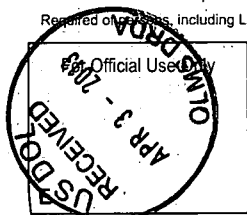


# FORM LM-21

## 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)



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

524802

1. File Number C- 00527	2. Period Covered By This Report From: 01/01/2012 Through: 12/31/2012
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### A. Person Filing

3. Name and mailing address (include ZIP Code):  Name: JOHN M HERMANN Title: CHIEF EXECUTIVE OFFICER Organization: LABOR RELATIONS SERVICES, INC.  P.O. Box, Building and Room Number, if any: SUITE 190 Street: 24 CORPORATE PLAZA City: NEWPORT BEACH State: California ZIP Code + 4: 92660	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: Street: City: State: ZIP Code + 4:
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### 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: [Signature] Title: President On: 03/29/2013 949-719-1962 Date Telephone Number	18. Signed: [Signature] Title: Treasurer On: 03/29/2013 949-719-1962 Date Telephone Number
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Name of Person Filing: JOHN HERMANN	File Number C- 00527
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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: B. FERNANDEZ Y HERMANOS, INC. Mailing Address: PO BOX 363629

Trade Name:  P.O. Box, Building and Room Number, if any:

Attention To: ANGEL E VAZQUEZ City: SAN JUAN

Title: PRESIDENT State: Puerto Rico ZIP Code + 4: 00936-3629

5.b. Termination Date: MARCH 23, 2012 5.c. Amount: 59,349

6. TOTAL RECEIPTS FROM ALL EMPLOYERS 1,009,108

**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		
JOHN <u>M</u> HERMANN	59,606	7,370	66,976	9. Office and Administrative Expenses	82,380
NOLA <u>L</u> BUCKMAN	24,239		24,239	10. Publicity	4,331
SHAUNNA <u></u> SCHNITKER	4,567	0	4,567	11. Fees for Professional Services	650,804
<u></u> <u></u>				12. Loans Made	0
<u></u> <u></u>				13. Other Disbursements	0
8. Total disbursements to officers and employees:			95,782	14. Total Disbursements (Sum of Items 8-13)	833,297

**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: <u></u>	15.b. Trade Name, if any: <u></u>
15.c. To Whom Paid: Name: <u></u> <u></u> Title: <u></u> Organization: <u></u>  P.O. Box, Building and Room Number, if any: <u></u> Street: <u></u> City: <u></u> State: <u>Washington</u> ZIP Code + 4: <u></u>	15.d. Amount: <u></u>  15.e. Purpose: <div style="border: 1px solid black; height: 150px; width: 100%;"></div>
16. TOTAL DISBURSEMENTS FOR ALL REPORTABLE ACTIVITY	

Name of Person Filing: JOHN HERMANN		File Number C- 00527	
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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:	
Employer: BEK COMMUNICAITONS Trade Name: Attention To: DERRICK BULAWA Title: CEO/GENERAL MANAGER	P.O. Box, Bldg., Room No., if any: Street: 200 EAST BROADWAY City: STEELE State: North Dakota ZIP Code + 4: 58482		
5.b. Termination Date: JANUARY 26, 2012	5.c. Amount: 91,676		

5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer: BLOCK TOPS, INC. Trade Name: Attention To: VANESSA BATES Title: OWNER	P.O. Box, Bldg., Room No., if any: Street: 1560 HARRIS COURT City: ANAHEIM State: California ZIP Code + 4: 92806		
5.b. Termination Date: AUGUST 31, 2012	5.c. Amount: 87,322		

5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer: DAN WOLF CHEVROLET OF NAPERVILLE Trade Name: Attention To: DAN WOLF Title:	P.O. Box, Bldg., Room No., if any: Street: 1515 OGDEN AVENUE City: NAPERVILLE State: Illinois ZIP Code + 4: 60540		
5.b. Termination Date: DECEMBER 21, 2012	5.c. Amount: 21,398		

5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer: METRO WEST AMBULANCE Trade Name: Attention To: LARRY BOXMAN Title: V.P. OF OPERATIONS	P.O. Box, Bldg., Room No., if any: Street: 5475 NE SAWSON CREEK DRIVE City: HILLSBORO State: Oregon ZIP Code + 4: 97124-5797		
5.b. Termination Date: JANUARY 9, 2012	5.c. Amount: 65,210		

5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer: MID VALLEY FOODS, INC. Trade Name: Attention To: LES CASEY Title: OWNER	P.O. Box, Bldg., Room No., if any: Street: 1864 ACKLEY CIRCLE City: OAKDALE State: California ZIP Code + 4: 95361		
5.b. Termination Date: MARCH 9, 2012	5.c. Amount: 27,500		

5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer: PACIFIC PRODUCE Trade Name: Attention To: JENNIFER SMITH Title: OWNER/PRESIDENT	P.O. Box, Bldg., Room No., if any: Street: 1366 SAN MATEO AVE. City: SAN FRANCISCO State: California ZIP Code + 4: 94080		
5.b. Termination Date: MAY 26, 2012	5.c. Amount: 53,942		

Name of Person Filing: JOHN HERMANN		File Number C-00527	
<b>B. Statement of Receipts</b> 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: WINDMILL DISTRIBUTING COMPANY, L.P.		P.O. Box, Bldg., Room No., if any:	
Trade Name: PHOENIX BEVERAGE		Street: 2 ATLANTIC AVE PIER 7	
Attention To: RODNEY BRYMAN		City: BROOKLYN	
Title: PRESIDENT		State: New York ZIP Code + 4: 11201	
5.b. Termination Date: JUNE 8, 2012		5.c. Amount: 162,811	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer: PURPLE COMMUNICATIONS		P.O. Box, Bldg., Room No., if any:	
Trade Name:		Street: 595 MENLO DRIVE	
Attention To: JOHN GOODMAN		City: ROCKLIN	
Title: CHIEF LEGAL OFFICER		State: California ZIP Code + 4: 95765	
5.b. Termination Date: NOVEMBER 7, 2012		5.c. Amount: 30,000	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer: RESER'S FINE FOODS, INC.		P.O. Box, Bldg., Room No., if any:	
Trade Name:		Street:	
Attention To: PAUL LEAVY		City: BEAVERTON	
Title:		State: Oregon ZIP Code + 4: 97075	
5.b. Termination Date: AUGUST 11, 2012		5.c. Amount: 143,499	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer: ROMEO RIM, INC.		P.O. Box, Bldg., Room No., if any:	
Trade Name:		Street: 74000 VAN DYKE AVE.	
Attention To: TIM EMMITT		City: ROMEO	
Title: PRESIDENT		State: Michigan ZIP Code + 4: 48065	
5.b. Termination Date: APRIL 21, 2012		5.c. Amount: 41,932	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer: SUIZA DAIRY CORPATION		P.O. Box, Bldg., Room No., if any:	
Trade Name:		Street:	
Attention To: MANUEL VELAZQUEZ		City: SAN JUAN	
Title: DIRECTOR OF HUMAN RESOURCES		State: Puerto Rico ZIP Code + 4: 00936-3207	
5.b. Termination Date: JUNE 20, 2012		5.c. Amount: 36,515	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer: TURKEY VALLEY FARMS		P.O. Box, Bldg., Room No., if any:	
Trade Name:		Street: 3939 WEST 1ST AVE	
Attention To: TIM JOHNSON		City: WILLMAR	
Title: EXECUTIVE VICE PRESIDENT		State: Minnesota ZIP Code + 4: 56201	
5.b. Termination Date: MAY 26, 2012		5.c. Amount: 187,954	