

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)

For Official Use Only

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

428137

1. File Number C- 00214

2. Period Covered
By This Report
From:

Month/Day/Year
(mm/dd/yyyy)

01 / 01 / 2009

Through:

Month/Day/Year
(mm/dd/yyyy)

12 / 31 / 2009

A. Person Filing

3. Name and mailing address (include ZIP Code):

Name Peter Bennett

Title President

Organization The Bennett Law Firm, P.A.

P.O. Box, Building and Room Number, if any

P.O. Box 7799

Street

City Portland

State Maine ZIP Code + 4 04112-7799

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

Suite 300

Street 121 Middle Street

City Portland

State Maine ZIP Code + 4 04101-4156

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

Title President

President
(if other title, see
instructions)

On

03 / 30 / 2010

Date

(207) 773-4775

Telephone Number

18. Signed

Title Other Specify

Vice-President

Treasurer
(if other title, see
instructions)

On

03 / 30 / 2010

Date

(207) 773-4775

Telephone Number

Name of Person Filing: Peter Bennett

File Number C- 00214

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:

P.O. Box, Building and Room Number, if any

Employer Aggregate Industries - NE Region - Inc.

Trade Name

Street 1715 Broadway

Attention To Richard Winter

City Saugus

Title HR Manager

State Massachusetts ZIP Code + 4 01906-4703

5.b. Termination Date Ongoing

5.c. Amount 175,390

6. TOTAL RECEIPTS FROM ALL EMPLOYERS 918,829

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

Haley L Bennett	154	0	154	9. Office and Administrative Expenses	216,117
Jeffrey Bennett	200,686	2,058	202,744	10. Publicity	17,490
Peter Bennett	255,783	2,936	258,719	11. Fees for Professional Services	123,258
Charles J Carbonneau	19,393	0	19,393	12. Loans Made	0
Frederick B Finberg	76,890	1,164	78,054	13. Other Disbursements	0
8. Total disbursements to officers and employees:			643,145	14. Total Disbursements (Sum of Items 8-13)	1,000,010

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

ZIP Code + 4

15.d. Amount

15.e. Purpose

16. TOTAL DISBURSEMENTS FOR ALL REPORTABLE ACTIVITY

Name of Person Filing: Peter Bennett		File Number C- 00214	
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 Amoskeag Beverages, LLC		P.O. Box, Bldg., Room No., if any P.O. Box 6540	
Trade Name		Street	
Attention To: Thomas A Bullock		City Manchester	
Title		State New Hampshire ZIP Code + 4 03108-6540	
5.b. Termination Date Ongoing		5.c. Amount 28,211	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Associated Grocers of New England, Inc.		P.O. Box, Bldg., Room No., if any P.O. Box 6000	
Trade Name		Street	
Attention To: Steven Murphy		City Pembroke	
Title Sr. V.P. Finance & Administration		State New Hampshire ZIP Code + 4 03275-6000	
5.b. Termination Date Ongoing		5.c. Amount 19,270	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Auburn Motor Sales		P.O. Box, Bldg., Room No., if any P.O. Box 500	
Trade Name Rowe Auburn		Street	
Attention To: Wallace Camp, Jr.		City Auburn	
Title		State Maine ZIP Code + 4 04212-0500	
5.b. Termination Date Ongoing		5.c. Amount 763	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Bayside Distributing, Inc.		P.O. Box, Bldg., Room No., if any P.O. Box 710	
Trade Name		Street	
Attention To: Mark McCaddin		City Epping	
Title		State New Hampshire ZIP Code + 4 03042-0710	
5.b. Termination Date Ongoing		5.c. Amount 3,413	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Bellavance Beverage Company, Inc.		P.O. Box, Bldg., Room No., if any P.O. Box 6007	
Trade Name		Street	
Attention To: Joseph Bellavance, Sr.		City Nashua	
Title President		State New Hampshire ZIP Code + 4 03063-6007	
5.b. Termination Date Ongoing		5.c. Amount 5,439	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Lepage Bakeries, Inc.		P.O. Box, Bldg., Room No., if any P.O. Box 1900	
Trade Name C K Sales Company, LLC		Street	
Attention To: Andrew Barowsky		City Auburn	
Title President		State Maine ZIP Code + 4 04211-1900	
5.b. Termination Date Ongoing		5.c. Amount 232	

Name of Person Filing: Peter Bennett		File Number C- 00214	
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 Bell Enterprises, Inc.		P.O. Box, Bldg., Room No., if any	
Trade Name Calais IGA		Street 200 North Street	
Attention To: Kathy Bell		City Calais	
Title		State Maine ZIP Code + 4 04619-1620	
5.b. Termination Date Ongoing		5.c. Amount 1,829	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Charles George Trucking		P.O. Box, Bldg., Room No., if any	
Trade Name		P.O. Box 857	
Attention To: Robert J Eisenberg		Street	
Title President		City Londonderry	
		State New Hampshire ZIP Code + 4 03053-0857	
5.b. Termination Date Ongoing		5.c. Amount 15,153	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Coca-Cola Bottling Co. of No. New England		P.O. Box, Bldg., Room No., if any	
Trade Name		Suite 330	
Attention To: Lawrence Lordi		Street 1 Executive Park Drive	
Title President		City Bedford	
		State New Hampshire ZIP Code + 4 03110-6913	
5.b. Termination Date Ongoing		5.c. Amount 128,574	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Cumberland County Federal Credit Union		P.O. Box, Bldg., Room No., if any	
Trade Name		Street 101 Gray Road	
Attention To: Karen Rickett		City Falmouth	
Title Vice-President of Operations		State Maine ZIP Code + 4 04105-2029	
5.b. Termination Date Ongoing		5.c. Amount 3,491	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Down East Credit Union		P.O. Box, Bldg., Room No., if any	
Trade Name		Street 20 Main Street	
Attention To: Bert Beaulieu		City Bowdoinham	
Title President		State Maine ZIP Code + 4 04008-4424	
5.b. Termination Date Ongoing		5.c. Amount 4,534	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Federal Distributors, Inc.		P.O. Box, Bldg., Room No., if any	
Trade Name		P.O. Box 2007	
Attention To: J. P Spellman		Street	
Title		City Lewiston	
		State Maine ZIP Code + 4 04241-2007	
5.b. Termination Date Ongoing		5.c. Amount 3,725	

Name of Person Filing: Peter Bennett		File Number C- 00214	
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 Franklin-Somerset Federal Credit Union		P.O. Box, Bldg., Room No., if any	
Trade Name		Street 26 Leavitt Street	
Attention To: Karen Greenleaf		City Skowhegan	
Title		State Maine ZIP Code + 4 04976	
5.b. Termination Date Ongoing		5.c. Amount 4,085	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Frannie Peabody House		P.O. Box, Bldg., Room No., if any	
Trade Name		Street 335 Valley Street	
Attention To: Lorena Delcourt		City Portland	
Title		State Maine ZIP Code + 4 04102-3010	
5.b. Termination Date Ongoing		5.c. Amount 4,074	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Goodwill Industries of Northern New England		P.O. Box, Bldg., Room No., if any	
Trade Name		P.O. Box 8600	
Attention To: Theodore Caouette		Street	
Title		City Portland	
		State Maine ZIP Code + 4 04104-8600	
5.b. Termination Date Ongoing		5.c. Amount 12,726	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Great State Beverages, Inc.		P.O. Box, Bldg., Room No., if any	
Trade Name		P.O. Box 16550	
Attention To: Robert Koslowsky		Street	
Title		City Hookset	
		State New Hampshire ZIP Code + 4 03106-6550	
5.b. Termination Date Ongoing		5.c. Amount 12,414	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Lepage Bakeries, Inc.		P.O. Box, Bldg., Room No., if any	
Trade Name Green Mountain Baking Company		P.O. Box 1900	
Attention To: Andrew Barowsky		Street	
Title President		City Auburn	
		State Maine ZIP Code + 4 04211-1900	
5.b. Termination Date Ongoing		5.c. Amount 6,791	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Hardwood Products Company, LLC		P.O. Box, Bldg., Room No., if any	
Trade Name		P.O. Box 149	
Attention To: Terrence Young		Street	
Title President		City Guilford	
		State Maine ZIP Code + 4 04443-0149	
5.b. Termination Date Ongoing		5.c. Amount 2,839	

Name of Person Filing: Peter Bennett		File Number C- 00214	
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 Harper Hotels, Inc.		P.O. Box, Bldg., Room No., if any P.O. Box 121	
Trade Name Holiday Inn		Street	
Attention To: Shirely <input type="checkbox"/> New		City Muncie	
Title		State Indiana ZIP Code + 4 47308-0121	
5.b. Termination Date 09/30/2009		5.c. Amount 5,439	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Lepage Bakeries, Inc.		P.O. Box, Bldg., Room No., if any P.O. Box 1900	
Trade Name Country Kitchen Bakeries		Street	
Attention To: Andrew <input type="checkbox"/> Barowsky		City Auburn	
Title President		State Maine ZIP Code + 4 04211-1900	
5.b. Termination Date Ongoing		5.c. Amount 30,358	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Lois' Natural Marketplace, Inc.		P.O. Box, Bldg., Room No., if any Box 15	
Trade Name		Street 152 U.S. Route One	
Attention To: Dan <input type="checkbox"/> Porta		City Scarborough	
Title		State Maine ZIP Code + 4 04074-8367	
5.b. Termination Date Ongoing		5.c. Amount 1,300	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Maine Distributors, Inc.		P.O. Box, Bldg., Room No., if any	
Trade Name		Street 5 Coffee Street	
Attention To: Scott <input type="checkbox"/> Solman		City Bangor	
Title		State Maine ZIP Code + 4 04401-5757	
5.b. Termination Date Ongoing		5.c. Amount 5,548	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Maine State Credit Union		P.O. Box, Bldg., Room No., if any P.O. Box 5659	
Trade Name		Street	
Attention To: Normand <input type="checkbox"/> R Dubreuil		City Augusta	
Title President		State Maine ZIP Code + 4 04332-5659	
5.b. Termination Date Ongoing		5.c. Amount 2,293	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer National Distributors, Inc.		P.O. Box, Bldg., Room No., if any	
Trade Name		Street 116 Wallace Avenue	
Attention To: Jeffrey <input type="checkbox"/> D Kane		City South Portland	
Title President		State Maine ZIP Code + 4 04106-6144	
5.b. Termination Date Ongoing		5.c. Amount 6,052	

Name of Person Filing: Peter Bennett		File Number C- 00214	
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 <u>New Hampshire Distributors, Inc.</u>		P.O. Box, Bldg., Room No., if any <u>P.O. Box 267</u>	
Trade Name <u></u>		Street <u></u>	
Attention To: <u>C.</u> <input type="checkbox"/> <u>T.</u> <u>Brown</u>		City <u>Concord</u>	
Title <u>Chief Executive Officer</u>		State <u>New Hampshire</u> ZIP Code + 4 <u>03302-0267</u>	
5.b. Termination Date <u>Ongoing</u>		5.c. Amount <u>51,210</u>	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer <u>P.F.B. Inc.</u>		P.O. Box, Bldg., Room No., if any <u>P.O. Box 137</u>	
Trade Name <u>Prunier's Market</u>		Street <u></u>	
Attention To: <u>William</u> <input type="checkbox"/> <u>Prunier</u>		City <u>Bomoseen</u>	
Title <u>Treasurer</u>		State <u>Vermont</u> ZIP Code + 4 <u>05732-0137</u>	
5.b. Termination Date <u>Ongoing</u>		5.c. Amount <u>1,075</u>	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer <u>Performance Food Group</u>		P.O. Box, Bldg., Room No., if any <u>P.O. Box 2628</u>	
Trade Name <u>Northcenter Foodservice</u>		Street <u></u>	
Attention To: <u>Greg</u> <input type="checkbox"/> <u>Piper</u>		City <u>Augusta</u>	
Title <u>President</u>		State <u>Maine</u> ZIP Code + 4 <u>04338-2628</u>	
5.b. Termination Date <u>Ongoing</u>		5.c. Amount <u>9,406</u>	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer <u>Portland Water District</u>		P.O. Box, Bldg., Room No., if any <u>P.O. Box 3553</u>	
Trade Name <u></u>		Street <u></u>	
Attention To: <u>David</u> <input type="checkbox"/> <u>Kane</u>		City <u>Portland</u>	
Title <u></u>		State <u>Maine</u> ZIP Code + 4 <u>04104-3553</u>	
5.b. Termination Date <u>Ongoing</u>		5.c. Amount <u>27,004</u>	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer <u>Rowe Ford Sales</u>		P.O. Box, Bldg., Room No., if any <u>P.O. Box 109</u>	
Trade Name <u></u>		Street <u></u>	
Attention To: <u>Wallace</u> <input type="checkbox"/> <u>Camp, Jr.</u>		City <u>Portland</u>	
Title <u></u>		State <u>Maine</u> ZIP Code + 4 <u>04104-0109</u>	
5.b. Termination Date <u>Ongoing</u>		5.c. Amount <u>7,086</u>	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer <u>Sprague Engergy Corporation</u>		P.O. Box, Bldg., Room No., if any <u>Suite 200</u>	
Trade Name <u></u>		Street <u>2 International Drive</u>	
Attention To: <u>J</u> <input type="checkbox"/> <u>P</u> <u>Scoff</u>		City <u>Portsmouth</u>	
Title <u></u>		State <u>New Hampshire</u> ZIP Code + 4 <u>03801-6809</u>	
5.b. Termination Date <u>Ongoing</u>		5.c. Amount <u>71,765</u>	

Name of Person Filing: Peter Bennett		File Number C- 00214	
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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: Synernet, Inc.		P.O. Box, Bldg., Room No., if any: Suite 329	
Trade Name:		Street: 222 St. John Street	
Attention To: Becky Barrows		City: Portland	
Title:		State: Maine ZIP Code + 4: 04102-3071	
5.b. Termination Date: Ongoing		5.c. Amount: 3,211	

5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer: University of New England		P.O. Box, Bldg., Room No., if any:	
Trade Name:		Street: 11 Hills Beach Road	
Attention To: Nicole Trufant		City: Biddeford	
Title:		State: Maine ZIP Code + 4: 04005-9525	
5.b. Termination Date: Ongoing		5.c. Amount: 219,864	

5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer: Valley Distributors, Inc.		P.O. Box, Bldg., Room No., if any: P.O. Box 8	
Trade Name:		Street:	
Attention To: Michael Runser		City: Oakland	
Title:		State: Maine ZIP Code + 4: 04963-0008	
5.b. Termination Date: Ongoing		5.c. Amount: 10,489	

5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer: York Ford Sales, Inc.		P.O. Box, Bldg., Room No., if any: P.O. Box 100	
Trade Name: d/b/a Yorks of Houlton		Street:	
Attention To: Jerry York		City: Houlton	
Title: President		State: Maine ZIP Code + 4: 04730-0100	
5.b. Termination Date: 01/16/2009		5.c. Amount: 33,776	

5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer:		P.O. Box, Bldg., Room No., if any:	
Trade Name:		Street:	
Attention To:		City:	
Title:		State: ZIP Code + 4:	
5.b. Termination Date:		5.c. Amount:	

5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer:		P.O. Box, Bldg., Room No., if any:	
Trade Name:		Street:	
Attention To:		City:	
Title:		State: ZIP Code + 4:	
5.b. Termination Date:		5.c. Amount:	

7. Disbursements to Officers and Employers:

[illegible]

Organization: **The Bennett Law Firm, P.A.**
File Number: **C-00214**
For the Period Ending: **December 31, 2009**

ATTACHMENT 1 of 1 TO FORM LM-21

Section B, Items 5 – 6: We have included a list of employers for whom we provided labor relations advice and services for the time period covered by this report. The majority of these clients receive general labor and employment law advice on a retainer basis. This advice may or may not pertain to reportable activity. Further (except as noted below), the portions of receipts attributable to reportable activity are not shown separately on our records. Thus, for the time period covered by this report, no Forms LM-10 or LM-20 have been generated except for the following clients for whom specific reportable activity associated with union campaigns was undertaken and for whom separate receipts were maintained:

- Amoskeag Beverages, LLC: Forms LM-10 and LM-20 filed for Fiscal Year Ending 12/31/2009
- University of New England: Form LM-10 for Fiscal Year Ending 05/31/2009 and Form LM-20 for Fiscal Year Ending 12/31/2009
- York's Ford Sales, Inc., d/b/a York's of Houlton: Form LM-10 filed for Fiscal Year Ending 12/31/2009
- Additionally, we filed Form LM-20 with regard to our client, Harper Hotels, Inc., for Fiscal Year Ending 12/31/2009. As this client subsequently sold the business, no corresponding Form LM-10 was filed by them, nor were separate payments made by them relating to the reportable activity. As such, we have included payments relating to this client in accordance with the guidelines listed in the first paragraph of this attachment, and expenses relating to this client in accordance with the guidelines listed in the final paragraph below.

Section C, Items 7 – 14: We are a law firm and have disbursements for other practice areas of law in addition to labor relations advice and services. Further, those disbursements attributable to labor relations advice and services and the other practice areas are not shown separately on our records. We have calculated that the total receipts listed in Item 6 represent 41% of the firm's total receipts for the time period covered by this report. As such, we have allocated 41% of our total disbursements for Items 7 – 14 accordingly.