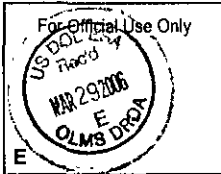


FORM LM-21

RECEIPTS AND DISBURSEMENTS REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006

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

1. File Number C- <input type="text" value="00322"/>	2. Period Covered By This Report From: <input type="text" value="01"/> / <input type="text" value="01"/> / <input type="text" value="2005"/> Through: <input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2005"/>
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A. Person Filing	
3. Name and mailing address (include ZIP Code):	
Name <input type="text" value="Peter"/> <input type="text" value="A"/> <input type="text" value="List"/>	4. Any other address where records necessary to verify this report are kept:
Title <input type="text" value="President & COO"/>	Name <input type="text"/>
Organization <input type="text" value="Sunbelt Organization Services, Inc."/>	Title <input type="text"/>
P.O. Box, Building and Room Number, if any <input type="text"/>	Organization <input type="text"/>
Street <input type="text" value="759 Bloomfield Avenue, No. 142"/>	P.O. Box, Building and Room Number, if any <input type="text"/>
City <input type="text" value="West Caldwell"/>	Street <input type="text"/>
State <input type="text" value="New Jersey"/> ZIP Code + 4 <input type="text" value="07006"/>	City <input type="text"/>
	State <input type="text"/> ZIP Code + 4 <input type="text"/>

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 <input type="text" value="Other (Specify)"/> <input type="text" value="President & COO"/>	
On <input type="text" value="03"/> / <input type="text" value="16"/> / <input type="text" value="2006"/> <input type="text" value="973-808-6800"/>	
Date Telephone Number	
18. Signed	Treasurer (If other title, see instructions)
Title <input type="text" value="Other (Specify)"/> <input type="text" value="Secretary & Treasurer"/>	
On <input type="text" value="03"/> / <input type="text" value="16"/> / <input type="text" value="2006"/> <input type="text" value="973-808-6800"/>	
Date Telephone Number	

Name of Person Filing: Peter List	File Number C- 00322
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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 <u>Catelli Brothers, Inc.</u>	P.O. Box, Building and Room Number, if any <u></u>
Trade Name <u></u>	Street <u>50 Ferry Avenue</u>
Attention To <u>Anthony</u> <input type="checkbox"/> <u>Catelli, Jr.</u>	City <u>Collingswood</u>
Title <u>President & CEO</u>	State <u>New Jersey</u> ZIP Code + 4 <u>08103</u>

5.b. Termination Date 1-19-2005 5.c. Amount 42,768

6. TOTAL RECEIPTS FROM ALL EMPLOYERS 1,003,536

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	
<u></u>	<u></u>	<u></u>	<u></u>	9. Office and Administrative Expenses <u></u>
<u></u>	<u></u>	<u></u>	<u></u>	10. Publicity <u></u>
<u></u>	<u></u>	<u></u>	<u></u>	11. Fees for Professional Services <u></u>
<u></u>	<u></u>	<u></u>	<u></u>	12. Loans Made <u></u>
<u></u>	<u></u>	<u></u>	<u></u>	13. Other Disbursements <u></u>
8. Total disbursements to officers and employees: <u></u>				14. Total Disbursements (Sum of Items 8-13) <u></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: <u>North American Employers Group, LLC</u>	15.b. Trade Name, if any: <u></u>
15.c. To Whom Paid Name <u></u> <input type="checkbox"/> <u></u> Title <u></u> Organization <u>North American Employers Group, LLC</u> P.O. Box, Building and Room Number, if any <u></u> Street <u>759 Bloomfield Avenue</u> City <u>West Caldwell</u> State <u>New Jersey</u> ZIP Code + 4 <u>07006</u>	15.d. Amount <u>1,003,536</u> 15.e. Purpose <u>Disbursements were made to the Officers, Consultants, and employees of North American Employers Group, LLC for the purpose of Labor Relations advice and expenses.</u>

16. TOTAL DISBURSEMENTS FOR ALL REPORTABLE ACTIVITY 1,003,536

Name of Person Filing: Peter List		File Number C-00322	
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>St. John's Community Services</u>		P.O. Box, Bldg., Room No., if any	
Trade Name <u></u>		Street <u>2201 Wisconsin Avenue, Ste. C-150</u>	
Attention To: <u>Thomas</u> <input type="checkbox"/> <u>Wilds</u>		City <u>Washington</u>	
Title <u>President</u>		State <u>District of Columbia</u> ZIP Code + 4 <u>20007</u>	
5.b. Termination Date <u>1-20-2005</u>		5.c. Amount <u>4,659</u>	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer <u>Phone America Corporation</u>		P.O. Box, Bldg., Room No., if any	
Trade Name <u></u>		Street <u>8 Bacton Hill Road</u>	
Attention To: <u>Charles</u> <input type="checkbox"/> <u>T Reimel</u>		City <u>Frazer</u>	
Title <u>President</u>		State <u>Pennsylvania</u> ZIP Code + 4 <u>19355</u>	
5.b. Termination Date <u>1-20-2005</u>		5.c. Amount <u>1,583</u>	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer <u>Givaudan Flavors Corporation</u>		P.O. Box, Bldg., Room No., if any	
Trade Name <u></u>		Street <u>1 Merry Lane</u>	
Attention To: <u>Tony</u> <input type="checkbox"/> <u>Anthony</u>		City <u>East Hanover</u>	
Title <u>Director of Human Resources</u>		State <u>New Jersey</u> ZIP Code + 4 <u>07936</u>	
5.b. Termination Date <u>1-21-2005</u>		5.c. Amount <u>29,092</u>	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer <u>Park B. Smith, Ltd.</u>		P.O. Box, Bldg., Room No., if any	
Trade Name <u></u>		Street <u>9 Corn Road</u>	
Attention To: <u>Park</u> <input type="checkbox"/> <u>B Smith</u>		City <u>Dayton</u>	
Title <u>President & CEO</u>		State <u>New Jersey</u> ZIP Code + 4 <u>08810</u>	
5.b. Termination Date <u>3-11-2005</u>		5.c. Amount <u>58,827</u>	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer <u>Miele Sanitation Company</u>		P.O. Box, Bldg., Room No., if any	
Trade Name <u></u>		Street <u>60 Railroad Avenue</u>	
Attention To: <u>Joseph</u> <input type="checkbox"/> <u>Miele</u>		City <u>Closter</u>	
Title <u>President</u>		State <u>New Jersey</u> ZIP Code + 4 <u>07624</u>	
5.b. Termination Date <u>5-6-2005</u>		5.c. Amount <u>19,996</u>	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer <u>Waste Management of Santa Clara</u>		P.O. Box, Bldg., Room No., if any	
Trade Name <u></u>		Street <u>1675 Rogers Avenue</u>	
Attention To: <u>Mark</u> <input type="checkbox"/> <u>Arsenault</u>		City <u>San Jose</u>	
Title <u>Plant Manager</u>		State <u>California</u> ZIP Code + 4 <u>95112</u>	
5.b. Termination Date <u>5-8-2005</u>		5.c. Amount <u>24,760</u>	

Name of Person Filing: Peter List		File Number C- 00322	
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 Waste Management, Inc.		P.O. Box, Bldg., Room No., if any	
Trade Name Cal Sierra Disposal, Inc.		Street 19309 Industrial Drive	
Attention To: Jim Milton		City Sonora	
Title		State California ZIP Code + 4 95370	
5.b. Termination Date 5-8-2005		5.c. Amount 17,514	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Michelin North America		P.O. Box, Bldg., Room No., if any	
Trade Name TCI Tire Center		Street One Parkway South	
Attention To: Jim Crowley		City Greenville	
Title Director of Employee Relations		State South Carolina ZIP Code + 4 29615	
5.b. Termination Date 5-11-2005		5.c. Amount 8,758	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Readington Farms		P.O. Box, Bldg., Room No., if any	
Trade Name		Street 12 Mill Road	
Attention To: Don Merrigan		City Whitehouse Station	
Title President		State New Jersey ZIP Code + 4 08889	
5.b. Termination Date 6-10-2005		5.c. Amount 7,448	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Temple-Inland Paperboard		P.O. Box, Bldg., Room No., if any	
Trade Name Performance Sheets		Street 1300 South Mopac Expressway	
Attention To: Lee Crawford		City Austin	
Title Senior Labor Counsel		State Texas ZIP Code + 4 78746	
5.b. Termination Date 6-24-2005		5.c. Amount 50,681	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Smithfield Beef Group		P.O. Box, Bldg., Room No., if any	
Trade Name		Street 2580 University Avenue	
Attention To: Bob Daubenspeck		City Green Bay	
Title General Manager		State Wisconsin ZIP Code + 4 54311	
5.b. Termination Date 7-1-2005		5.c. Amount 112,433	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Bradco Supply Corporation (Walden, NJ)		P.O. Box, Bldg., Room No., if any	
Trade Name		Street 13 Production Way	
Attention To: Michael Weinberger		City Avenel	
Title		State New Jersey ZIP Code + 4 07001	
5.b. Termination Date 7/26/2005		5.c. Amount 13,154	

Name of Person Filing: Peter List		File Number C-00322	
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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 <u>Northeast Electrical Distributors</u>	P.O. Box, Bldg., Room No., if any
Trade Name	Street <u>135 Will Drive</u>
Attention To: <u>Carl</u> <input type="checkbox"/> <u>D</u> <u>Brand</u>	City <u>Canton</u>
Title <u>President</u>	State <u>Massachusetts</u> ZIP Code + 4 <u>02021</u>

5.b. Termination Date 7/29/2005 5.c. Amount 183,557

5.a. Name and Address of Employer (including trade name, if any). Mailing Address:

Employer <u>Stonemor Partners</u>	P.O. Box, Bldg., Room No., if any
Trade Name <u>Beth Israel Memorial</u>	Street <u>155 Rittenhouse Circle</u>
Attention To: <u>Alan</u> <input type="checkbox"/> <u>Fisher</u>	City <u>Bristol</u>
Title	State <u>Pennsylvania</u> ZIP Code + 4 <u>19007</u>

5.b. Termination Date 8/16/2005 5.c. Amount 15,380

5.a. Name and Address of Employer (including trade name, if any). Mailing Address:

Employer <u>Bradco Supply Corporation (St. Louis)</u>	P.O. Box, Bldg., Room No., if any
Trade Name	Street <u>13 Production Way</u>
Attention To: <u>Michael</u> <input type="checkbox"/> <u>Weinberger, Esq.</u>	City <u>Avenel</u>
Title	State <u>New Jersey</u> ZIP Code + 4 <u>07001</u>

5.b. Termination Date 8/17/2005 5.c. Amount 24,026

5.a. Name and Address of Employer (including trade name, if any). Mailing Address:

Employer <u>Waste Management, Inc. (New Mexico)</u>	P.O. Box, Bldg., Room No., if any
Trade Name	Street <u>402 Industrial Park, Loop NE</u>
Attention To: <u>Calvin</u> <input type="checkbox"/> <u>Ivy</u>	City <u>Rio Rancho</u>
Title	State <u>New Mexico</u> ZIP Code + 4 <u>87124</u>

5.b. Termination Date 10/11/2005 5.c. Amount 42,708

5.a. Name and Address of Employer (including trade name, if any). Mailing Address:

Employer <u>Bradco Supply Corporation (Ithaca, NJ)</u>	P.O. Box, Bldg., Room No., if any
Trade Name	Street <u>13 Production Way</u>
Attention To: <u>Michael</u> <input type="checkbox"/> <u>Weinberger, Esq.</u>	City <u>Avenel</u>
Title	State <u>New Jersey</u> ZIP Code + 4 <u>07001</u>

5.b. Termination Date 10/18/2005 5.c. Amount 10,894

5.a. Name and Address of Employer (including trade name, if any). Mailing Address:

Employer <u>Ingenco</u>	P.O. Box, Bldg., Room No., if any
Trade Name	Street <u>2250 Dabney Road</u>
Attention To: <u>Charles</u> <input type="checkbox"/> <u>J</u> <u>Packard</u>	City <u>Richmond</u>
Title <u>President</u>	State <u>Virginia</u> ZIP Code + 4 <u>23230</u>

5.b. Termination Date 10/26/2005 5.c. Amount 17,973

Name of Person Filing: Peter List		File Number C- 00322	
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 American Woodmark Corporation		P.O. Box, Bldg., Room No., if any	
Trade Name		Street 3102 Shawnee Drive	
Attention To: Dave [] Tanger		City Winchester	
Title		State Virginia ZIP Code + 4 22601	
5.b. Termination Date 11/1/2005		5.c. Amount 91,032	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Interline Brands		P.O. Box, Bldg., Room No., if any	
Trade Name U.S. Lock Company		Street 200 E. Park Drive, Suite 200	
Attention To: Annette [] Ricciti		City Moorestown	
Title Director of Human Resources		State New Jersey ZIP Code + 4 08054	
5.b. Termination Date 11/8/2005		5.c. Amount 52,617	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Tribeca Oven, Inc.		P.O. Box, Bldg., Room No., if any	
Trade Name		Street 447 Gotham Parkway	
Attention To: Marc [] Essenfeld		City Carlstadt	
Title President		State New Jersey ZIP Code + 4 07072	
5.b. Termination Date 11/9/2005		5.c. Amount 8,369	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Delaware Valley Concrete Company, Inc.		P.O. Box, Bldg., Room No., if any	
Trade Name		Street 248 East County Line Road	
Attention To: Mario [] Diliberto		City Hatboro	
Title President		State Pennsylvania ZIP Code + 4 19040	
5.b. Termination Date Open		5.c. Amount 5,693	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Saunders House		P.O. Box, Bldg., Room No., if any	
Trade Name		Street 100 East Lancaster Avenue	
Attention To: William [] Grim		City Wynnewood	
Title Executive Director		State Pennsylvania ZIP Code + 4 19096	
5.b. Termination Date Open		5.c. Amount 15,000	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Field Hotel Associates		P.O. Box, Bldg., Room No., if any	
Trade Name		Street 251 West DeKalb Pike	
Attention To: Christopher [] Polityka		City King of Prussia	
Title Corporate Regional Director, HR		State Pennsylvania ZIP Code + 4 19406	
5.b. Termination Date 8/3/2004		5.c. Amount 16,000	

Name of Person Filing: Peter List		File Number C- 00322	
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 BWP Distributors		P.O. Box, Bldg., Room No., if any	
Trade Name		Street 215 Business Park Drive	
Attention To: Len Herman, Esq.		City Armonk	
Title		State New York ZIP Code + 4 10504	
5.b. Termination Date 7/15/2005		5.c. Amount 3,108	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer American Management Services, LLC		P.O. Box, Bldg., Room No., if any	
Trade Name		Street 2801 Alaskan Way, Suite 200	
Attention To: David Krull		City Seattle	
Title		State Washington ZIP Code + 4 98121	
5.b. Termination Date 12/6/2004		5.c. Amount 20,060	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Roller Bearing Company of America, Inc.		P.O. Box, Bldg., Room No., if any	
Trade Name RBC, Inc.		Street 60 Round Hill Road	
Attention To: Robert Crawford		City Fairfield	
Title Corporate Risk Manager		State Connecticut ZIP Code + 4 06824	
5.b. Termination Date 10/15/2004		5.c. Amount 1,968	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Yuasa Battery, Inc.		P.O. Box, Bldg., Room No., if any	
Trade Name		Street 2901 Montrose Avenue	
Attention To: Keith E Ordemann		City Laureldale	
Title President & CEO		State Pennsylvania ZIP Code + 4 19560	
5.b. Termination Date 12/23/2004		5.c. Amount 56,475	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Northeast Center for Special Care		P.O. Box, Bldg., Room No., if any	
Trade Name		Street 300 Grant Avenue	
Attention To: Ann Marie Belcher		City Lake Katrine	
Title Executive Director		State New York ZIP Code + 4 12449	
5.b. Termination Date 12/28/2004		5.c. Amount 44,382	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer John Wiley & Sons, Inc.		P.O. Box, Bldg., Room No., if any	
Trade Name		Street 111 River Street	
Attention To: Maria Danzilo		City Hoboken	
Title Legal Director		State New Jersey ZIP Code + 4 07030	
5.b. Termination Date 11/22/2004		5.c. Amount 2,621	