U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-21 RECEIPTS AND DISBURSEMENTS REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 12-31-2010

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

467561 Month/Day/Year Month/Day/Year 2. Period Covered 1 . File Number C- 00568 (mm/dd/yyyy) By This Report 31 / 2010 01 / 2010 Through: 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 Name Rosenbach Raymond Title Title Treasurer Organization GOVT. RESOURCES CONSULTANTS OF AMERICA Organization P.O. Box, Building and Room Number, if any P.O. Box, Building and Room Number, if any Street 253 COMMERCE DR SUITE 106 Street City GRAYSLAKE City ZIP Code + 4 60030 State ZIP Code + 4 Illinois State **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 18. Signed Treasurer (If other title, see (if other title, see President Treasurer Title instructions) instructions) 847-337-3480 2011 2011 847-337-3480 09 09 21 21 On Telephone Number Date Telephone Number Date

1									
Name of Person Filing: Raymond Rosenbach						File Number C- 00568			
B. Statement of	Rece	ipts Report all receipts from or services.	m employers in	connection wit	h labor relation	s advice or services regardless of the purpos	ses of the advice		
5.a. Name and Ad	tress (of Employer (including trade na	ame, if any).			ailing Address: uilding and Room Number, if any			
Employer [ENN	ER DUNLOP CONVEYOR	R SYSTEMS			O BOX 129			
Trade Name			anur'		Street 70	INDUSTRIAL PARK			
Attention To	KR	ISTIE	EOGEL		City BI	AIRSVILLE			
Title	VP	HUMAN RESOURCES			State Pe	ennsylvania ZIP Code	+ 4 15717		
5.b. Termination	Date	OCTOBER 2009	, All 1		5.c. Amount	2,722			
6. TOTAL RECE	IPTS	FROM ALL EMPLOYERS	251,647						
									
C. Statement of	Disb		isbursements m oyers listed in P		orting organiza	ation in connection with labor relations advice	or services rendered		
7. Disbursements (a) Name	to Offi	cers and Employees:	(b) Salary ((c) Expenses (d)	Totals				
THOMAS	В	CROSBIE	20,000	0	20,000	Office and Administrative Expenses	36,969		
DAVID	J	RITTOF	3,988	735	4,723	10. Publicity	0		
EDWARD		EVERETT	14,850	0	14,850	11. Fees for Professional Services	1,423		
EDWARD	D	YOUNG JR	30,698	2,243	32,941	12. Loans Made	0		
GEORGE		HARTNETT	11,162	2,351	13,513	13. Other Disbursements	12,055		
8. Total disburse	ments	s to officers and employees	: :		210,894	14. Total Disbursements (Sum of Items 8-13)	261,341		
D. Schedule of	 Disbu	rsements for Reportable			ule to report on	ly disbursements made for the purposes des	cribed in Part D of the		
			i	nstructions.	45. *		·		
15.a. Employer	Name	:			15.b. Trade	Name, If any:	-		
15.c. To Whom	Paid				15.d. Amou	nt 0			
Name					15.e. Purpo	se			
Title									
Organization]		11		
P.O. Box, Bu	lding	and Room Number, if any							
Street									
City									
State Othe	r	Z	IP Code + 4]				

Form LM-21 (2003)

16. TOTAL DISBURSEMENTS FOR ALL REPORTABLE ACTIVITY $\,\,0\,\,$

, Name of Person Filing: Raymond Rosenbach		File Number C-	00568					
B. Statement of Receipts Report all receipts from employers in connection advice or services.	with labor relations ad	dvice or services regardles	ss of the purposes of the					
5.a. Name and Address of Employer (including trade name, if any).		Address:						
MARC HOME FOR VOHEH	P.O. Box, Bldg., F	Room No., if any						
Employer MARS HOME FOR YOUTH	Street 521 ROT	TITE 220						
Trade Name		UIE 228	,					
Attention To: ELIZABETH S HAYS	City MARS State Pennsy	1	ZIP Code + 4 16046					
Title DIRECTOR OF HUMAN RESOURCES	State Pennsy	Ivania	Zii Oddc 1 4 16046					
5.b. Termination Date NOVEMBER 2009	5.c. Amount 124	, 785						
5.a. Name and Address of Employer (including trade name, if any).	Mailing P.O. Bo <u>x, Bldg.,</u> R	Address: Room No., if any	,					
Employer MANDALAY BAY RESORT & CASINO								
Trade Name	Street 3950 LA	AS VEGAS BLVD SOU	TH					
Attention To: MICHELLE DITONDO	City LAS VEC	GAS]					
Title VICE PRESIDENT HUMAN RESOURCES	State Nevada		ZIP Code + 4 89119					
5.b. Termination Date FEBRUARY 2010	5.c. Amount 59,8	382						
5.a. Name and Address of Employer (including trade name, if any).	Mailing	Address:						
	P.O. Box, Bldg., F							
Employer MGM GRAND								
Trade Name	Street 3799 LA	AS VEGAS BOULEVAR	D SOUTH					
Attention To: ANN KRUTCHIK	City LAS VEC	GAS						
Title VICE PRESIDENT HUMAN RESOURCES	State Nevada		ZIP Code + 4 89109					
5.b. Termination Date FEBRUARY 2010	5.c. Amount 29,3	371						
5.a. Name and Address of Employer (including trade name, if any).	Mailing	Address:						
	P.O. Box, Bldg., F	Room No., if any						
Employer Closet Factory								
Trade Name	Street 12800 S		1					
Attention To: GREGORY STEIN	City Los Ang							
Title PRESIDENT	State Califor	rnia	ZIP Code + 4 90061					
5.b. Termination Date AUGUST 2008	5.c. Amount 1,62	25						
5.a. Name and Address of Employer (including trade name, if any). Mailing Address:								
CIENTERELLINE	P.O. Box. Bida., F	Room No if anv						
Employer CENTERLINE		4 MIL CMD DEF						
Trade Name	Street 1600 E							
Attention To: QUINN	City SANTA A							
Title PRESIDENT	State Califor	rnia	ZIP Code + 4 92701					
5.b. Termination Date MAY 2010	5.c. Amount 33, 2	262						
5.a. Name and Address of Employer (including trade name, if any).	_	Address:	· 101 • Viscouri					
P.O. Box. Bldg., Room No if any								
Employer								
Trade Name	Street]					
Attention To:	City							
Title	State		ZIP Code + 4					

		1	(b) Salary	(c) Expenses		
JAMES	A	LEVYNE	11,875	4,671	16,546	
NOBLE		MILLER	55,550	271	55,821	
RAYMOND	_	ROSENBACH	52,500	0	52,500	
						
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