



Form Approved — OMB
No. 1214-0001
Expires: 12/31/86

LM 24

Receipts and Disbursements Report

U.S. Department of Labor



Office of Labor-Management Standards
Washington, D.C. 20210
(Feb. 1986)

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)

Form Approved. — OMB
No. 1214-0001
Expires: 12/31/86

A.—PERSON FILING

1. NAME AND ADDRESS (Include ZIP code)

LRI Consulting Services, Inc.
7850 S. Elm Place
Broken Arrow, OK 74011

2. ANY OTHER ADDRESS WHERE RECORDS NECESSARY TO VERIFY THIS REPORT ARE KEPT:

3. FILE NO.

C-

525

4. PERIOD COVERED BY THIS REPORT

From: To:

Month	Day	Year
1	1	00
12	31	00

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. NAME AND ADDRESS OF EMPLOYER (Include ZIP code)

6. TERMINATION DATE

7. AMOUNT

Tripp Life Power Protection 1111 W. 35th Street Chicago IL 60609-1404	6/20/00	\$ 16,000.00
Labor Relations Services, Inc. 24 Corporate Plaza, Suite 100 Newport Beach CA 92660	8/10/00	429.00
Coating Services PO Box 929 Prairieville LA 70769	7/12/00	3,000.00
Accurate Personnel Inc. 116 N. Roselle Schaumburg IL 60194	20,088.75 6/21/00	20,088.75
	TOTAL	\$ 29,517.75

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.

8. DISBURSEMENTS TO OFFICERS AND EMPLOYEES:

(a) Name	(b) Salary	(c) Expenses	(d) Totals
	\$	\$	\$
Total Disbursements to officers and employees:			\$

9. Office and Administrative Expenses

\$

10. Publicity

11. Fees for Professional Services

12. Loans Made

13. Other Disbursements

14. Total Disbursements

(Sum of Items 8-13)

\$

D.—SCHEDULE FOR STATEMENT OF DISBURSEMENTS. Use this Schedule to report only disbursements made for the purposes described in Part D or the instructions.

15. EMPLOYER	16. TO WHOM PAID	17. AMOUNT	18. PURPOSE
Tripp Life	William Scott, Sr. Scott Consulting 1032 Meda Street Memphis TN 38104	\$ 3,000.00	Employed to give speeches to employees to persuade them to not join a union
Coating Services	William Scott Sr. Scott Consulting 1032 Meda St. Memphis TN 38104	\$ 1,500.00	" " "
Accurate Personnel	Brad White - Interlate 145-A South Lincolnway North Aurora IL 60542	10,375.00	" " "
	TOTAL	\$ 14,875.00	" " "

IF MORE SPACE IS NEEDED ATTACH ADDITIONAL SHEETS

E.—VERIFICATION AND SIGNATURE. The person in item 1 above and each of his undersigned authorized officers declares, under penalty of law, that all information in this report, including all attachments incorporated therein or referred to in this report, has been examined by him and is, to the best of his knowledge and belief, true, correct, and complete.

SIGNED:

PRESIDENT

at:

City

State

on:

1/18/01

Date

(If other title,
cross out and
write in correct
title above.)

SIGNED:

TREASURER

at:

City

State

on:

1/18/01

Date

(If other title,
cross out and
write in correct
title above.)

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A.—PERSON FILING

1. NAME AND ADDRESS (Include ZIP code)		2. ANY OTHER ADDRESS WHERE RECORDS NECESSARY TO VERIFY THIS REPORT ARE KEPT:		
LRI Consulting Services, Inc. 7850 S. Elm Place Broken Arrow OK 74011				
3. FILE NO. C-	4. PERIOD COVERED BY THIS REPORT	Month	Day	Year
525	From: 1/12 To: 1/31	1	1	00

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. NAME AND ADDRESS OF EMPLOYER (Include ZIP code)	6. TERMINATION DATE	7. AMOUNT
Labor Relations Services, Inc. 620 Newport Ctr Dr Ste 1050 Newport Beach CA 92660	5/3/00	\$1330.00
Labor Relations Services, Inc. 620 Newport Ctr Dr Ste 1050 Newport Beach CA 92660	6/9/00	6297.50
Derby Industries, Inc. 4451 Robards Lane Louisville KY 40218	5/2/00	3,000.00
Labor Relations Services, Inc. 220 24 Corporate Plaza, Suite 100 Newport Beach CA 92660	6/20/00	14,347.50
TOTAL		\$24,975.00

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.

8. DISBURSEMENTS TO OFFICERS AND EMPLOYEES:

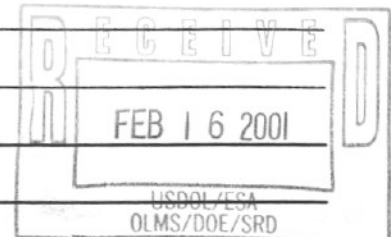
(a) Name	(b) Salary	(c) Expenses	(d) Totals
	\$	\$	\$
Total Disbursements to officers and employees:			\$

9. Office and Administrative Expenses	\$
10. Publicity	
11. Fees for Professional Services	
12. Loans Made	
13. Other Disbursements	
14. Total Disbursements (Sum of items 8-13)	\$

D.—SCHEDULE FOR STATEMENT OF DISBURSEMENTS. Use this Schedule to report only disbursements made for the purposes described in Part D of the instructions.

15. EMPLOYER	16. TO WHOM PAID	17. AMOUNT	18. PURPOSE
Derby Industries	Clarence Goddard 3750 S. 32nd West Avenue Tulsa OK 74107	\$1,500.00	Employed to give speeches to employees to persuade them to not join a union
TOTAL		\$1,500.00	

IF MORE SPACE IS NEEDED ATTACH ADDITIONAL SHEETS



E.—VERIFICATION AND SIGNATURE. The person in item 1 above and each of his undersigned authorized officers declares, under penalty of law, that all information in this report, including all attachments incorporated therein or referred to in this report, has been examined by him and is, to the best of his knowledge and belief, true, correct, and complete.

SIGNED: Charles P. White PRESIDENT
at: Broken Arrow OK on: 1/18/01
City State Date
(If other title, cross out and write in correct title above.)

SIGNED: Charles P. White TREASURER
at: Broken Arrow OK on: 1/18/01
City State Date
(If other title, cross out and write in correct title above.)