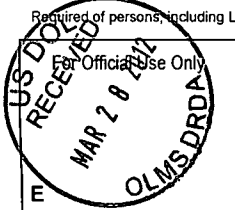


# FORM LM-21

## 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)



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

400509

1. File Number C- 00367	2. Period Covered By This Report	Month/Day/Year (mm/dd/yyyy)	Month/Day/Year (mm/dd/yyyy)
	From:	01/01/2011	Through: 12/31/2011

<b>A. Person Filing</b>	
3. Name and mailing address (include ZIP Code):	
Name	Erick <input type="checkbox"/> Becker
Title	CEO
Organization	The American Consulting Group, Inc.
P.O. Box, Building and Room Number, if any	Suite 220
Street	23361 Madero
City	Mission Viejo
State	California
ZIP Code + 4	92691
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	

### 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)	18. Signed	Treasurer (If other title, see instructions)
Title	Other (Specify) CEO	Title	Treasurer
On	03/19/2012	On	03/19/2012
Date	949 452-1840	Date	949 452-1840
Telephone Number		Telephone Number	

Name of Person Filing: Erick Becker	File Number C- 00367
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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 <input type="text" value="See Attached"/> Trade Name <input type="text"/> Attention To <input type="text"/> <input type="text"/> Title <input type="text"/>		Mailing Address: P.O. Box, Building and Room Number, if any <input type="text"/> Street <input type="text"/> City <input type="text"/> State <input type="text"/> ZIP Code + 4 <input type="text"/>	
5.b. Termination Date <input type="text" value="See Attached"/>		5.c. Amount <input type="text" value="70,443"/>	
6. TOTAL RECEIPTS FROM ALL EMPLOYERS 70,443			

**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			
Terren	<input type="checkbox"/>	Becker	38,767	10,264	49,031	9. Office and Administrative Expenses	<input type="text" value="7,040"/>
Erick	<input type="checkbox"/>	Becker	3,498	1,560	5,058	10. Publicity	<input type="text"/>
	<input type="checkbox"/>					11. Fees for Professional Services	<input type="text"/>
	<input type="checkbox"/>					12. Loans Made	<input type="text"/>
	<input type="checkbox"/>					13. Other Disbursements	<input type="text"/>
8. Total disbursements to officers and employees:					54,089	14. Total Disbursements (Sum of Items 8-13)	61,129

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

**The American Consulting Group, Inc.**  
**LM-21 (1/1/11-12/31/11)**  
**Item B.5 Statement of Receipts**

<u>Name and Address of Employer</u>	<u>Termination Date</u>	<u>Amount</u>
Austin Creek Materials, Inc. 2900 Mendocino Ave., Suite 200 Santa Rosa, CA 95403	10/15/11	\$4,590
Elite Line Services, Inc. 1505 Luna Road Carrollton, TX 75006	12/15/11	\$27,030
Elite Line Services, Inc. 1505 Luna Road Carrollton, TX 75006	12/15/11	\$5,830
Inland Kenworth (US), Inc. 9730 Cherry Ave. Fontana, CA 92335	6/30/11	\$30,475
Murray Mechanical Services, Inc. 6905 Oslo Cir., Suite H Buena Park, CA 90620	6/30/11	\$2,518
Total Persuader Receipts		\$70,443