b. Termination Date 7/31/2013

5.c. 10,234.56

### 5.a. Name and Address of Employer

Employer ConAgra Foods  
Trade Name  
Attention To Travis Clemens  
Title VP of Labor Relations  
Street 801 Dye Mill Road  
City Troy  
State OH 45373

5.b. Termination Date 11/29/2013

5.c. 579,363.78

### 5.a. Name and Address of Employer

Employer Mayfield Dairy  
Trade Name Dean Foods  
Attention To Shane Keith  
Title VP of Labor Relations  
Street 2711 N. Haskell Ave., Suite 3400  
City Dallas  
State TX 75204

5.b. Termination Date 6/29/2013

5.c. 132,124.80

Name of Person Filing: Philip Craft

File Number c-00272

C. Statement of Distribution

7. Disbursement to Officers and Employees:

(a)	Name	Salary	Expenses	(d) Totals
	Dennis Chaivre	28,475	19,502	47,977
	Dave Rogers	26,562	17,744	44,306
	Alex Casale	26,950	0	26,950
	Mario Vargas	43,125	13,696	56,821
	Hatasedy Saengdara	5,500	0	5,500