

FORM LM-21

RECEIPTS AND DISBURSEMENTS REPORT

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

1. File Number C- 00214

325344

2. Period Covered
By This Report
From:

Month/Day/Year
(mm/dd/yyyy)

01 / 01 / 2006

Through:

Month/Day/Year
(mm/dd/yyyy)

12 / 31 / 2006

A. Person Filing

3. Name and mailing address (include ZIP Code):

Name Peter Bennett

Title President

Organization The Bennett Law Firm, P.A.

P.O. Box, Building and Room Number, if any
P.O. Box 7799

Street

City Portland

State Maine

ZIP Code +4 04112-7799

4. Any other address where records necessary to verify this report are kept:

Name

Title

Organization

P.O. Box, Building and Room Number, if any
Suite 300

Street 121 Middle Street

City Portland

State Maine

ZIP Code +4 04101-4156

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

Title President

President
(if other title, see
instructions)

18. Signed

Title Other (Specify)

Vice-President

Treasurer
(If other title, see
instructions)

On

03 / 26 / 2007
Date

(207) 773-4775
Telephone Number

On

03 / 26 / 2007
Date

(207) 773-4775
Telephone Number

Name of Person Filing: Peter Bennett	File Number C- 00214
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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: P.O. Box, Building and Room Number, if any
Employer Aggregate Industries - NE Region - Inc.	
Trade Name	Street 1715 Broadway
Attention To Richard Winter	City Saugus
Title HR Manager	State Massachusetts ZIP Code + 4 01906-4703
5.b. Termination Date Ongoing	5.c. Amount 121,139
6. TOTAL RECEIPTS FROM ALL EMPLOYERS 518,513	

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			
Jeffrey Bennett	103,355	879	104,234	9. Office and Administrative Expenses		131,935
Peter Bennett	118,811	3,285	122,096	10. Publicity		10,575
Charles J Carbonneau	13,156	3	13,159	11. Fees for Professional Services		33,610
Anne B Cunningham	10,318	0	10,318	12. Loans Made		0
Frederick B Finberg	41,408	716	42,124	13. Other Disbursements		0
8. Total disbursements to officers and employees:			343,666	14. Total Disbursements (Sum of Items 8-13)		519,786

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 Washington ZIP Code + 4		
16. TOTAL DISBURSEMENTS FOR ALL REPORTABLE ACTIVITY		

Name of Person Filing: Peter Bennett		File Number C- 00214	
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 Associated Grocers of New England, Inc.		P.O. Box, Bldg., Room No., if any P.O. Box 6000	
Trade Name		Street	
Attention To: Steven Murphy		City Pembroke	
Title Sr. V.P. Finance & Administration		State New Hampshire ZIP Code + 4 03275-6000	
5 b. Termination Date Ongoing		5 c. Amount 23,001	
5 a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Bayside Distributing, Inc.		P.O. Box, Bldg., Room No., if any P.O. Box 710	
Trade Name		Street	
Attention To: Mark McCaddin		City Epping	
Title		State New Hampshire ZIP Code + 4 03042-0710	
5 b. Termination Date Ongoing		5 c. Amount 3,447	
5 a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Bellavance Beverage Company, Inc.		P.O. Box, Bldg., Room No., if any P.O. Box 6007	
Trade Name		Street	
Attention To: Joseph Bellavance, Sr.		City Nashua	
Title President		State New Hampshire ZIP Code + 4 03063-6007	
5 b. Termination Date Ongoing		5 c. Amount 13,518	
5 a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Lepage Bakeries, Inc.		P.O. Box, Bldg., Room No., if any P.O. Box 1900	
Trade Name C K Sales Company, LLC		Street	
Attention To: Andrew Barowsky		City Auburn	
Title President		State Maine ZIP Code + 4 04211-1900	
5 b. Termination Date Ongoing		5 c. Amount 1,615	
5 a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Bell Enterprises, Inc.		P.O. Box, Bldg., Room No., if any	
Trade Name Calais IGA		Street 23 Washington Street	
Attention To: Kathy Bell		City Calais	
Title		State Maine ZIP Code + 4 04619-1674	
5 b. Termination Date Ongoing		5 c. Amount 2,424	
5 a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Capitol Distributors, Inc.		P.O. Box, Bldg., Room No., if any P.O. Box 1148	
Trade Name		Street	
Attention To: Jack Shea		City Concord	
Title President		State New Hampshire ZIP Code + 4 03302-1148	
5 b. Termination Date Ongoing		5 c. Amount 1,656	

Name of Person Filing: Peter Bennett		File Number C- 00214	
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 Coca-Cola Bottling Co. of No. New England		P.O. Box, Bldg., Room No., if any Suite 330	
Trade Name		Street 1 Executive Park Drive	
Attention To: Lawrence Lordi		City Bedford	
Title President		State New Hampshire ZIP Code + 4 03110-6913	
5 b Termination Date Ongoing		5 c Amount 51,004	
5 a Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer County Ambulance Service, Inc.		P.O. Box, Bldg., Room No., if any P.O. Box 724	
Trade Name		Street	
Attention To: John F Partridge		City Ellsworth	
Title		State Maine ZIP Code + 4 04605-0724	
5 b Termination Date Ongoing		5 c Amount 4,146	
5 a Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Cumberland County Federal Credit Union		P.O. Box Bldg., Room No., if any	
Trade Name		Street 1345 Washington Avenue	
Attention To: Bert Beaulieu		City Portland	
Title		State Maine ZIP Code + 4 04103-3660	
5 b Termination Date Ongoing		5 c Amount 2,657	
5 a Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Federal Distributors, Inc.		P.O. Box, Bldg., Room No., if any P.O. Box 2007	
Trade Name		Street	
Attention To: J. P Spellman		City Lewiston	
Title		State Maine ZIP Code + 4 04241-2007	
5 b Termination Date Ongoing		5 c Amount 2,997	
5 a Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Goodwill Industries of Northern New England		P.O. Box, Bldg., Room No., if any P.O. Box 8600	
Trade Name		Street	
Attention To: Theodore Caouette		City Portland	
Title		State Maine ZIP Code + 4 04104-8600	
5 b Termination Date Ongoing		5 c Amount 46,755	
5 a Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Great State Beverages, Inc.		P.O. Box Bldg., Room No., if any P.O. Box 16550	
Trade Name		Street	
Attention To: Robert Koslowsky		City Hooksett	
Title		State New Hampshire ZIP Code + 4 03106-6550	
5 b Termination Date Ongoing		5 c Amount 5,430	

Name of Person Filing Peter Bennett	File Number C- 00214
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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 Lepage Bakeries, Inc. Trade Name Green Mountain Baking Company Attention To: Andrew Barowsky Title President	Mailing Address: P.O. Box, Bldg., Room No., if any P.O. Box 1900 Street City Auburn State Maine ZIP Code + 4 04211-1900
5 b Termination Date Ongoing	5 c Amount 658

5 a Name and Address of Employer (including trade name, if any) Employer Hardwood Products Company, LLC Trade Name Attention To: Terrence Young Title	Mailing Address: P.O. Box, Bldg., Room No., if any P.O. Box 149 Street City Guilford State Maine ZIP Code + 4 04443-0149
5 b Termination Date Ongoing	5 c Amount 3,040

5 a Name and Address of Employer (including trade name, if any). Employer Knox County Federal Credit Union Trade Name Attention To: A. Bosica Title President	Mailing Address: P.O. Box, Bldg., Room No., if any P.O. Box 159 Street City Rockland State Maine ZIP Code + 4 04841-0159
5 b Termination Date Ongoing	5 c Amount 1,200

5 a Name and Address of Employer (including trade name, if any). Employer Lepage Bakeries, Inc. Trade Name Country Kitchen Bakeries Attention To: Andrew Barowsky Title President	Mailing Address: P.O. Box, Bldg., Room No., if any P.O. Box 1900 Street City Auburn State Maine ZIP Code + 4 04211-1900
5 b Termination Date Ongoing	5 c Amount 44,109

5 a Name and Address of Employer (including trade name, if any). Employer Lois' Natural Marketplace, Inc. Trade Name Attention To: Dan Porta Title	Mailing Address: P.O. Box, Bldg., Room No., if any Box 15 Street 152 U.S. Route One City Scarborough State Maine ZIP Code + 4 04074-8367
5 b Termination Date Ongoing	5 c Amount 1,300

5 a Name and Address of Employer (including trade name, if any) Employer Maine State Credit Union Trade Name Attention To: Normand R Dubreuil Title	Mailing Address: P.O. Box, Bldg., Room No., if any P.O. Box 5659 Street City Augusta State Maine ZIP Code + 4 04332-5659
5 b Termination Date Ongoing	5 c Amount 4,013

Name of Person Filing: Peter Bennett		File Number C- 00214	
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 National Distributors, Inc.		P.O. Box, Bldg., Room No., if any	
Trade Name		Street 116 Wallace Avenue	
Attention To: Jeffrey D Kane		City South Portland	
Title President		State Maine ZIP Code + 4 04106-6144	
5 b Termination Date Ongoing		5.c Amount 9,998	
5 a Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer New Hampshire Distributors, Inc.		P.O. Box, Bldg., Room No., if any	
Trade Name		P.O. Box 267	
Attention To: C. T Brown		Street	
Title Chief Executive Officer		City Concord	
		State New Hampshire ZIP Code + 4 03302-0267	
5 b Termination Date Ongoing		5.c Amount 44,472	
5 a Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer P.F.B. Inc.		P.O. Box, Bldg., Room No., if any	
Trade Name Prunier's Market		P.O. Box 137	
Attention To: William Prunier		Street	
Title Treasurer		City Bomoseen	
		State Vermont ZIP Code + 4 05732-0137	
5 b Termination Date Ongoing		5.c Amount 1,020	
5 a Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Performance Food Group		P.O. Box, Bldg., Room No., if any	
Trade Name Northcenter Foodservice		P.O. Box 2628	
Attention To: David Crowell		Street	
Title President		City Augusta	
		State Maine ZIP Code + 4 04338-2628	
5 b Termination Date Ongoing		5.c Amount 4,422	
5 a Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Portland Water District		P.O. Box, Bldg., Room No., if any	
Trade Name		P.O. Box 3553	
Attention To: David Kane		Street	
Title		City Portland	
		State Maine ZIP Code + 4 04104-3553	
5 b Termination Date Ongoing		5.c Amount 29,932	
5 a Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Rowe Ford Sales		P.O. Box, Bldg., Room No., if any	
Trade Name		P.O. Box 109	
Attention To: Wallace Camp, Jr.		Street	
Title		City Westbrook	
		State Maine ZIP Code + 4 04098-0109	
5 b Termination Date Ongoing		5.c Amount 2,037	

Name of Person Filing: Peter Bennett		File Number C- 00214	
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 Sprague Energy Corporation		P.O. Box, Bldg., Room No., if any Suite 200	
Trade Name		Street 2 International Drive	
Attention To Paul Scoff		City Portsmouth	
Title		State New Hampshire ZIP Code + 4 03801-6809	
5 b Termination Date Ongoing		5 c. Amount 35,167	
5 a Name and Address of Employer (including trade name, if any).		Mailing Address	
Employer Synernet, Inc.		P.O. Box, Bldg., Room No., if any Suite 329	
Trade Name		Street 222 St. John Street	
Attention To: Becky Barrows		City Portland	
Title		State Maine ZIP Code + 4 04102-3071	
5 b Termination Date Ongoing		5 c. Amount 4,047	
5 a Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer University of New England		P.O. Box, Bldg., Room No., if any	
Trade Name		Street 11 Hills Beach Road	
Attention To: Ben Chretien		City Biddeford	
Title President		State Maine ZIP Code + 4 04005-9526	
5 b. Termination Date Ongoing		5 c. Amount 53,309	
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	

C. Statement of Disbursements**7. Disbursements to Officers and Employers:**

(a) Name		(b) Salary	(c) Expenses	(d) Totals
Tracy	L Goodale	2,542	0	2,542
Ena	S Hanson	6,440	18	6,458
Erica	E Howard	587	0	587
Laurie	A Proctor	12,194	0	12,194
Joanne	I Simonelli	29,604	350	29,954

Organization: **The Bennett Law Firm, P.A.**
File Number: **C-00214**
For the Period Ending: **December 31, 2006**

ATTACHMENT 1 of 1 TO FORM LM-21

Section B, Items 5 – 6: We have included a list of employers for whom we provided labor relations advice, negotiations and services for the time period covered by this report. The majority of these clients receive general labor and employment law advice on a retainer basis. This advice may or may not pertain to reportable activity. Further, the portions of receipts attributable to reportable activity are not shown separately on our records. Thus, for the time period covered by this report, no Forms LM-10 or LM-20 have been generated as no specific reportable activity associated with union campaigns was undertaken and for whom separate receipts were maintained.

Section C, Items 7 – 14: We are a law firm and have disbursements for other practice areas of law in addition to labor relations advice and services. Further, those disbursements attributable to labor relations advice, negotiations and services and the other practice areas are not shown separately on our records. We have calculated that the total receipts listed in Item 6 represent 29% of the firm's total receipts for the time period covered by this report. As such, we have allocated 29% of our total disbursements for Items 7 – 14 accordingly.