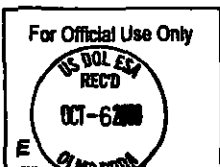


FORM LM-20 AGREEMENT AND ACTIVITIES REPORT



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 Reporting and Disclosure Act of 1959, as amended. (LMRDA)

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number: C- 00214

371214

Person Filing	
2. Name and mailing address (include ZIP Code):	3. Any other address where records necessary to verify this report are kept:
Name Peter Bennett	Name
Title President	Title
Organization The Bennett Law Firm, P.A.	Organization
P.O. Box, Bldg., Room No., if any P.O. Box 7799	P.O. Box, Bldg., Room No., if any Suite 300
Street	Street 121 Middle Street
City Portland	City Portland
State Maine ZIP Code + 4 04112-7799	State Maine ZIP Code + 4 04101
4. Date fiscal year ends: Dec / 31	5. Type of person: a <input type="checkbox"/> Individual b <input type="checkbox"/> Partnership c <input checked="" type="checkbox"/> Corporation d <input type="checkbox"/> Other (Specify):

Nature of Agreement or Arrangement	
6. Full name and address of employer with whom made (include ZIP Code):	7. Date entered into: 9 / 30 / 2008
Name Lawrence Lordi	8. Name of person(s) through whom made:
Organization Coca-Cola Bottling Co. of No. N.E., Inc.	Name Lawrence Lordi
Trade Name, if any	Name
P.O. Box, Bldg., Room No., if any	Name
Street 1 Executive Park Drive Suite 330	Name
City Bedford	Name
State New Hampshire ZIP Code + 4 03110	

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 Section VII on penalties in the instructions.)

13. Signed

President
(If other title, see instructions)

Title President

14. Signed

Treasurer
(If other title, see instructions)

Title Other (Specify)

Vice-President

On 10/01/2008

Date

(207) 773-4775

Telephone Number

On 10/01/2008

Date

(207) 773-4775

Telephone Number

9. Check the appropriate box to indicate whether an object of the activities undertaken, is directly or indirectly:

- a. ☒ To persuade employees to exercise or not to exercise, or persuade employees as to the manner of exercising, the right to organize and bargain collectively through representatives of their own choosing.
- b. ☐ To supply an employer with information concerning the activities of employees or a labor organization in connection with a labor dispute involving such employer, except information for use solely in conjunction with an administrative or arbitral proceeding or a criminal or civil judicial proceeding.

10. Terms and conditions (Explain in detail; see instructions. Written agreements must be attached.):

There are no terms and conditions. We will bill the client for all services and disbursements on a monthly basis.

Specific Activities to be Performed

11. For each activity, separately list in detail the information required (See instructions):

a. Nature of activity:

We represented management at employee meetings, and may review and prepare campaign literature with the objective of persuading subject group of employees at Coca-Cola Bottling Company of Northern New England's Colchester, Vermont location to vote "no" on any representative election. We may represent management at future employee meetings.

11.b. Period during which performed:

September 30, 2008 through present

11.c. Extent performed:

Ongoing

11.d. Name and address through whom performed:

Name Peter Bennett
 Organization The Bennett Law Firm, P.A.
 P.O. Box, Bldg., Room No., if any P.O. Box 7799
 Street
 City Portland
 State Maine ZIP Code + 4 04112-7799

Additional Name and address through whom performed, if any:

Name
 Organization
 P.O. Box, Bldg., Room No., if any
 Street
 City
 State ZIP Code + 4

12.a. Identify subject groups of employees:

All employees at Colchester, Vermont location

12.b. Identify subject labor organizations:

Unknown at this time