

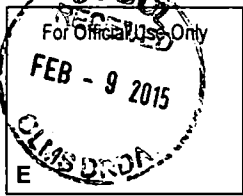
# FORM LM-21

## RECEIPTS AND DISBURSEMENTS REPORT

Form approved  
Office of Management  
and Budget  
No. 1245-0003  
Expires: 08-31-2016

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 filers include 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)



576687

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1. File Number C- <b>569</b>	2. Period Covered By This Report	Month/Day/Year (mm/dd/yyyy)	Through:	Month/Day/Year (mm/dd/yyyy)
	From:	<b>06</b> / <b>19</b> / <b>2014</b>		<b>07</b> / <b>24</b> / <b>2014</b>

### A. Person Filing

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

Name **Bradley** **E** **White**

Title **President**

Organization **Interlate Systems, Inc.**

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

Street **145 S. Lincolnway**

City **North Aurora**

State **Illinois** ZIP Code + 4 **60542**

#### 4. Any other address where records necessary to verify this report are kept:

Name **N/A**

Title

Organization

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

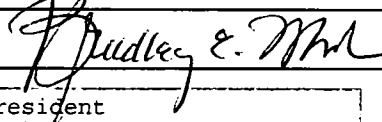
Street

City

State ZIP Code + 4

### 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 <b>President</b> On <b>2</b> / <b>2</b> / <b>2015</b> <b>630-966-0214</b> Date Telephone Number	18. Signed _____ Title <b>Treasurer</b> On _____ Date Telephone Number	Treasurer (If other title, see instructions)
---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	---------------------------------------------------------------------------------	-------------------------------------------------

Name of Person Filing: Bradley White

File Number C-

**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 Blommer Chocolate Factory

Trade Name

Street

1515 Pacific St.

Attention To

City

Union City

Title

State

California

ZIP Code + 4 94587

5.b. Termination Date 7/24/2014

5.c. Amount 45,847

6. TOTAL RECEIPTS FROM ALL EMPLOYERS 45,847

**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

9. Office and Administrative Expenses

10. Publicity

11. Fees for Professional Services

12. Loans Made

13. Other Disbursements

8. Total disbursements to officers and employees:

14. Total Disbursements (Sum of Items 8-13)

**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:

Interlate Systems, Inc.

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 Washington

ZIP Code + 4

15.d. Amount

15.e. Purpose

NO DISBURSEMENT WAS MADE TO ANY OFFICER OR EMPLOYEE SPECIFICALLY FROM THIS FUNDS. SALARIED PERSONS RECEIVE BI MONTHLY PAYMENTS FROM ALL RECEIPTS FROM TRANSLATING AND CONSULTING ACTIVITIES.

THE INTERLATE SALARY OF BRADLEY E. WHITE FOR ALL TRANSLATING, INTERPRETING AND CONSULTING DURING THE 2014 CALENDAR YEAR WAS \$ 14,158.50

16. TOTAL DISBURSEMENTS FOR ALL REPORTABLE ACTIVITY