

FORM LM-21

RECEIPTS AND DISBURSEMENTS REPORT

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

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. 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)

For Official Use Only



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

427351

1. File Number C- <u>630</u>	2. Period Covered By This Report From: <u>01/01/2008</u> Through: <u>12/31/2008</u>
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A. Person Filing	
3. Name and mailing address (include ZIP Code):	
Name <u>Olivia</u> <u>Bell</u>	4. Any other address where records necessary to verify this report are kept:
Title <u>Office Manager</u>	Name <u></u>
Organization <u>Oliver J. Bell & Associates</u>	Title <u></u>
P.O. Box, Building and Room Number, if any <u></u>	Organization <u></u>
Street <u>13449 Dulles Avenue</u>	P.O. Box, Building and Room Number, if any <u></u>
City <u>Austin</u>	Street <u></u>
State <u>Texas</u> ZIP Code + 4 <u>78729</u>	City <u></u>
	State <u></u> ZIP Code + 4 <u></u>

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 <u>[Signature]</u> President (if other title, see instructions) Title <u>President</u>	18. Signed <u>[Signature]</u> Treasurer (if other title, see instructions) Title <u>Treasurer</u>
On <u>02/02/2010</u> (512) 249-6200 Date Telephone Number	On <u>02/02/2010</u> (512) 249-6200 Date Telephone Number

Name of Person Filing: Olivia Bell	File Number C-
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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).

Employer Hertz Corporation

Trade Name Hertz

Attention To Louis Franzese

Title Vice President, Labor Relations

Mailing Address:

P.O. Box, Building and Room Number, if any

Street 225 Brae Boulevard

City Park Ridge

State New Jersey ZIP Code + 4 07656

5.b. Termination Date 9/30/08 5.c. Amount 11,150

6. TOTAL RECEIPTS FROM ALL EMPLOYERS 83,675

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	
Bell <input type="checkbox"/> Oliver	6,000	0	6,000	9. Office and Administrative Expenses
Gonzalez <input type="checkbox"/> Manuel	9,375	0	9,375	10. Publicity
Alberico <input type="checkbox"/> Robert	3,750	0	3,750	11. Fees for Professional Services
Jonas <input type="checkbox"/> Bill	11,750	0	11,750	12. Loans Made
Bell <input type="checkbox"/> Xavier	6,600	0	6,600	13. Other Disbursements
8. Total disbursements to officers and employees: 37,475				14. Total Disbursements (Sum of Items 8-13) 37,475

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: Oliver J. Bell & Associates

15.b. Trade Name, If any:

15.c. To Whom Paid

Name Oliver Bell

Title President

Organization Oliver J. Bell & Associates

P.O. Box, Building and Room Number, if any

Street 13449 Dulles Avenue

City Austin

State Texas ZIP Code + 4 78729

15.d. Amount 6,000

15.e. Purpose

To inform employees of their right to support or not support a labor organization.

16. TOTAL DISBURSEMENTS FOR ALL REPORTABLE ACTIVITY 37,475

Name of Person Filing: Olivia Bell		File Number C-	
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 International RAM Associates	P.O. Box, Bldg., Room No., if any Suite 100		
Trade Name	Street 11044 Research Blvd.		
Attention To: Mary Hawthorne	City Austin		
Title Chief Operating Officer	State Texas		ZIP Code + 4 78759
5.b. Termination Date 1/31/08		5.c. Amount 11,600	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer MasTec Satellite	P.O. Box, Bldg., Room No., if any 12th Floor		
Trade Name	Street 800 Douglas Road		
Attention To: Virginia Pagliery	City Coral Gables		
Title Chief Labor Counsel	State Florida		ZIP Code + 4 33134
5.b. Termination Date 8/31/08		5.c. Amount 48,950	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Texas-New Mexico Power Company	P.O. Box, Bldg., Room No., if any PNM Resources		
Trade Name TNMP	Street Alvarado Square, MS-1200		
Attention To: Carol Dominguez Shay	City Albuquerque		
Title Corporate Counsel for Parent Corp.	State New Mexico		ZIP Code + 4 87158
5.b. Termination Date 11/30/08		5.c. Amount 11,975	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer	P.O. Box, Bldg., Room No., if any		
Trade Name	Street		
Attention To:	City		
Title	State		ZIP Code + 4
5.b. Termination Date		5.c. Amount	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer	P.O. Box, Bldg., Room No., if any		
Trade Name	Street		
Attention To:	City		
Title	State		ZIP Code + 4
5.b. Termination Date		5.c. Amount	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer	P.O. Box, Bldg., Room No., if any		
Trade Name	Street		
Attention To:	City		
Title	State		ZIP Code + 4
5.b. Termination Date		5.c. Amount	

Name of Person Filing: Olivia Bell	File Number C-
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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: Oliver J Bell and Associates, Inc.	15.b. Trade Name, If any:
15.c. To Whom Paid Name Manny Gonzalez Title Chief Operating Officer Organization Oliver J. Bell & Associates P.O. Box, Building and Room Number, if any Street 13449 Dulles Avenue City Austin State Texas ZIP Code + 4 78729	15.d. Amount 9,375 15.e. Purpose To inform employees of their right to support or not support a labor organization.

15.a. Employer Name: Oliver J Bell and Associates, Inc.	15.b. Trade Name, If any:
15.c. To Whom Paid Name Robert Alberico Title Consultant Organization Oliver J. Bell & Associates P.O. Box, Building and Room Number, if any Street 13449 Dulles Avenue City Austin State Texas ZIP Code + 4 78729	15.d. Amount 3,750 15.e. Purpose To inform employees of their right to support or not support a labor organization.

15.a. Employer Name: Oliver J Bell and Associates, Inc.	15.b. Trade Name, If any:
15.c. To Whom Paid Name Bill Jonas Title Vice-President, Labor Relations Organization Oliver J. Bell & Associates P.O. Box, Building and Room Number, if any Street 13449 Dulles Avenue City Austin State Texas ZIP Code + 4 78729	15.d. Amount 11,750 15.e. Purpose To inform employees of their right to support or not support a labor organization.

Name of Person Filing: Olivia Bell

File Number C-

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: Oliver J Bell and Associates, Inc.		15.b. Trade Name, If any:
15.c. To Whom Paid Name Xavier Bell Title Consultant Organization Oliver J. Bell & Associates P.O. Box, Building and Room Number, if any Street 13449 Dulles Avenue City Austin State Texas ZIP Code + 4 78729		15.d. Amount 6,600 15.e. Purpose To inform employees of their right to support or not support a labor organization.

15.a. Employer Name: 		15.b. Trade Name, If any:
15.c. To Whom Paid Name Title Organization P.O. Box, Building and Room Number, if any Street City State ZIP Code + 4		15.d. Amount 15.e. Purpose

15.a. Employer Name: 		15.b. Trade Name, If any:
15.c. To Whom Paid Name Title Organization P.O. Box, Building and Room Number, if any Street City State ZIP Code + 4		15.d. Amount 15.e. Purpose



OLIVER J. BELL
PRESIDENT & CEO

February 19, 2010

US Department of Labor
Office of Labor Management Standards
Washington, DC 20210

To Whom It May Concern:

Oliver J. Bell & Associates is amending its 2008 LM-21, Receipts and Disbursements Report, to include an additional payment in 2008 that we intended to post in our 2009 report.

One of our clients, Texas New Mexico Power (TNMP), a subsidiary of PNM Resources, inadvertently did not file its 2008 report and received notification from your office to do so, presumably based on the report our organization filed.

Based on your letter, TNMP contacted us for clarification and coordination. They have subsequently forwarded their 2008 report.

When we spoke with TNMP, they advised us they would indicate they would file a disbarment amount that was \$4,875 different from our original 2008 receipts filing. The reason for this difference is the amount in question was issued by check in late December 2008 by TNMP but not deposited by our organization until January 2009. Our original plan was to post the \$4,875 in our 2009 report which has been prepared and is to be forward to your office shortly.

However, in the interest of consistency, we are amending our 2008 report and including the additional amount to match accountability of both our report and our client's report.

While our original report was correct, we feel this more accurately reflects the receipts and removes any requirement for our client to file a 2009 report (as we were planning to do) since we did not perform any services for them in 2009. Thank you for taking note of this correction. Please advise us if we need to do anything in addition to this. We believe this should allow all records to reflect accurately and balance.

Regards,

Oliver J Bell
CEO

13449 DULLES AVE
AUSTIN, TEXAS 78727

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TOLL FREE: 877.943.8326
FAX: 512.249.6607

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