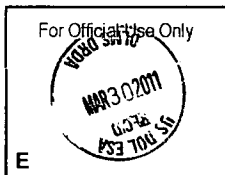


FORM LM-21

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)



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

453213

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 / 2010		12 / 31 / 2010

A. Person Filing	
3. Name and mailing address (include ZIP Code):	4. Any other address where records necessary to verify this report are kept:
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 17240 Lechlade Lane
City Troy	City Dallas
State Michigan <input checked="" type="radio"/> ZIP Code + 4 48084-3105	State Texas <input checked="" type="radio"/> 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	President (if other title, see instructions)
Title President <input checked="" type="radio"/>	
On 3 / 28 / 2011 248-760-4558	
Date Telephone Number	
18. Signed	Treasurer (If other title, see instructions)
Title Other (Specify) <input checked="" type="radio"/>	
On 3 / 28 / 2011 248-922-0141	
Date Telephone Number	

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). Employer <u>Dean Transportation</u> Trade Name <u>Dean Foods</u> Attention To <u>Shane Keith</u> Title <u>VP Labor Relations</u>	Mailing Address: P.O. Box, Building and Room Number, if any Street <u>2711 Haskell Ave</u> City <u>Dallas</u> State <u>Texas</u> <input checked="" type="checkbox"/> ZIP Code + 4 <u>75204</u>
5.b. Termination Date <u>9/24/2010</u>	5.c. Amount <u>25,700</u>
6. TOTAL RECEIPTS FROM ALL EMPLOYERS <u>154,500</u>	

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. See attachment for additional employees					
7. Disbursements to Officers and Employees:					
(a) Name	(b) Salary	(c) Expenses	(d) Totals		
Philip Craft	122,625	48,235	170,860	9. Office and Administrative Expenses	8,295
Jorge Martinez	69,750	40,202	109,952	10. Publicity	
Maxile Adelman	40,250	26,195	66,445	11. Fees for Professional Services	
Liz Casale	50,279	38,621	88,900	12. Loans Made	
Greg Eerbeek	43,334	33,738	77,072	13. Other Disbursements	
8. Total disbursements to officers and employees: <u>597,877</u>				14. Total Disbursements (Sum of Items 8-13)	<u>606,802</u>

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 Name Title Organization P.O. Box, Building and Room Number, if any Street City State <u>Virginia</u> <input checked="" type="checkbox"/> ZIP Code + 4	15.d. Amount 15.e. Purpose
16. TOTAL DISBURSEMENTS FOR ALL REPORTABLE ACTIVITY	

Additional Employer Addresses

5.a. Name and Address of Employer

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

5.b. Termination Date 02/25/2010

5.c. 50,500

5.a. Name and Address of Employer

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

5.b. Termination Date 04/09/2010

5.c. 78,300

Name of Person Filing; Philip Craft

File Number c-00272

C. Statement of Distribution

7. Disbursement for Officers and Employers:

(a)	Name	Salary	Expenses	(d) Totals
	James Belter	17,860	13,505	31,362
	Alex Casillas	25,000	10,815	35,815
	Dennis Chaivre	6,080	5,710	11,790
	Dave Rogers	7,980	4,701	12,681