

Washington, DC 20210

FORM LM-21 RECEIPTS AND DISBURSEMENTS REPORT

Form approved Office of Management and Budget No. 1245-0003 Expires 10-31-2013

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)



A. Person Filing

Name

Title

Street

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

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

Organization LRI Consulting Services Inc

7850 South Elm Place, Suite E

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

522596

1 . File Number C- 00525	Period Covered By This Report	Month/Day/Year (mm/dd/yyyy)	;	Month/Day/Year (mm/dd/yyyy)
	From:	1 / 1 / 2012	Through:	12 / 31 / 2012

Name

Title

Street

Organization

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

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

City	Broken Arrow			City			•
State	OK	ZIP Code + 4	74011	State		ZIP Code	e + 4
		•				. '	
			Signa	tures			· .
information	contained in any acc	under penalty of perjury and oth Impanying documents) has be Section on penalties in the ins	en examined by the	es of law, that a e signatory and	all of the information of the dis, to the best of the	submitted in this report (incle e undersigned's knowledg	uding the early and belief, true,
17. Signed	kolala ceo	(if	resident other title, see structions)	18. Signed	Treasurer	MAR	Treasurer (If other title, see
115	020	ш	structions)	Title			instructions)
On3	/ 26 / 2013	918-455-9995		On3	/ 26 / 2013	918-455-9995	
	Date	Telephone Number		-	Date	Telephone Number	

Name of Person Filing: LRI Consulting Services Inc	File Number C- 00525	
B. Statement of Receipts Report all receipts from employers in conne or services.	ection with labor relations advice or services regardless of the purposes of the advice	
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any	
Employer See Attached		
Trade Name	Street	
Attention To	City	

State

ZIP Code + 4

5.b. Termination Date 5.c. Amount

6. TOTAL RECEIPTS FROM ALL EMPLOYERS \$4,020,558.80

Title

C. Statement of Disbursements	Report all disbursements to the employers listed in		e reporting organiz	ation in connection with labor relations advice or services rendered
7. Disbursements to Officers and Emp (a) Name	loyees: (b) Sälary	(c) Expense	es (d) Totals	
				Office and Administrative Expenses
				10. Publicity
				11. Fees for Professional Services
				12. Loans Made
				13. Other Disbursements
8. Total disbursements to officers a	nd 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:	15.b. Trade Name, İf any:
See Attached	
15.c. To Whom Paid	15.d. Amount
Name	15.e. Purpose
Title	·
Organization	
	·
P.O. Box, Building and Room Number, if any	
Street	
City	
State ZIP Code + 4	4

Name of Person Filing: LRI Consulting Services Inc		File Number C- 00525
B. Statement of Receipts Report all receipts from employers in connection advice or services.	with labor relations advice or s	ervices regardless of the purposes of the
5.a.Name and Address of Employer (including trade name, if any).	Mailing Addres P.O. Box, Building and R	
Employer Ada S McKinley Community Services Inc		
Trade Name		Washington Boulevard
Attention To: George Jr	City Chicago	
Title Executive Director	State IL	ZIP Code + 4 60607
5.b. Termination Date 10/9/2012	5.c. Amount 20,808	
5.a.Name and Address of Employer (including trade name, if any).	Mailing Addres P.O. Box, Building and R	
Employer Alro Steel Corporation		
Trade Name	·	High Street
Attention To: Dave Zontek	City Jackson	
Title Director of Human Resources	State MI	ZIP Code + 4 49203
5.b. Termination Date	5.c. Amount 9,000	· · · · · · · · · · · · · · · · · · ·
5.a.Name and Address of Employer (including trade name, if any).	Mailing Addres P.O. Box, Building and R	
Employer Apogee Trucking	Street 226 Talmad	go Boad
Trade Name Attention To: Dave Kloeber	City Edison	ge Road
Attention To: Dave Kloeber Title CEO	State NJ	ZIP Code + 4 08817
5.b. Termination Date 8/13/2012	5.c. Amount 81,150	211 0000 7 4 00017
	<u></u>	
5.a.Name and Address of Employer (including trade name, if any). Employer Asplundh Tree Expert Co.	Mailing Addres P.O. Box, Building and R	
Trade Name	Street 708 Blair	Mill Road
Attention To: John Dettl	City Willow Gro	
Title Director	State PA	ZIP Code + 4 19080
5.b. Termination Date 4/9/2012	5.c. Amount 7, 659	
5.a.Name and Address of Employer (including trade name, if any).	Mailing Addres	s;
	P.O. Box, Building and R	oom Number, if any
Employer ATMI Pre-Cast	•	oom Number, if any
Employer ATMI Pre-Cast Trade Name	•	
• •	P.O. Box, Building and R	·
Trade Name	P.O. Box, Building and R	·
Trade Name Attention To: Paul Carr	P.O. Box, Building and R Street 960 Ridgew City Aurora	ay Avenue
Trade Name Attention To: Paul Carr Title CEO 5.b. Termination Date 2/8/2012 5.a. Name and Address of Employer (including trade name, if any).	P.O. Box, Building and R Street 960 Ridgew City Aurora State IL	ay Avenue ZIP Code + 4 60506 s:
Trade Name Attention To: Paul Carr Title CEO 5.b. Termination Date 2/8/2012 5.a. Name and Address of Employer (including trade name, if any). Employer Atrium Corporation	P.O. Box, Building and R Street 960 Ridgew City Aurora State IL 5.c. Amount 7,072 Mailing Addres P.O. Box, Building and R	ay Avenue ZIP Code + 4 60506 s: oom Number, if any
Trade Name Attention To: Paul Carr Title CEO 5.b. Termination Date 2/8/2012 5.a. Name and Address of Employer (including trade name, if any). Employer Atrium Corporation Trade Name	P.O. Box, Building and R Street 960 Ridgew City Aurora State IL 5.c. Amount 7,072 Mailing Address P.O. Box, Building and R Street 3890 W. No	ay Avenue ZIP Code + 4 60506 s:
Trade Name Attention To: Paul Carr Title CEO 5.b. Termination Date 2/8/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Atrium Corporation Trade Name Attention To: Nancy Litzler	P.O. Box, Building and R Street 960 Ridgew City Aurora State IL 5.c. Amount 7,072 Mailing Addres P.O. Box, Building and R Street 3890 W. No City Dallas	ay Avenue ZIP Code + 4 60506 s: oom Number, if any rthwest Highway, Suite
Trade Name Attention To: Paul Carr Title CEO 5.b. Termination Date 2/8/2012 5.a. Name and Address of Employer (including trade name, if any). Employer Atrium Corporation Trade Name	P.O. Box, Building and R Street 960 Ridgew City Aurora State IL 5.c. Amount 7,072 Mailing Address P.O. Box, Building and R Street 3890 W. No	ay Avenue ZIP Code + 4 60506 s: oom Number, if any

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Name of Person Filing: LRI Consulting Services Inc	File Number C- 00525
B. Statement of Receipts Report all receipts from employers in connection advice or services.	on with labor relations advice or services regardless of the purposes of the
5.a.Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any
Employer Augustana Health Care Center	
Trade Name	Street 1007 East 14th Street
Attention To: Mike Johnson	City Minneapolis
Title Vice President	State MN ZIP Code + 4 55404
5.b. Termination Date 11/13/2012	5.c. Amount 6, 415
5.a.Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any
Employer Bay Area Beverage Company	1.0. box, building and noom Number, it arry
Trade Name	Street 700 National Court
Attention To: T.J Louderback	City Richmond
Title President & General Manager	State CA ZIP Code + 4 94804
5.b. Termination Date 4/19/2012	5.c. Amount 6, 547
5.b. Terrimiation Date 4/15/2012	S.C. Amount 0, 547
5.a.Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any
Employer Baystate Wine	
Trade Name	Street 40 Robbie Road
Attention To: Gina Payzant	City Avon
Title HR Director	State MA ZIP Code + 4 02322
5.b. Termination Date 3/12/2012	5.c. Amount 519
5.a.Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any
Employer Bison Laboratories	Street 100 Leslie Street
Trade Name	
Attention To: Steven Morber	City Buffalo State NY ZIP Code + 4 14223
Title General Manager 5.b. Termination Date 5/18/2012	5.c. Amount 3, 462
5.b. remination Date 5/16/2012	3.C. Alliount 3, 402
5.a.Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any
Employer Bob's Discount Furniture	0
Trade Name	Street 428 Tollland Tpke
Attention To: Bob Dawley	City Manchester
Title VP of Human Resources	State CT ZIP Code + 4 06040
5.b. Termination Date 1/5/2012	5.c. Amount -33, 734
5.a.Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any
Employer Bruce Packaging	
Trade Name	Street 811 N. 1st Street
Attention To: Jake DeSoto	City Silverton
Title .	State OR ZIP Code + 4 97381
5.b. Termination Date 8/13/2012	5.c. Amount 142, 849

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Name of Person Filing: LRI Consulting Services Inc	File Number C- 00525	
B. Statement of Receipts Report all receipts from employers in connection advice or services.	ith labor relations advice or services regardless of the purposes of the	
5.a.Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any	
Employer Buffalo Wild Wings, Inc.		
Trade Name	Street 500 Wayzata Boulevard, Suite 1600	
Attention To: Dave Langefels	City Minneapolis	
Title	State MN ZIP Code + 4 5541	L 6
5.b. Termination Date 5/24/2012	5.c. Amount 4, 026	
5.a.Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any	
Employer Campbell Soup Company		
Trade Name	Street 1 Campbell Place	
Attention To: Donald Shanin	City Camden	
Title Vice President - Corporate	State NJ ZIP Code + 4 0810	03
5.b. Termination Date 4/19/2012	5.c. Amount 8,500	
5.a.Name and Address of Employer (including trade name, if any). Employer Cargill Meat Solutions	Mailing Address: P.O. Box, Building and Room Number, if any	 .
Trade Name	Street 1529 23rd Street	
Attention To: Brenda Pirkel	City Columbus	
Title Vice President	State NE ZIP Code + 4 6860	11
THE VICE FIESTACHE	Clair NE 211 COGO 1 4 COGO	-
5.b. Termination Date 11/5/2012	5.c. Amount 7, 012	
5.b. Termination Date 11/5/2012 5.a. Name and Address of Employer (including trade name, if any).	5.c. Amount 7, 012 Mailing Address:	
5.a.Name and Address of Employer (including trade name, if any).		
5.a.Name and Address of Employer (including trade name, if any). Employer Clarkson Eyecare Inc	Mailing Address: P.O. Box, Building and Room Number, if any	
5.a.Name and Address of Employer (including trade name, if any). Employer Clarkson Eyecare Inc Trade Name	Mailing Address: P.O. Box, Building and Room Number, if any Street 217 Clarkson Road	
5.a.Name and Address of Employer (including trade name, if any). Employer Clarkson Eyecare Inc Trade Name Attention To: Gerry Jehling	Mailing Address: P.O. Box, Building and Room Number, if any Street 217 Clarkson Road City Ellisville	
5.a.Name and Address of Employer (including trade name, if any). Employer Clarkson Eyecare Inc Trade Name	Mailing Address: P.O. Box, Building and Room Number, if any Street 217 Clarkson Road	11
5.a.Name and Address of Employer (including trade name, if any). Employer Clarkson Eyecare Inc Trade Name Attention To: Gerry Jehling	Mailing Address: P.O. Box, Building and Room Number, if any Street 217 Clarkson Road City Ellisville	11
5.a.Name and Address of Employer (including trade name, if any). Employer Clarkson Eyecare Inc Trade Name Attention To: Gerry Jehling- Title President 5.b. Termination Date 6/15/2012 5.a.Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any Street 217 Clarkson Road City Ellisville State MO ZIP Code + 4 6301	11
5.a.Name and Address of Employer (including trade name, if any). Employer Clarkson Eyecare Inc Trade Name Attention To: Gerry Jehling Title President 5.b. Termination Date 6/15/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Clean Harbor Environmental Services	Mailing Address: P.O. Box, Building and Room Number, if any Street 217 Clarkson Road City Ellisville State MO ZIP Code + 4 6301 5.c. Amount 88,075 Mailing Address: P.O. Box, Building and Room Number, if any	11
5.a.Name and Address of Employer (including trade name, if any). Employer Clarkson Eyecare Inc Trade Name Attention To: Gerry Jehling Title President 5.b. Termination Date 6/15/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Clean Harbor Environmental Services Trade Name	Mailing Address: P.O. Box, Building and Room Number, if any Street 217 Clarkson Road City Ellisville State MO ZIP Code + 4 6301 5.c. Amount 88,075 Mailing Address: P.O. Box, Building and Room Number, if any Street 3 Sutton Place	11
5.a. Name and Address of Employer (including trade name, if any). Employer Clarkson Eyecare Inc Trade Name Attention To: Gerry Jehling Title President 5.b. Termination Date 6/15/2012 5.a. Name and Address of Employer (including trade name, if any). Employer Clean Harbor Environmental Services Trade Name Attention To: Mark SPHR	Mailing Address: P.O. Box, Building and Room Number, if any Street 217 Clarkson Road City Ellisville State MO ZIP Code + 4 6301 5.c. Amount 88,075 Mailing Address: P.O. Box, Building and Room Number, if any Street 3 Sutton Place City Edison	
5.a.Name and Address of Employer (including trade name, if any). Employer Clarkson Eyecare Inc Trade Name Attention To: Gerry Jehling Title President 5.b. Termination Date 6/15/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Clean Harbor Environmental Services Trade Name	Mailing Address: P.O. Box, Building and Room Number, if any Street 217 Clarkson Road City Ellisville State MO ZIP Code + 4 6301 5.c. Amount 88,075 Mailing Address: P.O. Box, Building and Room Number, if any Street 3 Sutton Place City Edison State NJ ZIP Code + 4 0883	
5.a. Name and Address of Employer (including trade name, if any). Employer Clarkson Eyecare Inc Trade Name Attention To: Gerry Jehling Title President 5.b. Termination Date 6/15/2012 5.a. Name and Address of Employer (including trade name, if any). Employer Clean Harbor Environmental Services Trade Name Attention To: Mark SPHR	Mailing Address: P.O. Box, Building and Room Number, if any Street 217 Clarkson Road City Ellisville State MO ZIP Code + 4 6301 5.c. Amount 88,075 Mailing Address: P.O. Box, Building and Room Number, if any Street 3 Sutton Place City Edison	
5.a. Name and Address of Employer (including trade name, if any). Employer Clarkson Eyecare Inc Trade Name Attention To: Gerry Jehling Title President 5.b. Termination Date 6/15/2012 5.a. Name and Address of Employer (including trade name, if any). Employer Clean Harbor Environmental Services Trade Name Attention To: Mark SPHR Title Director of Labor and Employee 5.b. Termination Date 7/9/2012 5.a. Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any Street 217 Clarkson Road City Ellisville State MO ZIP Code + 4 6301 5.c. Amount 88,075 Mailing Address: P.O. Box, Building and Room Number, if any Street 3 Sutton Place City Edison State NJ ZIP Code + 4 0881	
5.a.Name and Address of Employer (including trade name, if any). Employer Clarkson Eyecare Inc Trade Name Attention To: Gerry Jehling Title President 5.b. Termination Date 6/15/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Clean Harbor Environmental Services Trade Name Attention To: Mark SPHR Title Director of Labor and Employee 5.b. Termination Date 7/9/2012	Mailing Address: P.O. Box, Building and Room Number, if any Street 217 Clarkson Road City Ellisville State MO ZIP Code + 4 6301 5.c. Amount 88,075 Mailing Address: P.O. Box, Building and Room Number, if any Street 3 Sutton Place City Edison State NJ ZIP Code + 4 0881 5.c. Amount 35,575 Mailing Address: P.O. Box, Building and Room Number, if any	
5.a. Name and Address of Employer (including trade name, if any). Employer Clarkson Eyecare Inc Trade Name Attention To: Gerry Jehling Title President 5.b. Termination Date 6/15/2012 5.a. Name and Address of Employer (including trade name, if any). Employer Clean Harbor Environmental Services Trade Name Attention To: Mark SPHR Title Director of Labor and Employee 5.b. Termination Date 7/9/2012 5.a. Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any Street 217 Clarkson Road City Ellisville State MO ZIP Code + 4 6301 5.c. Amount 88,075 Mailing Address: P.O. Box, Building and Room Number, if any Street 3 Sutton Place City Edison State NJ ZIP Code + 4 0881 5.c. Amount 35,575 Mailing Address:	
5.a.Name and Address of Employer (including trade name, if any). Employer Clarkson Eyecare Inc Trade Name Attention To: Gerry Jehling Title President 5.b. Termination Date 6/15/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Clean Harbor Environmental Services Trade Name Attention To: Mark SPHR Title Director of Labor and Employee 5.b. Termination Date 7/9/2012 5.a.Name and Address of Employer (including trade name, if any). Employer COIM USA, Inc.	Mailing Address: P.O. Box, Building and Room Number, if any Street 217 Clarkson Road City Ellisville State MO ZIP Code + 4 6301 5.c. Amount 88,075 Mailing Address: P.O. Box, Building and Room Number, if any Street 3 Sutton Place City Edison State NJ ZIP Code + 4 0881 5.c. Amount 35,575 Mailing Address: P.O. Box, Building and Room Number, if any Street 286 Mantua Grove Road City West Deptford	17
5.a.Name and Address of Employer (including trade name, if any). Employer Clarkson Eyecare Inc Trade Name Attention To: Gerry Jehling Title President 5.b. Termination Date 6/15/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Clean Harbor Environmental Services Trade Name Attention To: Mark SPHR Title Director of Labor and Employee 5.b. Termination Date 7/9/2012 5.a.Name and Address of Employer (including trade name, if any). Employer COIM USA, Inc. Trade Name	Mailing Address: P.O. Box, Building and Room Number, if any Street 217 Clarkson Road City Ellisville State MO ZIP Code + 4 6301 5.c. Amount 88,075 Mailing Address: P.O. Box, Building and Room Number, if any Street 3 Sutton Place City Edison State NJ ZIP Code + 4 0881 5.c. Amount 35,575 Mailing Address: P.O. Box, Building and Room Number, if any Street 286 Mantua Grove Road	17

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Name of Person Filing: LRI Consulting Services Inc		File Number C- 00525
B. Statement of Receipts Report all receipts from employers in connection vadvice or services.	rith labor relations advice or s	services regardless of the purposes of the
5.a.Name and Address of Employer (including trade name, if any).	Mailing Addres	
Employer Confident Care Corporation		
Trade Name		on Plaza, Suite 415
Attention To: Joe Cosentino	City Paterson	
Title	State NJ	ZIP Code + 4 07505
5.b. Termination Date 11/8/2012	5.c. Amount 55, 632	
5.a.Name and Address of Employer (including trade name, if any).	Mailing Addres P.O. Box, Building and F	
Employer Cooper Health Systems		
Trade Name	_	er Plaza, Suite 316
Attention To: Gary Lesneski	City Camden	
Title Senior Executive VP & General	State NJ	ZIP Code.+ 4 08103
5.b. Termination Date 10/19/2012	5.c. Amount 20, 314	
5.a.Name and Address of Employer (including trade name, if any). Employer Daniel C. Tanney, Inc	Mailing Address P.O. Box, Building and F	
Trade Name	Street 3268 Clive	. Avenue
Attention To: Jim Tanney	City	
Title	State PA	ZIP Code + 4 19020
	 	
5.b. Termination Date 3/15/2012	5.c. Amount 6, 000	
5.b. Termination Date 3/15/2012 5.a.Name and Address of Employer (including trade name, if any).	Mailing Addres	
5.a.Name and Address of Employer (including trade name, if any).	Mailing Addres	Room Number, if any
5.a.Name and Address of Employer (including trade name, if any). Employer Diversified Restaurant Holdings	Mailing Addres P.O. Box, Building and F	Room Number, if any
5.a.Name and Address of Employer (including trade name, if any). Employer Diversified Restaurant Holdings Trade Name	Mailing Address P.O. Box, Building and F Street 27680 Fran	Room Number, if any
5.a.Name and Address of Employer (including trade name, if any). Employer Diversified Restaurant Holdings Trade Name Attention To: Kristine Werda	Mailing Addres P.O. Box, Building and F Street 27680 Fran City Southfield	Room Number, if any aklin Road
5.a.Name and Address of Employer (including trade name, if any). Employer Diversified Restaurant Holdings Trade Name Attention To: Kristine Werda Title VP Team Member Relations 5.b. Termination Date 7/23/2012 5.a.Name and Address of Employer (including trade name, if any).	Mailing Addres P.O. Box, Building and F Street 27680 Fran City Southfield State MI	Room Number, if any kklin Road ZIP Code + 4 48034
5.a.Name and Address of Employer (including trade name, if any). Employer Diversified Restaurant Holdings Trade Name Attention To: Kristine Werda Title VP Team Member Relations 5.b. Termination Date 7/23/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Doss Aviation	Mailing Addres P.O. Box, Building and F Street 27680 Fran City Southfield State MI 5.c. Amount 2,007 Mailing Addres P.O. Box, Building and F	Room Number, if any Rklin Road ZIP Code + 4 48034 SS: Room Number, if any
5.a.Name and Address of Employer (including trade name, if any). Employer Diversified Restaurant Holdings Trade Name Attention To: Kristine Werda Title VP Team Member Relations 5.b. Termination Date 7/23/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Doss Aviation Trade Name	Mailing Addres P.O. Box, Building and F Street 27680 Fran City Southfield State MI 5.c. Amount 2,007 Mailing Addres P.O. Box, Building and F Street 3320 West	Room Number, if any ZIP Code + 4 48034 SS: Room Number, if any Carefree Circle
5.a.Name and Address of Employer (including trade name, if any). Employer Diversified Restaurant Holdings Trade Name Attention To: Kristine Werda Title VP Team Member Relations 5.b. Termination Date 7/23/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Doss Aviation Trade Name Attention To: Catherine Archuleta	Mailing Addres P.O. Box, Building and F Street 27680 Fran City Southfield State MI 5.c. Amount 2,007 Mailing Addres P.O. Box, Building and F Street 3320 West City Colorado S	Room Number, if any ZIP Code + 4 48034 SS: Room Number, if any Carefree Circle Springs
5.a.Name and Address of Employer (including trade name, if any). Employer Diversified Restaurant Holdings Trade Name Attention To: Kristine Werda Title VP Team Member Relations 5.b. Termination Date 7/23/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Doss Aviation Trade Name Attention To: Catherine Archuleta Title Human Resources Director	Mailing Addres P.O. Box, Building and F Street 27680 Fran City Southfield State MI 5.c. Amount 2,007 Mailing Addres P.O. Box, Building and F Street 3320 West City Colorado S State CO	Room Number, if any ZIP Code + 4 48034 SS: Room Number, if any Carefree Circle
5.a.Name and Address of Employer (including trade name, if any). Employer Diversified Restaurant Holdings Trade Name Attention To: Kristine Werda Title VP Team Member Relations 5.b. Termination Date 7/23/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Doss Aviation Trade Name Attention To: Catherine Archuleta	Mailing Addres P.O. Box, Building and F Street 27680 Fran City Southfield State MI 5.c. Amount 2,007 Mailing Addres P.O. Box, Building and F Street 3320 West City Colorado S	Room Number, if any ZIP Code + 4 48034 SS: Room Number, if any Carefree Circle Springs
5.a.Name and Address of Employer (including trade name, if any). Employer Diversified Restaurant Holdings Trade Name Attention To: Kristine Werda Title VP Team Member Relations 5.b. Termination Date 7/23/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Doss Aviation Trade Name Attention To: Catherine Archuleta Title Human Resources Director 5.b. Termination Date 2/27/2012 5.a.Name and Address of Employer (including trade name, if any).	Mailing Addres P.O. Box, Building and F Street 27680 Fran City Southfield State MI 5.c. Amount 2,007 Mailing Addres P.O. Box, Building and F Street 3320 West City Colorado S State CO	ZIP Code + 4 48034 ZIP Code + 4 48034 SS: Room Number, if any Carefree Circle Springs ZIP Code + 4 80917
5.a.Name and Address of Employer (including trade name, if any). Employer Diversified Restaurant Holdings Trade Name Attention To: Kristine Werda Title VP Team Member Relations 5.b. Termination Date 7/23/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Doss Aviation Trade Name Attention To: Catherine Archuleta Title Human Resources Director 5.b. Termination Date 2/27/2012	Mailing Addres P.O. Box, Building and F Street 27680 Fran City Southfield State MI 5.c. Amount 2,007 Mailing Addres P.O. Box, Building and F Street 3320 West City Colorado S State CO 5.c. Amount 3,589 Mailing Addres P.O. Box, Building and F	Room Number, if any ZIP Code + 4 48034 ZIP Code + 4 48034 SS: Room Number, if any ZIP Code + 4 80917 SS: Room Number, if any
5.a.Name and Address of Employer (including trade name, if any). Employer Diversified Restaurant Holdings Trade Name Attention To: Kristine Werda Title VP Team Member Relations 5.b. Termination Date 7/23/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Doss Aviation Trade Name Attention To: Catherine Archuleta Title Human Resources Director 5.b. Termination Date 2/27/2012 5.a.Name and Address of Employer (including trade name, if any). Employer DPI Secuprint, Inc. Trade Name	Mailing Addres P.O. Box, Building and F Street 27680 Fram City Southfield State MI 5.c. Amount 2,007 Mailing Addres P.O. Box, Building and F Street 3320 West City Colorado S State CO 5.c. Amount 3,589 Mailing Addres P.O. Box, Building and F Street 1560 Emers	Room Number, if any ZIP Code + 4 48034 ZIP Code + 4 48034 SS: Room Number, if any ZIP Code + 4 80917 SS: Room Number, if any
5.a.Name and Address of Employer (including trade name, if any). Employer Diversified Restaurant Holdings Trade Name Attention To: Kristine Werda Title VP Team Member Relations 5.b. Termination Date 7/23/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Doss Aviation Trade Name Attention To: Catherine Archuleta Title Human Resources Director 5.b. Termination Date 2/27/2012 5.a.Name and Address of Employer (including trade name, if any). Employer DPI Secuprint, Inc.	Mailing Address P.O. Box, Building and F Street 27680 Fram City Southfield State MI 5.c. Amount 2,007 Mailing Address P.O. Box, Building and F Street 3320 West City Colorado S State CO 5.c. Amount 3,589 Mailing Address P.O. Box, Building and F Street 1560 Emers City Rochester	ZIP Code + 4 48034 ZIP Code + 4 48034 ZIP Code + 4 48034 SS: Room Number, if any ZIP Code + 4 80917 ZIP Code + 4 80917
5.a.Name and Address of Employer (including trade name, if any). Employer Diversified Restaurant Holdings Trade Name Attention To: Kristine Werda Title VP Team Member Relations 5.b. Termination Date 7/23/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Doss Aviation Trade Name Attention To: Catherine Archuleta Title Human Resources Director 5.b. Termination Date 2/27/2012 5.a.Name and Address of Employer (including trade name, if any). Employer DPI Secuprint, Inc. Trade Name	Mailing Addres P.O. Box, Building and F Street 27680 Fram City Southfield State MI 5.c. Amount 2,007 Mailing Addres P.O. Box, Building and F Street 3320 West City Colorado S State CO 5.c. Amount 3,589 Mailing Addres P.O. Box, Building and F Street 1560 Emers	Room Number, if any ZIP Code + 4 48034 ZIP Code + 4 48034 SS: Room Number, if any ZIP Code + 4 80917 SS: Room Number, if any

Page 6 of 65

with labor relations advice or services regardless of the purposes of the Mailing Address: P.O. Box, Building and Room Number, if any Street 1750 South Wolf Road City Des Plaines State IL ZIP Code + 4 600 5.c. Amount 7,141 Mailing Address: P.O. Box, Building and Room Number, if any Street 801 Royal Oaks Drive City Monrovia	
P.O. Box, Building and Room Number, if any Street 1750 South Wolf Road City Des Plaines State IL ZIP Code + 4 600 5.c. Amount 7,141 Mailing Address: P.O. Box, Building and Room Number, if any Street 801 Royal Oaks Drive	18
City Des Plaines State IL ZIP Code + 4 600 5.c. Amount 7,141 Mailing Address: P.O. Box, Building and Room Number, if any Street 801 Royal Oaks Drive	18
City Des Plaines State IL ZIP Code + 4 600 5.c. Amount 7,141 Mailing Address: P.O. Box, Building and Room Number, if any Street 801 Royal Oaks Drive	18
State IL ZIP Code + 4 600 5.c. Amount 7,141 Mailing Address: P.O. Box, Building and Room Number, if any Street 801 Royal Oaks Drive	18
Mailing Address: P.O. Box, Building and Room Number, if any Street 801 Royal Oaks Drive	18
Mailing Address: P.O. Box, Building and Room Number, if any Street 801 Royal Oaks Drive	
P.O. Box, Building and Room Number, if any Street 801 Royal Oaks Drive	
-	
-	
City Monrovia	
717.0 1 6 01.0	1.0
State CA ZIP Code + 4 910	16
5.c. Amount 122,442	
Mailing Address: P.O. Box, Building and Room Number, if any	
Street 12015 115+h Avenue NE #105	
•	21
5.c. Amount 17,301	
Mailing Address	
P.O. Box, Building and Room Number, if any	
Street 404 Airport Drive	
City Yoakum	
State TX ZIP Code + 4 779	95
5.c. Amount 232,138	
Mailing Address: P.O. Box, Building and Room Number, if any	
Street 500 North Sam Houston Boad	
	49
5.c. Amount 62, 435	
Mailing Address: P.O. Box, Building and Room Number, if any	
Street 330 Flm Street	
	10
1	
	Mailing Address: P.O. Box, Building and Room Number, if any Street 12015 115th Avenue NE #195 City Kirkland State WA ZIP Code + 4 980 5.c. Amount 17,301 Mailing Address: P.O. Box, Building and Room Number, if any Street 404 Airport Drive City Yoakum State TX ZIP Code + 4 779 5.c. Amount 232,138 Mailing Address: P.O. Box, Building and Room Number, if any Street 500 North Sam Houston Road City Mesquite State TX ZIP Code + 4 751 5.c. Amount 62,435 Mailing Address:

Name of Person Filing: LRI Consulting Services Inc		File Number C- 00525
B. Statement of Receipts Report all receipts from employers in connection wadvice or services.	vith labor relations advice or s	services regardless of the purposes of the
5:a.Name and Address of Employer (including trade name, if any).	Mailing Addres P.O. Box, Building and F	
Employer G & K Services		
Trade Name	Street 5995 Opus	Parkway
Attention To: Dave Dingee	City Minnetonka	
Title Labor Relations	State MN	ZIP Code + 4 55343
5.b. Termination Date 4/6/2012	5.c. Amount 1,500	
5.a.Name and Address of Employer (including trade name, if any).	Mailing Addres P.O. Box, Building and F	•
Employer General Electric		
Trade Name	Street 3135 Easto	n Turnpike
Attention To: Thomas Lavalle	City Fairfield	
Title Global Personnel Relations	State CT	ZIP Code + 4 06828
5.b. Termination Date 10/29/2012	5.c. Amount 22, 202	
5.a.Name and Address of Employer (including trade name, if any). Employer Golden Farm Church	Mailing Addres P.O. Box, Building and F	
Trade Name	Street 329 Church	Avenue
Attention To: Sonny Kim	City Brooklyn	
Title Owner	State NY	ZIP Code + 4 11218
5.b. Termination Date 6/1/2012	5.c. Amount 49, 211	
5.a.Name and Address of Employer (including trade name, if any). Employer HealthSouth Rehab Hospital of Spring Hil	Mailing Addres P.O. Box, Building and F	
Trade Name		ez Boulevard
Attention To: Chris Terrell	City Brooksvill	
Title National Director, Associate	State FL	ZIP Code + 4 34613
5.b. Termination Date	5.c. Amount 35, 034	<u> </u>
5.a. Name and Address of Employer (including trade name, if any). Employer HollyFrontier Companies	Mailing Addres P.O. Box, Building and F	
	Street 3333 South	west Boulevard
Trade Name Attention To: Kim Little	City Tulsa	nggo Dourevara
Title Human Resources Manager	State OK	ZIP Code + 4 74107
5.b. Termination Date	5.c. Amount 219,791	
5.a.Name and Address of Employer (including trade name, if any).	Mailing Addres P.O. Box, Building and R	
Employer Hunter Jersey Peterbilt & Paclease	P.O. Box, Building and F	toom Number, if any
Employer Hunter Jersey Peterbilt & Paclease Trade Name	P.O. Box, Building and F	toom Number, if any
Employer Hunter Jersey Peterbilt & Paclease	P.O. Box, Building and F Street 480 Pittsb City Butler	noom Number, if any
Employer Hunter Jersey Peterbilt & Paclease Trade Name	P.O. Box, Building and F	toom Number, if any

Name of Person Filing: LRI Consulting Services Inc		File Number C- 00525
B. Statement of Receipts Report all receipts from employers in connection values or services.	rith labor relations advice or s	ervices regardless of the purposes of the
5.a.Name and Address of Employer (including trade name, if any).	Mailing Addres P.O. Box, Building and R	
Employer International Paper Company		
Trade Name	Street 6400 Popla	r Avenue
Attention To: Al Drake	City Memphis	
Title Senior Consultant	State TN	ZIP Code + 4 38197
5.b. Termination Date 12/4/2012	5.c. Amount 3,768	
5.a.Name and Address of Employer (including trade name, if any).	Mailing Addres	
Employer Interplastic Corporation	, , , , , , , , , , , , , , , , , , ,	
Trade Name	Street 1225 Willo	w Lake Boulevard
Attention To: Ivan Levy	City St. Paul	
Title Vice President/General Counsel	State MN	ZIP Code + 4 55110
5.b. Termination Date 8/1/2012	5.c. Amount 65, 213	
5.a.Name and Address of Employer (including trade name, if any).	Mailing Addres	s:
	P.O. Box, Building and R	oom Number, if any
Employer Inventure Foods		
Trade Name		ustman Road
Attention To: Kirk Roles	City Bluffton	
Title Vice President of Human Resources	State IN	ZIP Code + 4 46714
5.b. Termination Date 9/24/2012	5.c. Amount 88, 361	
5.a.Name and Address of Employer (including trade name, if any).	5.c. Amount 88, 361 Mailing Addres P.O. Box, Building and R	
	Mailing Addres P.O. Box, Building and R	oom Number, if any
5.a.Name and Address of Employer (including trade name, if any).	Mailing Addres P.O. Box, Building and R Street 5757 North	
5.a.Name and Address of Employer (including trade name, if any). Employer Johnson Controls, Inc.	Mailing Addres P.O. Box, Building and R	oom Number, if any
5.a.Name and Address of Employer (including trade name, if any). Employer Johnson Controls, Inc. Trade Name	Mailing Addres P.O. Box, Building and R Street 5757 North	oom Number, if any
5.a.Name and Address of Employer (including trade name, if any). Employer Johnson Controls, Inc. Trade Name Attention To: Simon Davis	Mailing Addres P.O. Box, Building and R Street 5757 North City Milwaukee	oom Number, if any Green Bay Avenue
5.a.Name and Address of Employer (including trade name, if any). Employer Johnson Controls, Inc. Trade Name Attention To: Simon Davis Title Vice President HR - Battery	Mailing Addres P.O. Box, Building and R Street 5757 North City Milwaukee State WI	oom Number, if any Green Bay Avenue ZIP Code + 4 53209
5.a.Name and Address of Employer (including trade name, if any). Employer Johnson Controls, Inc. Trade Name Attention To: Simon Davis Title Vice President HR - Battery 5.b. Termination Date 2/6/2012	Mailing Addres P.O. Box, Building and R Street 5757 North City Milwaukee State WI 5.c. Amount 47,423	oom Number, if any Green Bay Avenue ZIP Code + 4 53209
5.a.Name and Address of Employer (including trade name, if any). Employer Johnson Controls, Inc. Trade Name Attention To: Simon Davis Title Vice President HR - Battery 5.b. Termination Date 2/6/2012 5.a.Name and Address of Employer (including trade name, if any).	Mailing Addres P.O. Box, Building and R Street 5757 North City Milwaukee State WI 5.c. Amount 47,423	oom Number, if any Green Bay Avenue ZIP Code + 4 53209 s: oom Number, if any
5.a.Name and Address of Employer (including trade name, if any). Employer Johnson Controls, Inc. Trade Name Attention To: Simon Davis Title Vice President HR - Battery 5.b. Termination Date 2/6/2012 5.a.Name and Address of Employer (including trade name, if any). Employer JWF Industries, Inc.	Mailing Addres P.O. Box, Building and R Street 5757 North City Milwaukee State WI 5.c. Amount 47,423 Mailing Addres P.O. Box, Building and R	oom Number, if any Green Bay Avenue ZIP Code + 4 53209 s: oom Number, if any
5.a.Name and Address of Employer (including trade name, if any). Employer Johnson Controls, Inc. Trade Name Attention To: Simon Davis Title Vice President HR - Battery 5.b. Termination Date 2/6/2012 5.a.Name and Address of Employer (including trade name, if any). Employer JWF Industries, Inc. Trade Name	Mailing Addres P.O. Box, Building and R Street 5757 North City Milwaukee State WI 5.c. Amount 47,423 Mailing Addres P.O. Box, Building and R Street 84 Iron St	oom Number, if any Green Bay Avenue ZIP Code + 4 53209 s: oom Number, if any
5.a.Name and Address of Employer (including trade name, if any). Employer Johnson Controls, Inc. Trade Name Attention To: Simon Davis Title Vice President HR - Battery 5.b. Termination Date 2/6/2012 5.a.Name and Address of Employer (including trade name, if any). Employer JWF Industries, Inc. Trade Name Attention To: Bill Polacek	Mailing Addres P.O. Box, Building and R Street 5757 North City Milwaukee State WI 5.c. Amount 47,423 Mailing Addres P.O. Box, Building and R Street 84 Iron St City Johnstown	oom Number, if any Green Bay Avenue ZIP Code + 4 53209 s: oom Number, if any
5.a.Name and Address of Employer (including trade name, if any). Employer Johnson Controls, Inc. Trade Name Attention To: Simon Davis Title Vice President HR - Battery 5.b. Termination Date 2/6/2012 5.a.Name and Address of Employer (including trade name, if any). Employer JWF Industries, Inc. Trade Name Attention To: Bill Polacek Title CEO 5.b. Termination Date 8/28/2012 5.a.Name and Address of Employer (including trade name, if any).	Mailing Addres P.O. Box, Building and R Street 5757 North City Milwaukee State WI 5.c. Amount 47, 423 Mailing Addres P.O. Box, Building and R Street 84 Iron St City Johnstown State PA	oom Number, if any Green Bay Avenue ZIP Code + 4 53209 s: oom Number, if any reet ZIP Code + 4 15906 s:
5.a.Name and Address of Employer (including trade name, if any). Employer Johnson Controls, Inc. Trade Name Attention To: Simon Davis Title Vice President HR - Battery 5.b. Termination Date 2/6/2012 5.a.Name and Address of Employer (including trade name, if any). Employer JWF Industries, Inc. Trade Name Attention To: Bill Polacek Title CEO 5.b. Termination Date 8/28/2012	Mailing Address P.O. Box, Building and R Street 5757 North City Milwaukee State WI 5.c. Amount 47,423 Mailing Address P.O. Box, Building and R Street 84 Iron St City Johnstown State PA 5.c. Amount 59,778 Mailing Address P.O. Box, Building and R	oom Number, if any Green Bay Avenue ZIP Code + 4 53209 s: oom Number, if any reet ZIP Code + 4 15906 s: oom Number, if any
5.a.Name and Address of Employer (including trade name, if any). Employer Johnson Controls, Inc. Trade Name Attention To: Simon Davis Title Vice President HR - Battery 5.b. Termination Date 2/6/2012 5.a.Name and Address of Employer (including trade name, if any). Employer JWF Industries, Inc. Trade Name Attention To: Bill Polacek Title CEO 5.b. Termination Date 8/28/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Ken Cannon Trade Name	Mailing Addres P.O. Box, Building and R Street 5757 North City Milwaukee State WI 5.c. Amount 47, 423 Mailing Addres P.O. Box, Building and R Street 84 Iron St City Johnstown State PA 5.c. Amount 59,778 Mailing Addres P.O. Box, Building and R Street 2207 Balla	oom Number, if any Green Bay Avenue ZIP Code + 4 53209 s: oom Number, if any reet ZIP Code + 4 15906 s: oom Number, if any ntrae Drive
5.a.Name and Address of Employer (including trade name, if any). Employer Johnson Controls, Inc. Trade Name Attention To: Simon Davis Title Vice President HR - Battery 5.b. Termination Date 2/6/2012 5.a.Name and Address of Employer (including trade name, if any). Employer JWF Industries, Inc. Trade Name Attention To: Bill Polacek Title CEO 5.b. Termination Date 8/28/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Ken Cannon	Mailing Address P.O. Box, Building and R Street 5757 North City Milwaukee State WI 5.c. Amount 47,423 Mailing Address P.O. Box, Building and R Street 84 Iron St City Johnstown State PA 5.c. Amount 59,778 Mailing Address P.O. Box, Building and R	oom Number, if any Green Bay Avenue ZIP Code + 4 53209 s: oom Number, if any reet ZIP Code + 4 15906 s: oom Number, if any ntrae Drive e
5.a.Name and Address of Employer (including trade name, if any). Employer Johnson Controls, Inc. Trade Name Attention To: Simon Davis Title Vice President HR - Battery 5.b. Termination Date 2/6/2012 5.a.Name and Address of Employer (including trade name, if any). Employer JWF Industries, Inc. Trade Name Attention To: Bill Polacek Title CEO 5.b. Termination Date 8/28/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Ken Cannon Trade Name	Mailing Addres P.O. Box, Building and R Street 5757 North City Milwaukee State WI 5.c. Amount 47, 423 Mailing Addres P.O. Box, Building and R Street 84 Iron St City Johnstown State PA 5.c. Amount 59,778 Mailing Addres P.O. Box, Building and R Street 2207 Balla	oom Number, if any Green Bay Avenue ZIP Code + 4 53209 s: oom Number, if any reet ZIP Code + 4 15906 s: oom Number, if any ntrae Drive

Form LM-21 (2003) Page 9 of 65

Form LM-21 (2003) Page 10 of 65

e of Person Filing: LRI Consulting Services Inc File Number C- 00525	
B. Statement of Receipts Report all receipts from employers in connecti advice or services.	tion with labor relations advice or services regardless of the purposes of the
5.a.Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any
Employer MediLodge	
Trade Name	Street 64500 Van Dyke
Attention To: Ms Culp	City Washington
Title	State MI ZIP Code + 4 48095
5.b. Termination Date 7/6/2012	5.c. Amount 42,031
5.a.Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any
Employer Mission Healthcare LLC	
Trade Name	Street 4420 Valleyview Road, Suite 201
Attention To: Tom Boerboom	City Edina
Title COO	State MN ZIP Code + 4 55424
5.b. Termination Date 1/23/2012	5.c. Amount 38,912
5.a.Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any
Employer Mission Healthcare LLC	Over ANDO Wellers Deed Orite 201
Trade Name	Street 4420 Valleyview Road, Suite 201
Attention To: Angela Fink	City Edina
Title Corporate VP HR	State MN ZIP Code + 4 55.424
5.b. Termination Date	5.c. Amount 7,709
5.a.Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any
Employer Montaplast	Street 2011 Hoover Boulevard
Trade Name	City Frankfort
Attention To: John Phillips	City Flankloic
Title Director of Human Resources	State KV 7IP Code + 4 40601
Title Director of Human Resources 5.b. Termination Date 10/9/2012	State KY ZIP Code + 4 40601 5.c. Amount 29,538
5.b. Termination Date 10/9/2012	
5.b. Termination Date 10/9/2012 5.a. Name and Address of Employer (including trade name, if any).	5.c. Amount 29, 538
5.b. Termination Date 10/9/2012 5.a. Name and Address of Employer (including trade name, if any). Employer Multiband	Mailing Address: P.O. Box, Building and Room Number, if any
5.b. Termination Date 10/9/2012 5.a. Name and Address of Employer (including trade name, if any). Employer Multiband Trade Name	Mailing Address: P.O. Box, Building and Room Number, if any Street 9449 Science Center Drive
5.b. Termination Date 10/9/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Multiband Trade Name Attention To: Jim Mandel	Mailing Address: P.O. Box, Building and Room Number, if any Street 9449 Science Center Drive City Minneapolis
5.b. Termination Date 10/9/2012 5.a. Name and Address of Employer (including trade name, if any). Employer Multiband Trade Name Attention To: Jim Mandel Title CEO	Mailing Address: P.O. Box, Building and Room Number, if any Street 9449 Science Center Drive City Minneapolis State MN ZIP Code + 4 55428
5.b. Termination Date 10/9/2012 5.a. Name and Address of Employer (including trade name, if any). Employer Multiband Trade Name Attention To: Jim Mandel	Mailing Address: P.O. Box, Building and Room Number, if any Street 9449 Science Center Drive City Minneapolis
5.b. Termination Date 10/9/2012 5.a. Name and Address of Employer (including trade name, if any). Employer Multiband Trade Name Attention To: Jim Mandel Title CEO 5.b. Termination Date 11/1/2012 5.a. Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any Street 9449 Science Center Drive City Minneapolis State MN ZIP Code + 4 55428
5.b. Termination Date 10/9/2012 5.a. Name and Address of Employer (including trade name, if any). Employer Multiband Trade Name Attention To: Jim Mandel Title CEO 5.b. Termination Date 11/1/2012	Mailing Address: P.O. Box, Building and Room Number, if any Street 9449 Science Center Drive City Minneapolis State MN ZIP Code + 4 55428 5.c. Amount 55,598 Mailing Address:
5.b. Termination Date 10/9/2012 5.a. Name and Address of Employer (including trade name, if any). Employer Multiband Trade Name Attention To: Jim Mandel Title CEO 5.b. Termination Date 11/1/2012 5.a. Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any Street 9449 Science Center Drive City Minneapolis State MN ZIP Code + 4 55428 5.c. Amount 55,598 Mailing Address:
5.b. Termination Date 10/9/2012 5.a. Name and Address of Employer (including trade name, if any). Employer Multiband Trade Name Attention To: Jim Mandel Title CEO 5.b. Termination Date 11/1/2012 5.a. Name and Address of Employer (including trade name, if any). Employer Nexcare Health Systems, LLC	Mailing Address: P.O. Box, Building and Room Number, if any Street 9449 Science Center Drive City Minneapolis State MN ZIP Code + 4 55428 5.c. Amount 55,598 Mailing Address: P.O. Box, Building and Room Number, if any
5.b. Termination Date 10/9/2012 5.a. Name and Address of Employer (including trade name, if any). Employer Multiband Trade Name Attention To: Jim Mandel Title CEO 5.b. Termination Date 11/1/2012 5.a. Name and Address of Employer (including trade name, if any). Employer Nexcare Health Systems, LLC Trade Name	Mailing Address: P.O. Box, Building and Room Number, if any Street 9449 Science Center Drive City Minneapolis State MN ZIP Code + 4 55428 5.c. Amount 55,598 Mailing Address: P.O. Box, Building and Room Number, if any Street 10503 Citation Drive, Suite 100
5.b. Termination Date 10/9/2012 5.a. Name and Address of Employer (including trade name, if any). Employer Multiband Trade Name Attention To: Jim Mandel Title CEO 5.b. Termination Date 11/1/2012 5.a. Name and Address of Employer (including trade name, if any). Employer Nexcare Health Systems, LLC Trade Name Attention To: Mike Hicks	Mailing Address: P.O. Box, Building and Room Number, if any Street 9449 Science Center Drive City Minneapolis State MN ZIP Code + 4 55428 5.c. Amount 55,598 Mailing Address: P.O. Box, Building and Room Number, if any Street 10503 Citation Drive, Suite 100 City Brighton

Name of Person Filing: LRI Consulting Services Inc	File Number C- 00525
B. Statement of Receipts Report all receipts from employers in connection advice or services.	with labor relations advice or services regardless of the purposes of the
5.a.Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any
Employer Next Generation Vending, LLC	
Trade Name	Street 800 Technology Center Drive, Suite
Attention To: Joel Burkowsky	City Stoughton
Title Vice President, Human Resources	State MA ZIP Code + 4 02072.
5.b. Termination Date 8/22/2012	5.c. Amount 33, 429
5.a.Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any
Employer Niagara Lutheran Health & Rehab Ctr	Observ. CA Harray Character
Trade Name	Street 64 Hagar Street
Attention To: Jurgen Arndt	City Buffalo
Title President/CEO	State NY ZIP Code + 4 14208
5.b. Termination Date 7/23/2012	5.c. Amount 72, 482
5.a.Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any
Employer Northwest Pipe Company	Street 200 C W Mankathlaga Shita 1900
Trade Name	Street 200 S.W. Marketplace, Suite 1800
Attention To: Winsor Jenkins	City Portland State OR ZIP Code + 4 97201
Title Corporate Director 5.b. Termination Date 3/12/2012	State OR ZIP Code + 4 97201 5.c. Amount 26, 058
3, 12, 121	
5.a.Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any
Employer NTN-Bower Corporation	Overt 707 Person Person
Trade Name	Street 707 Bower Road
Attention To: David Schollhammer	City Macomb
Title Corporate General Manager of HR 5.b. Termination Date 9/24/2012	State IL ZIP Code + 4 61455 5.c. Amount 396, 954
5.a.Name and Address of Employer (including trade name, if any).	Mailing Address:
Employer Oak Harbor Freight Lines Inc.	P.O. Box, Building and Room Number, if any
Trade Name	Street 853 South Maple Avenue
Attention To: Ron Kieswether	City Montebello
Title	State CA ZIP Code + 4 90640
5.b. Termination Date	5.c. Amount 27,000
5.a.Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any
Employer Old Bridge Chemicals	
Trade Name	Street Old Waterworks Road
Attention To: Wayne Jensen	City Old Bridge
Title	State NJ ZIP Code + 4 08857
5.b. Termination Date 10/22/2012	5.c. Amount 3, 525
	•

Name of Person Filing: LRI Consulting Services Inc	File Number C- 00525
B. Statement of Receipts Report all receipts from employers in connection wat advice or services.	ith labor relations advice or services regardless of the purposes of the
5.a.Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any
Employer Order Inn, Inc.	
Trade Name	Street 4330 South Valley View Boulevard,
Attention To: Eric Sutcliffe	City Las Vegas
Title CEO	State NV ZIP Code + 4 89103
5.b. Termination Date	5.c. Amount 0
5.a.Name and Address of Employer (including trade name, if any). Employer Panera Bread .	Mailing Address: P.O. Box, Building and Room Number, if any
Trade Name	Street 2339 11th Street
Attention To: Paul Saber	City Encinitas
Title CEO - President	State CA ZIP Code + 4 92024
5.b. Termination Date 4/5/2012	5.c. Amount 9, 431
5.a.Name and Address of Employer (including trade name, if any). Employer Paris Companies	Mailing Address: P.O. Box, Building and Room Number, if any
Trade Name	Street 67 Hoover Avenue
Attention To: Lori Jesberger	City DuBois
Title Director of Human Resources	State PA ZIP Code + 4 15801
5.b. Termination Date 12/18/2012	5.c. Amount 10, 831
5.a.Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any
Employer Park Aerospace Technologies Corporation	
Trade Name	Street 486 North Oliver, Building 2
Attention To: Steve Pittari	City Newton
Title President	State KS ZIP Code + 4 67114
5.b. Termination Date 6/6/2012	5.c. Amount 22,007
5.a.Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any
Employer Patriot Machining Manufacturing Services	
Trade Name Attention To: Phillip Hubbell	Street 512 Linden Street City Carlisle
Attention To: Phillip Hubbell Title Owner	State OH ZIP Code + 4 45005
5.b. Termination Date 6/28/2012	5.c. Amount 33, 319
	Mailing Address
5.a.Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any
Employer Pep Boys	Street 311 West Allegheny Avenue
Trade Name Attention To: Tom Ruggiere	City Philadelphia
Title Assistant VP of Human Resources	State PA ZIP Code + 4 19132
5.b. Termination Date 4/12/2012	5.c. Amount 1,500

Name of Person Filing: LRI Consulting Services Inc	File Number C- 00525
B. Statement of Receipts Report all receipts from employers in connection wandvice or services.	vith labor relations advice or services regardless of the purposes of the
5.a.Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any
Employer Pinnacle Foods Group LLC	0
Trade Name	Street 399 Jefferson Road
Attention To: Kelley Maggs	City Parsippany
Title Sr. VP & General Counsel	State NJ ZIP Code + 4 07054
5.b. Termination Date 8/28/2012	5.c. Amount 32, 932
5.a.Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any
Employer Pioneer Supermarket	Object 2070 Nahahan Buanus
Trade Name	Street 2670 Webster Avenue
Attention To: Alvin Silmen	City Bronx
Title CPA	State NY ZIP Code + 4 10458
5.b. Termination Date 6/21/2012	5.c. Amount 6, 140
5.a.Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any
Employer Pirate Dinner Adventure, Inc.	Over 00 Gruph HDH Ghursh Guide 200
Trade Name	Street 90 South "E" Street, Suite 200
Attention To: Jan Tansil	City Santa Rosa
Title Esquire	State CA ZIP Code + 4 95402
5.b. Termination Date 1/4/2012	5.c. Amount 16, 125
5.a.Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any
Employer Poet	P.O. Box, Building and Room Number, if any
Employer Poet Trade Name	P.O. Box, Building and Room Number, if any Street 4615 N. Lewis Avenue
Employer Poet Trade Name Attention To: Brian Guarrci	P.O. Box, Building and Room Number, if any Street 4615 N. Lewis Avenue City Sioux Falls
Employer Poet Trade Name Attention To: Brian Guarrci Title Senior Counsel	P.O. Box, Building and Room Number, if any Street 4615 N. Lewis Avenue City Sioux Falls State SD ZIP Code + 4 57104
Employer Poet Trade Name Attention To: Brian Guarrci Title Senior Counsel 5.b. Termination Date 3/12/2012	P.O. Box, Building and Room Number, if any Street 4615 N. Lewis Avenue City Sioux Falls State SD ZIP Code + 4 57104 5.c. Amount 6,834
Employer Poet Trade Name Attention To: Brian Guarroi Title Senior Counsel 5.b. Termination Date 3/12/2012 5.a.Name and Address of Employer (including trade name, if any).	P.O. Box, Building and Room Number, if any Street 4615 N. Lewis Avenue City Sioux Falls State SD ZIP Code + 4 57104
Employer Poet Trade Name Attention To: Brian Guarrci Title Senior Counsel 5.b. Termination Date 3/12/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Portola Packaging	P.O. Box, Building and Room Number, if any Street 4615 N. Lewis Avenue City Sioux Falls State SD ZIP Code + 4 57104 5.c. Amount 6,834 Mailing Address: P.O. Box, Building and Room Number, if any
Employer Poet Trade Name Attention To: Brian Guarroi Title Senior Counsel 5.b. Termination Date 3/12/2012 5.a. Name and Address of Employer (including trade name, if any). Employer Portola Packaging Trade Name	P.O. Box, Building and Room Number, if any Street 4615 N. Lewis Avenue City Sioux Falls State SD ZIP Code + 4 57104 5.c. Amount 6,834 Mailing Address: P.O. Box, Building and Room Number, if any Street 4 South 84th Avenue, Suite A
Employer Poet Trade Name Attention To: Brian Guarroi Title Senior Counsel 5.b. Termination Date 3/12/2012 5.a. Name and Address of Employer (including trade name, if any). Employer Portola Packaging Trade Name Attention To: Clint Rutledge	P.O. Box, Building and Room Number, if any Street 4615 N. Lewis Avenue City Sioux Falls State SD ZIP Code + 4 57104 5.c. Amount 6,834 Mailing Address: P.O. Box, Building and Room Number, if any Street 4 South 84th Avenue, Suite A City Tolleson
Employer Poet Trade Name Attention To: Brian Guarroi Title Senior Counsel 5.b. Termination Date 3/12/2012 5.a. Name and Address of Employer (including trade name, if any). Employer Portola Packaging Trade Name Attention To: Clint Rutledge Title Vice President Operations	P.O. Box, Building and Room Number, if any Street 4615 N. Lewis Avenue City Sioux Falls State SD ZIP Code + 4 57104 5.c. Amount 6,834 Mailing Address: P.O. Box, Building and Room Number, if any Street 4 South 84th Avenue, Suite A City Tolleson State AZ ZIP Code + 4 85353
Employer Poet Trade Name Attention To: Brian Guarroi Title Senior Counsel 5.b. Termination Date 3/12/2012 5.a. Name and Address of Employer (including trade name, if any). Employer Portola Packaging Trade Name Attention To: Clint Rutledge	P.O. Box, Building and Room Number, if any Street 4615 N. Lewis Avenue City Sioux Falls State SD ZIP Code + 4 57104 5.c. Amount 6,834 Mailing Address: P.O. Box, Building and Room Number, if any Street 4 South 84th Avenue, Suite A City Tolleson
Employer Poet Trade Name Attention To: Brian Guarroi Title Senior Counsel 5.b. Termination Date 3/12/2012 5.a. Name and Address of Employer (including trade name, if any). Employer Portola Packaging Trade Name Attention To: Clint Rutledge Title Vice President Operations 5.b. Termination Date 1/9/2012 5.a. Name and Address of Employer (including trade name, if any).	P.O. Box, Building and Room Number, if any Street 4615 N. Lewis Avenue City Sioux Falls State SD ZIP Code + 4 57104 5.c. Amount 6,834 Mailing Address: P.O. Box, Building and Room Number, if any Street 4 South 84th Avenue, Suite A City Tolleson State AZ ZIP Code + 4 85353
Employer Poet Trade Name Attention To: Brian Guarroi Title Senior Counsel 5.b. Termination Date 3/12/2012 5.a. Name and Address of Employer (including trade name, if any). Employer Portola Packaging Trade Name Attention To: Clint Rutledge Title Vice President Operations 5.b. Termination Date 1/9/2012	P.O. Box, Building and Room Number, if any Street 4615 N. Lewis Avenue City Sioux Falls State SD ZIP Code + 4 57104 5.c. Amount 6,834 Mailing Address: P.O. Box, Building and Room Number, if any Street 4 South 84th Avenue, Suite A City Tolleson State AZ ZIP Code + 4 85353 5.c. Amount 1,025 Mailing Address: P.O. Box, Building and Room Number, if any
Employer Poet Trade Name Attention To: Brian Guarroi Title Senior Counsel 5.b. Termination Date 3/12/2012 5.a. Name and Address of Employer (including trade name, if any). Employer Portola Packaging Trade Name Attention To: Clint Rutledge Title Vice President Operations 5.b. Termination Date 1/9/2012 5.a. Name and Address of Employer (including trade name, if any).	P.O. Box, Building and Room Number, if any Street 4615 N. Lewis Avenue City Sioux Falls State SD ZIP Code + 4 57104 5.c. Amount 6, 834 Mailing Address: P.O. Box, Building and Room Number, if any Street 4 South 84th Avenue, Suite A City Tolleson State AZ ZIP Code + 4 85353 5.c. Amount 1,025 Mailing Address: P.O. Box, Building and Room Number, if any Street 3325 Plymouth Street
Employer Poet Trade Name Attention To: Brian Guarroi Title Senior Counsel 5.b. Termination Date 3/12/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Portola Packaging Trade Name Attention To: Clint Rutledge Title Vice President Operations 5.b. Termination Date 1/9/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Professional Transportation Inc.	P.O. Box, Building and Room Number, if any Street 4615 N. Lewis Avenue City Sioux Falls State SD ZIP Code + 4 57104 5.c. Amount 6,834 Mailing Address: P.O. Box, Building and Room Number, if any Street 4 South 84th Avenue, Suite A City Tolleson State AZ ZIP Code + 4 85353 5.c. Amount 1,025 Mailing Address: P.O. Box, Building and Room Number, if any Street 3325 Plymouth Street City Jacksonville
Employer Poet Trade Name Attention To: Brian Guarroi Title Senior Counsel 5.b. Termination Date 3/12/2012 5.a. Name and Address of Employer (including trade name, if any). Employer Portola Packaging Trade Name Attention To: Clint Rutledge Title Vice President Operations 5.b. Termination Date 1/9/2012 5.a. Name and Address of Employer (including trade name, if any). Employer Professional Transportation Inc. Trade Name	P.O. Box, Building and Room Number, if any Street 4615 N. Lewis Avenue City Sioux Falls State SD ZIP Code + 4 57104 5.c. Amount 6,834 Mailing Address: P.O. Box, Building and Room Number, if any Street 4 South 84th Avenue, Suite A City Tolleson State AZ ZIP Code + 4 85353 5.c. Amount 1,025 Mailing Address: P.O. Box, Building and Room Number, if any Street 3325 Plymouth Street

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Name of Person Filing: LRI Consulting Services Inc	File Number C- 00525
B. Statement of Receipts Report all receipts from employers in connection wanted advice or services.	ith labor relations advice or services regardless of the purposes of the
5.a.Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any
Employer Progress Rail Service Corporation	
Trade Name	Street 425 Ingersoll Rand Road
Attention To: Wade Brown	City Mayfield
Title Vice President Human Resources	State KY ZIP Code + 4 42006
5.b. Termination Date	5.c. Amount 24, 930
5.a.Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any
Employer PSC Metals - Garn	
Trade Name	Street 877 W. Old Lincoln Highway
Attention To: Joe King	City Wooster
Title General Counsel	State OH ZIP Code + 4 44691
5.b. Termination Date 11/26/2012	5.c. Amount 56, 431
5.a.Name and Address of Employer (including trade name, if any). Employer Putnam Ridge	Mailing Address: P.O. Box, Building and Room Number, if any
-	Street 46 Mt. Evo Road North
Trade Name Attention To: Eric Greenberger	City Brewster
Title CFO	State NY ZIP Code + 4 10509
5.b. Termination Date	5.c. Amount 102, 059
	·
5.a.Name and Address of Employer (including trade name, if any).	Mailing Address:
	Mailing Address: P.O. Box, Building and Room Number, if any
Employer R.J. Reynolds Tobacco Company	P.O. Box, Building and Room Number, if any
Employer R.J. Reynolds Tobacco Company Trade Name	P.O. Box, Building and Room Number, if any Street 401 North Main Street
Employer R.J. Reynolds Tobacco Company Trade Name Attention To: Scott Lefelar	P.O. Box, Building and Room Number, if any Street 401 North Main Street City Winston Salem
Employer R.J. Reynolds Tobacco Company Trade Name	P.O. Box, Building and Room Number, if any Street 401 North Main Street
Employer R.J. Reynolds Tobacco Company Trade Name Attention To: Scott Lefelar Title Dir. Empl. Law Partner Wkpl Pract & 5.b. Termination Date 1/17/2012	P.O. Box, Building and Room Number, if any Street 401 North Main Street City Winston Salem State NC ZIP Code + 4 27101 5.c. Amount 207,209
Employer R.J. Reynolds Tobacco Company Trade Name Attention To: Scott Lefelar Title Dir. Empl. Law Partner Wkpl Pract &	P.O. Box, Building and Room Number, if any Street 401 North Main Street City Winston Salem State NC ZIP Code + 4 27101
Employer R.J. Reynolds Tobacco Company Trade Name Attention To: Scott Lefelar Title Dir. Empl. Law Partner Wkpl Pract & 5.b. Termination Date 1/17/2012 5.a. Name and Address of Employer (including trade name, if any).	P.O. Box, Building and Room Number, if any Street 401 North Main Street City Winston Salem State NC ZIP Code + 4 27101 5.c. Amount 207,209 Mailing Address:
Employer R.J. Reynolds Tobacco Company Trade Name Attention To: Scott Lefelar Title Dir. Empl. Law Partner Wkpl Pract & 5.b. Termination Date 1/17/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Rea Algonquin Industries Division	P.O. Box, Building and Room Number, if any Street 401 North Main Street City Winston Salem State NC ZIP Code + 4 27101 5.c. Amount 207, 209 Mailing Address: P.O. Box, Building and Room Number, if any
Employer R.J. Reynolds Tobacco Company Trade Name Attention To: Scott Lefelar Title Dir. Empl. Law Partner Wkpl Pract & 5.b. Termination Date 1/17/2012 5.a. Name and Address of Employer (including trade name, if any). Employer Rea Algonquin Industries Division Trade Name	P.O. Box, Building and Room Number, if any Street 401 North Main Street City Winston Salem State NC ZIP Code + 4 27101 5.c. Amount 207, 209 Mailing Address: P.O. Box, Building and Room Number, if any Street 129 Doundview Road
Employer R.J. Reynolds Tobacco Company Trade Name Attention To: Scott Lefelar Title Dir. Empl. Law Partner Wkpl Pract & 5.b. Termination Date 1/17/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Rea Algonquin Industries Division Trade Name Attention To: Susan Boyd	P.O. Box, Building and Room Number, if any Street 401 North Main Street City Winston Salem State NC ZIP Code + 4 27101 5.c. Amount 207, 209 Mailing Address: P.O. Box, Building and Room Number, if any Street 129 Doundview Road City Guilford
Employer R.J. Reynolds Tobacco Company Trade Name Attention To: Scott Lefelar Title Dir. Empl. Law Partner Wkpl Pract & 5.b. Termination Date 1/17/2012 5.a. Name and Address of Employer (including trade name, if any). Employer Rea Algonquin Industries Division Trade Name Attention To: Susan Boyd Title 5.b. Termination Date 8/6/2012 5.a. Name and Address of Employer (including trade name, if any).	P.O. Box, Building and Room Number, if any Street 401 North Main Street City Winston Salem State NC ZIP Code + 4 27101 5.c. Amount 207, 209 Mailing Address: P.O. Box, Building and Room Number, if any Street 129 Doundview Road City Guilford State CT ZIP Code + 4 06437
Employer R.J. Reynolds Tobacco Company Trade Name Attention To: Scott Lefelar Title Dir. Empl. Law Partner Wkpl Pract & 5.b. Termination Date 1/17/2012 5.a. Name and Address of Employer (including trade name, if any). Employer Rea Algonquin Industries Division Trade Name Attention To: Susan Boyd Title 5.b. Termination Date 8/6/2012	P.O. Box, Building and Room Number, if any Street 401 North Main Street City Winston Salem State NC ZIP Code + 4 27101 5.c. Amount 207, 209 Mailing Address: P.O. Box, Building and Room Number, if any Street 129 Doundview Road City Guilford State CT ZIP Code + 4 06437 5.c. Amount 59, 916 Mailing Address:
Employer R.J. Reynolds Tobacco Company Trade Name Attention To: Scott Lefelar Title Dir. Empl. Law Partner Wkpl Pract & 5.b. Termination Date 1/17/2012 5.a. Name and Address of Employer (including trade name, if any). Employer Rea Algonquin Industries Division Trade Name Attention To: Susan Boyd Title 5.b. Termination Date 8/6/2012 5.a. Name and Address of Employer (including trade name, if any).	P.O. Box, Building and Room Number, if any Street 401 North Main Street City Winston Salem State NC ZIP Code + 4 27101 5.c. Amount 207, 209 Mailing Address: P.O. Box, Building and Room Number, if any Street 129 Doundview Road City Guilford State CT ZIP Code + 4 06437 5.c. Amount 59, 916 Mailing Address:
Employer R.J. Reynolds Tobacco Company Trade Name Attention To: Scott Lefelar Title Dir. Empl. Law Partner Wkpl Pract & 5.b. Termination Date 1/17/2012 5.a. Name and Address of Employer (including trade name, if any). Employer Rea Algonquin Industries Division Trade Name Attention To: Susan Boyd Title 5.b. Termination Date 8/6/2012 5.a. Name and Address of Employer (including trade name, if any). Employer Riverview Health & Rehab Center	P.O. Box, Building and Room Number, if any Street 401 North Main Street City Winston Salem State NC ZIP Code + 4 27101 5.c. Amount 207, 209 Mailing Address: P.O. Box, Building and Room Number, if any Street 129 Doundview Road City Guilford State CT ZIP Code + 4 06437 5.c. Amount 59, 916 Mailing Address: P.O. Box, Building and Room Number, if any
Employer R.J. Reynolds Tobacco Company Trade Name Attention To: Scott Lefelar Title Dir. Empl. Law Partner Wkpl Pract & 5.b. Termination Date 1/17/2012 5.a. Name and Address of Employer (including trade name, if any). Employer Rea Algonquin Industries Division Trade Name Attention To: Susan Boyd Title 5.b. Termination Date 8/6/2012 5.a. Name and Address of Employer (including trade name, if any). Employer Riverview Health & Rehab Center Trade Name	Street 401 North Main Street City Winston Salem State NC ZIP Code + 4 27101 5.c. Amount 207, 209 Mailing Address: P.O. Box, Building and Room Number, if any Street 129 Doundview Road City Guilford State CT ZIP Code + 4 06437 5.c. Amount 59, 916 Mailing Address: P.O. Box, Building and Room Number, if any Street 31100 Telegraph Road, Suite 250

Name of Person Filing: LRI Consulting Services Inc	File Number C- 00525
B. Statement of Receipts Report all receipts from employers in connection advice or services.	with labor relations advice or services regardless of the purposes of the
5.a.Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any
Employer RosDev Group	
Trade Name	Street 418 Clifton Avenue, Suite 200
Attention To: Thomas Rosenberg	City Lakewood
Title President	State NJ ZIP Code + 4 08701
5.b. Termination Date	5.c. Amount 29,750
5.a.Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any
Employer Rose Fence Company	
Trade Name	Street 345 West Sunrise Highway
Attention To: Scott Rose	City Freeport
Title	State NY ZIP Code + 4 11520
5.b. Termination Date 1/30/2012	5.c. Amount 1, 045
5.a.Name and Address of Employer (including trade name, if any). Employer Schimmer Ford	Mailing Address: P.O. Box, Building and Room Number, if any
Trade Name	Street 911 Shooting Park Road
Attention To: Ken Credi	City Peru
Title	State IL ZIP Code + 4 61354
5.b. Termination Date 7/6/2012	5.c. Amount 3, 622
5.b. Termination Date 7/6/2012 5.a.Name and Address of Employer (including trade name, if any).	5.c. Amount 3, 622 Mailing Address: P.O. Box, Building and Room Number, if any
	Mailing Address:
5.a.Name and Address of Employer (including trade name, if any).	Mailing Address:
5.a.Name and Address of Employer (including trade name, if any). Employer Shuttle Wagon/NORDCO	Mailing Address: P.O. Box, Building and Room Number, if any
5.a.Name and Address of Employer (including trade name, if any). Employer Shuttle Wagon/NORDCO Trade Name	Mailing Address: P.O. Box, Building and Room Number, if any Street 4116 Doctor Greaves Road
5.a.Name and Address of Employer (including trade name, if any). Employer Shuttle Wagon/NORDCO Trade Name Attention To: Matt Briegel	Mailing Address: P.O. Box, Building and Room Number, if any Street 4116 Doctor Greaves Road City Grandview
5.a.Name and Address of Employer (including trade name, if any). Employer Shuttle Wagon/NORDCO Trade Name Attention To: Matt Briegel Title Vice President of Operations 5.b. Termination Date 5.a.Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any Street 4116 Doctor Greaves Road City Grandview State MO ZIP Code + 4 64030
5.a.Name and Address of Employer (including trade name, if any). Employer Shuttle Wagon/NORDCO Trade Name Attention To: Matt Briegel Title Vice President of Operations 5.b. Termination Date 5.a.Name and Address of Employer (including trade name, if any). Employer Sigma Processed Meats LLC	Mailing Address: P.O. Box, Building and Room Number, if any Street 4116 Doctor Greaves Road City Grandview State MO ZIP Code + 4 64030 5.c. Amount 3, 619 Mailing Address: P.O. Box, Building and Room Number, if any
5.a.Name and Address of Employer (including trade name, if any). Employer Shuttle Wagon/NORDCO Trade Name Attention To: Matt Briegel Title Vice President of Operations 5.b. Termination Date 5.a.Name and Address of Employer (including trade name, if any). Employer Sigma Processed Meats LLC Trade Name	Mailing Address: P.O. Box, Building and Room Number, if any Street 4116 Doctor Greaves Road City Grandview State MO ZIP Code + 4 64030 5.c. Amount 3, 619 Mailing Address: P.O. Box, Building and Room Number, if any Street 701 E Good Hope Road
5.a.Name and Address of Employer (including trade name, if any). Employer Shuttle Wagon/NORDCO Trade Name Attention To: Matt Briegel Title Vice President of Operations 5.b. Termination Date 5.a.Name and Address of Employer (including trade name, if any). Employer Sigma Processed Meats LLC Trade Name Attention To: David Reed	Mailing Address: P.O. Box, Building and Room Number, if any Street 4116 Doctor Greaves Road City Grandview State MO ZIP Code + 4 64030 5.c. Amount 3, 619 Mailing Address: P.O. Box, Building and Room Number, if any Street 701 E Good Hope Road City Seminole
5.a.Name and Address of Employer (including trade name, if any). Employer Shuttle Wagon/NORDCO Trade Name Attention To: Matt Briegel Title Vice President of Operations 5.b. Termination Date 5.a.Name and Address of Employer (including trade name, if any). Employer Sigma Processed Meats LLC Trade Name Attention To: David Reed Title Plant Manager	Mailing Address: P.O. Box, Building and Room Number, if any Street 4116 Doctor Greaves Road City Grandview State MO ZIP Code + 4 64030 5.c. Amount 3, 619 Mailing Address: P.O. Box, Building and Room Number, if any Street 701 E Good Hope Road City Seminole State OK ZIP Code + 4 74868
5.a.Name and Address of Employer (including trade name, if any). Employer Shuttle Wagon/NORDCO Trade Name Attention To: Matt Briegel Title Vice President of Operations 5.b. Termination Date 5.a.Name and Address of Employer (including trade name, if any). Employer Sigma Processed Meats LLC Trade Name Attention To: David Reed	Mailing Address: P.O. Box, Building and Room Number, if any Street 4116 Doctor Greaves Road City Grandview State MO ZIP Code + 4 64030 5.c. Amount 3, 619 Mailing Address: P.O. Box, Building and Room Number, if any Street 701 E Good Hope Road City Seminole
5.a.Name and Address of Employer (including trade name, if any). Employer Shuttle Wagon/NORDCO Trade Name Attention To: Matt Briegel Title Vice President of Operations 5.b. Termination Date 5.a.Name and Address of Employer (including trade name, if any). Employer Sigma Processed Meats LLC Trade Name Attention To: David Reed Title Plant Manager 5.b. Termination Date 7/23/2012 5.a.Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any Street 4116 Doctor Greaves Road City Grandview State MO ZIP Code + 4 64030 5.c. Amount 3, 619 Mailing Address: P.O. Box, Building and Room Number, if any Street 701 E Good Hope Road City Seminole State OK ZIP Code + 4 74868
5.a.Name and Address of Employer (including trade name, if any). Employer Shuttle Wagon/NORDCO Trade Name Attention To: Matt Briegel Title Vice President of Operations 5.b. Termination Date 5.a.Name and Address of Employer (including trade name, if any). Employer Sigma Processed Meats LLC Trade Name Attention To: David Reed Title Plant Manager 5.b. Termination Date 7/23/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Sitel	Mailing Address: P.O. Box, Building and Room Number, if any Street 4116 Doctor Greaves Road City Grandview State MO ZIP Code + 4 64030 5.c. Amount 3, 619 Mailing Address: P.O. Box, Building and Room Number, if any Street 701 E Good Hope Road City Seminole State OK ZIP Code + 4 74868 5.c. Amount 16, 596 Mailing Address: P.O. Box, Building and Room Number, if any
5.a.Name and Address of Employer (including trade name, if any). Employer Shuttle Wagon/NORDCO Trade Name Attention To: Matt Briegel Title Vice President of Operations 5.b. Termination Date 5.a.Name and Address of Employer (including trade name, if any). Employer Sigma Processed Meats LLC Trade Name Attention To: David Reed Title Plant Manager 5.b. Termination Date 7/23/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Sitel Trade Name	Mailing Address: P.O. Box, Building and Room Number, if any Street 4116 Doctor Greaves Road City Grandview State MO ZIP Code + 4 64030 5.c. Amount 3, 619 Mailing Address: P.O. Box, Building and Room Number, if any Street 701 E Good Hope Road City Seminole State OK ZIP Code + 4 74868 5.c. Amount 16,596 Mailing Address: P.O. Box, Building and Room Number, if any Street 3102 West End Avenue, Suite 1000
5.a.Name and Address of Employer (including trade name, if any). Employer Shuttle Wagon/NORDCO Trade Name Attention To: Matt Briegel Title Vice President of Operations 5.b. Termination Date 5.a.Name and Address of Employer (including trade name, if any). Employer Sigma Processed Meats LLC Trade Name Attention To: David Reed Title Plant Manager 5.b. Termination Date 7/23/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Sitel Trade Name Attention To: Paula Walker	Mailing Address: P.O. Box, Building and Room Number, if any Street 4116 Doctor Greaves Road City Grandview State MO ZIP Code + 4 64030 5.c. Amount 3, 619 Mailing Address: P.O. Box, Building and Room Number, if any Street 701 E Good Hope Road City Seminole State OK ZIP Code + 4 74868 5.c. Amount 16,596 Mailing Address: P.O. Box, Building and Room Number, if any Street 3102 West End Avenue, Suite 1000 City Nashville
5.a.Name and Address of Employer (including trade name, if any). Employer Shuttle Wagon/NORDCO Trade Name Attention To: Matt Briegel Title Vice President of Operations 5.b. Termination Date 5.a.Name and Address of Employer (including trade name, if any). Employer Sigma Processed Meats LLC Trade Name Attention To: David Reed Title Plant Manager 5.b. Termination Date 7/23/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Sitel Trade Name	Mailing Address: P.O. Box, Building and Room Number, if any Street 4116 Doctor Greaves Road City Grandview State MO ZIP Code + 4 64030 5.c. Amount 3, 619 Mailing Address: P.O. Box, Building and Room Number, if any Street 701 E Good Hope Road City Seminole State OK ZIP Code + 4 74868 5.c. Amount 16,596 Mailing Address: P.O. Box, Building and Room Number, if any Street 3102 West End Avenue, Suite 1000

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ame of Person Filing: LRI Consulting Services Inc		File Number C- 00525
B. Statement of Receipts Report all receipts from employers in connection value or services.	vith labor relations advice or	services regardless of the purposes of the
5.a.Name and Address of Employer (including trade name, if any).	Mailing Addres P.O. Box, Building and F	
Employer Southeast Berrien Co. Landfill Authority		Journ Board
Trade Name	Street 1540 Mayfl City Niles	Lower Road
Attention To: Sonny Fuller		ZIP Code + 4 49120
Title	State MI	ZIF Code + 4 45120
5.b. Termination Date 10/22/2012	5.c. Amount 13,892	
5.a.Name and Address of Employer (including trade name, if any).	Mailing Addres	
Employer Steel Dynamics/Mesabi Nugget LLC		
Trade Name	Street 7575 West	Jefferson Boulevard
Attention To: Ben Eisbart	City Fort Wayne	2
Title Vice President, HR	State IN	ZIP Code + 4 46804
5.b. Termination Date 7/16/2012	5.c. Amount 10,952	
5.a.Name and Address of Employer (including trade name, if any).	Mailing Addres	
Employer Steel Warehouse	Street 4700 Heidt	cman Parkway
Trade Name Attention To: Shmuel Cohen	City Cleveland	LMan Parkway
	State OH	ZIP Code + 4 44105
Title HR & Safety Manager	State On	Zii Obde + 4 44103
5.b. Termination Date	5.c. Amount 18, 209	
5.b. Termination Date 5.a. Name and Address of Employer (including trade name, if any).	5.c. Amount 18,209 Mailing Addres	98:
5.a.Name and Address of Employer (including trade name, if any).		
5.a.Name and Address of Employer (including trade name, if any). Employer Sysco	Mailing Addre	Room Number, if any
5.a.Name and Address of Employer (including trade name, if any). Employer Sysco Trade Name	Mailing Addre	Room Number, if any The Road NE
5.a.Name and Address of Employer (including trade name, if any). Employer Sysco Trade Name Attention To: Chuck Munn	Mailing Addres P.O. Box, Building and F Street 601 Comand City Albuquerqu	Room Number, if any Che Road NE Je
5.a.Name and Address of Employer (including trade name, if any). Employer Sysco Trade Name	Mailing Addre	Room Number, if any The Road NE
5.a.Name and Address of Employer (including trade name, if any). Employer Sysco Trade Name Attention To: Chuck Munn Title Vice President 5.b. Termination Date 11/20/2012 5.a.Name and Address of Employer (including trade name, if any).	Mailing Addre P.O. Box, Building and F Street 601 Comand City Albuquerqu State NM	Room Number, if any the Road NE tie ZIP Code + 4 87107
5.a.Name and Address of Employer (including trade name, if any). Employer Sysco Trade Name Attention To: Chuck Munn Title Vice President 5.b. Termination Date 11/20/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Tendercare West	Mailing Addres P.O. Box, Building and F Street 601 Comand City Albuquerqu State NM 5.c. Amount 23,005 Mailing Addres P.O. Box, Building and F	Room Number, if any the Road NE IE ZIP Code + 4 87107 SS: Room Number, if any
5.a.Name and Address of Employer (including trade name, if any). Employer Sysco Trade Name Attention To: Chuck Munn Title Vice President 5.b. Termination Date 11/20/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Tendercare West Trade Name	Mailing Addres P.O. Box, Building and F Street 601 Comand City Albuquerqu State NM 5.c. Amount 23,005 Mailing Addres P.O. Box, Building and F Street 731 Starkw	Room Number, if any the Road NE tie ZIP Code + 4 87107
5.a.Name and Address of Employer (including trade name, if any). Employer Sysco Trade Name Attention To: Chuck Munn Title Vice President 5.b. Termination Date 11/20/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Tendercare West Trade Name Attention To: David Keating	Mailing Address P.O. Box, Building and F Street 601 Comand City Albuquerqu State NM 5.c. Amount 23,005 Mailing Address P.O. Box, Building and F Street 731 Starkw City Lansing	Che Road NE Lie ZIP Code + 4 87107 Sis: Room Number, if any Weather Drive
5.a.Name and Address of Employer (including trade name, if any). Employer Sysco Trade Name Attention To: Chuck Munn Title Vice President 5.b. Termination Date 11/20/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Tendercare West Trade Name Attention To: David Keating Title Deputy General Councel	Mailing Addres P.O. Box, Building and F Street 601 Comand City Albuquerqu State NM 5.c. Amount 23,005 Mailing Addres P.O. Box, Building and F Street 731 Starkw City Lansing State MI	Room Number, if any the Road NE IE ZIP Code + 4 87107 SS: Room Number, if any
5.a.Name and Address of Employer (including trade name, if any). Employer Sysco Trade Name Attention To: Chuck Munn Title Vice President 5.b. Termination Date 11/20/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Tendercare West Trade Name Attention To: David Keating	Mailing Address P.O. Box, Building and F Street 601 Comand City Albuquerqu State NM 5.c. Amount 23,005 Mailing Address P.O. Box, Building and F Street 731 Starkw City Lansing	Che Road NE Die ZIP Code + 4 87107 Sis: Room Number, if any Weather Drive
5.a.Name and Address of Employer (including trade name, if any). Employer Sysco Trade Name Attention To: Chuck Munn Title Vice President 5.b. Termination Date 11/20/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Tendercare West Trade Name Attention To: David Keating Title Deputy General Councel 5.b. Termination Date 12/28/2013 5.a.Name and Address of Employer (including trade name, if any).	Mailing Addres P.O. Box, Building and F Street 601 Comand City Albuquerqu State NM 5.c. Amount 23,005 Mailing Addres P.O. Box, Building and F Street 731 Starkw City Lansing State MI	Che Road NE Lie ZIP Code + 4 87107 Sist: Room Number, if any Veather Drive ZIP Code + 4 48917 Sist:
5.a.Name and Address of Employer (including trade name, if any). Employer Sysco Trade Name Attention To: Chuck Munn Title Vice President 5.b. Termination Date 11/20/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Tendercare West Trade Name Attention To: David Keating Title Deputy General Councel 5.b. Termination Date 12/28/2013 5.a.Name and Address of Employer (including trade name, if any). Employer The Boyd Law Group	Mailing Addres P.O. Box, Building and F Street 601 Comand City Albuquerqu State NM 5.c. Amount 23,005 Mailing Addres P.O. Box, Building and F Street 731 Starky City Lansing State MI 5.c. Amount 45,063 Mailing Addres P.O. Box, Building and F	Che Road NE The Road NE The ZIP Code + 4 87107 The State of the Road NE The ZIP Code + 4 87107 The State of the Road NE The Road Number, if any The Road Number of the Road Number of the Road Number of the Road Number of the Road Number, if any
5.a.Name and Address of Employer (including trade name, if any). Employer Sysco Trade Name Attention To: Chuck Munn Title Vice President 5.b. Termination Date 11/20/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Tendercare West Trade Name Attention To: David Keating Title Deputy General Councel 5.b. Termination Date 12/28/2013 5.a.Name and Address of Employer (including trade name, if any). Employer The Boyd Law Group Trade Name	Mailing Addres P.O. Box, Building and F Street 601 Comand City Albuquerqu State NM 5.c. Amount 23,005 Mailing Addres P.O. Box, Building and F Street 731 Starkw City Lansing State MI 5.c. Amount 45,063 Mailing Addres P.O. Box, Building and F Street 370 Lexing	Che Road NE Lie ZIP Code + 4 87107 Sist: Room Number, if any Veather Drive ZIP Code + 4 48917 Sist:
5.a.Name and Address of Employer (including trade name, if any). Employer Sysco Trade Name Attention To: Chuck Munn Title Vice President 5.b. Termination Date 11/20/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Tendercare West Trade Name Attention To: David Keating Title Deputy General Councel 5.b. Termination Date 12/28/2013 5.a.Name and Address of Employer (including trade name, if any). Employer The Boyd Law Group Trade Name Attention To: Patt Boyd	Mailing Address P.O. Box, Building and F Street 601 Comand City Albuquerque State NM 5.c. Amount 23,005 Mailing Address P.O. Box, Building and F Street 731 Starkw City Lansing State MI 5.c. Amount 45,063 Mailing Address P.O. Box, Building and F Street 370 Lexing City New York	Che Road NE Die ZIP Code + 4 87107 SS: Room Number, if any Veather Drive ZIP Code + 4 48917 SS: Room Number, if any gton Avenue, Suite 1705
5.a.Name and Address of Employer (including trade name, if any). Employer Sysco Trade Name Attention To: Chuck Munn Title Vice President 5.b. Termination Date 11/20/2012 5.a.Name and Address of Employer (including trade name, if any). Employer Tendercare West Trade Name Attention To: David Keating Title Deputy General Councel 5.b. Termination Date 12/28/2013 5.a.Name and Address of Employer (including trade name, if any). Employer The Boyd Law Group Trade Name	Mailing Addres P.O. Box, Building and F Street 601 Comand City Albuquerqu State NM 5.c. Amount 23,005 Mailing Addres P.O. Box, Building and F Street 731 Starkw City Lansing State MI 5.c. Amount 45,063 Mailing Addres P.O. Box, Building and F Street 370 Lexing	Che Road NE The Road NE The ZIP Code + 4 87107 The State of the Road NE The ZIP Code + 4 87107 The State of the Road NE Road N

Form LM-21 (2003) Page 17 of 65

Name of Person Filing: LRI Consulting Services Inc		File Number C- 00525
B. Statement of Receipts Report all receipts from employers in connection advice or services.	with labor relations advice or s	services regardless of the purposes of the
5.a.Name and Address of Employer (including trade name, if any).	Mailing Addres P.O. Box, Building and F	
Employer The May Institute, Inc.		
Trade Name	Street 41 Pacella	Park Drive
Attention To: Ralph Sperry	City Randolph	
Title Chief Operating Officer	State MA	ZIP Code + 4 02368
5.b. Termination Date	5.c. Amount 311, 474	
5.a.Name and Address of Employer (including trade name, if any).	Mailing Addres	
Employer The Vintage Country Club	. ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Trade Name	Street 17001 Vint	age Drive West
Attention To: Thomas Murphy	City Indian Wel	ls
Title General Manager/COO	State CA	ZIP Code + 4 92210
5.b. Termination Date 4/5/2012	5.c. Amount 85, 987	
5.a.Name and Address of Employer (including trade name, if any).	Mailing Addres	26.
J.a. Name and Address of Employer (including trade hame, if any).	P.O. Box, Building and F	
Employer TMK IPSCO Tubulars, Inc.		
Trade Name	Street 6403 Sixth	Avenue
Attention To: Tom Kellner	City Koppel	
Title Director of Human Resources	State PA	ZIP Code + 4 16136
5.b. Termination Date 2/21/2012	5.c. Amount 10,704	
5.a.Name and Address of Employer (including trade name, if any).	Mailing Addres	
Employer United Cerebral Palsy of Gtr Sacramento		,
Trade Name	Street 4350 Aubur	n Boulevard
Attention To: Laurie Gwinn	City Sacramento	
Title Director of Human Resources	State CA	ZIP Code + 4 95815
5.b. Termination Date 8/6/2012	5.c. Amount 3, 482	
5.a.Name and Address of Employer (including trade name, if any).	Mailing Addres	
T LIDC	P.O. Box, Building and F	Room Number, if any
Employer UPS	Street EE Classic	CO Darkuay NE
Trade Name		te Parkway NE
Attention To: Joe Finamore	City Atlanta	710 0-4- 11 20200
Title Corporate Employee Relations	State GA	ZIP Code + 4 30328
5.b. Termination Date 5/29/2012	5.c. Amount 71,110	
5.a.Name and Address of Employer (including trade name, if any).	Mailing Addres	
	-	
Employer Utopia Home Care, Inc.	_	
Employer Utopia Home Care, Inc. Trade Name	Street 60 East Ma	ain Street
-	Street 60 East Ma	
Trade Name		

Form LM-21 (2003)

Name of Person Filing: LRI Consulting Services Inc	File Number C- 00525
B. Statement of Receipts Report all receipts from employers in connection advice or services.	with labor relations advice or services regardless of the purposes of the
5.a.Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any
Employer Waterview Hills Rehab & Nursing Home Ca.	are
Trade Name	Street 537-539 Route 22
Attention To: Lizer Jozefovic	City Purdys
Title Owner	State NY ZIP Code + 4 10578
5.b. Termination Date 10/22/2012	5.c. Amount 50, 242
i.a.Name and Address of Employer (including trade name, if any). Employer Western Refining Wholesale, Inc.	Mailing Address: P.O. Box, Building and Room Number, if any
Trade Name	Street 123 West Mills Street
Attention To: Victor Rueda	City El Paso
Title VP of HR	State TX ZIP Code + 4 79901
5.b. Termination Date 8/23/2012	5.c. Amount 62,548
5.a.Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Building and Room Number, if any
Employer World Imports	
Trade Name	Street 11000 Roosevelt Boulevard #B
Attention To: Mark Luber	City Philadelphia
Title Owner	State PA ZIP Code + 4 19116
5.b. Termination Date 6/15/2012	5.c. Amount 15,000

Organiz	ation AES2		exercising their rights to organize and bargain collectively.
P.O. Bo	ox, Building and Room Number, if any		
Street	142 Northgate Road		
City	Riverside		
State	IL	ZIP Code + 4 60546	
15.a. Em	oloyer Name:		15.b. Trade Name, if any:

15.a. Employer Name: Ada S McKinley Commu	nity Services Inc	15.b. Trade Name, if any:	
15.c. To Whom Paid		15.d. Amount 6, 375	
Name Byron	Clay	15.e. Purpose	
Title			
Organization BJC and Assoc	ciates Inc		
P.O. Box, Building and Room Num	ber, if any		
Street 10108 Fehlberg Co	urt		
City St John			
State IN	ZIP Code + 4 46379		

15.a. Employer Name: Apogee Trucking		15.b. Trade Name, if any:
15.c. To Whom Paid		15.d. Amount 41,213
Name Michael	Rosado	15.e. Purpose
Title		Engaged to communicate to employees regarding
Organization M Rosado Mar	naement Consultants LLC	exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Nu	mber, if any	
Street 5 Quail Court		
City Englewood		
State NJ	ZIP Code + 4 07024	

Name of Pers	son Filing: LRI Consulting Services I	nc File Number C- 00525
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. Employ	yer Name: undh Tree Expert Co.	15.b. Trade Name, if any:
15.c. To Wh	om Paid	15.d. Amount 4, 659
Name	Joseph Brock	15.e. Purpose
Title		Engaged to communicate to employees regarding exercising their rights to organize and bargain
Organizati	on East Coast Labor Relations LLC	

15.å. Employer Name: ATMI Pre-Cast	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 4,072
Name Michael Rosado	15.e. Purpose
Title	Engaged to communicate to employees regarding
Organization M Rosado Manaement Consultants LLC	exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Number, if any	
Street 5 Quail Court	
City Englewood	
State NJ ZIP Code + 4 07024	

15.a. Employer Name: Atrium Corporation	n	15.b. Trade Name, if any:
15.c. To Whom Paid		15.d. Amount 5,171
Name Evelyn Title	Fragoso	15.e. Purpose Engaged to communicate to employees regarding exercising their rights to organize and bargain
Organization		collectively.
P.O. Box, Building and Room I	Number, if any	
Street 2700 Courtleigh	n Drive	
City Bakersfield		
State CA	ZIP Code + 4 93309	

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

Street 151 Forge Road Delran

City

State NJ

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: Atrium Corporation	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 10, 430
Name Simon Jara	15.e. Purpose
Title	Engaged to communicate to employees regarding exercising their rights to organize and bargain
Organization	collectively.
P.O. Box, Building and Room Number, if any	
Street 10380 Rochelle Avenue	
City Santec	

State CA

15.a Employer Name: Augustana Health Care Center	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 3, 415
Name Russell Brown Title Organization RoadWarrior Productions LLC P.O. Box, Building and Room Number, if any	15.e Purpose Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
Street 108 South Indian Circle City Coca State FL ZIP Code + 4 32922	

15.a. Employer Name: Bay Area Beverage Company	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 3, 5.47
Name Simon Jara	15.e. Purpose
Title	Engaged to communicate to employees regarding exercising their rights to organize and bargain
Organization	collectively.
P.O. Box, Building and Room Number, if any	
Street 10380 Rochelle Avenue	
City Santec	
State CA ZIP Code + 4 9207	71

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Name of Person Filing: LRI Consulting Services Inc					File Number C- 00525
D. Schedule of Disbursements for Reportable Activity Use this Schedinstructions.				edule to report only disbursements made for the purposes described in Part D of the	
15.a. Employ Bayst	ver Name: :ate Wine			15.b. Trade Name, if any:	
15.c. To Who	om Paid			15.d. Amount 519	
Name Title	Joseph	Brock		15.e. Purpose Engaged to commun.	icate to employées regarding
Organizatio	on East Coast Labor	Relations LLC		exercising their collectively.	rights to organize and bargain

15.a. Employer Name: Bison Laboratories	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 1,962
Name Joseph Brock	15.e. Purpose
Title Organization East Coast Labor Relations LLC	Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Number, if any	
Street 151 Forge Road	
City Delran	
State NJ ZIP Code + 4 08075	

15.a. Employer Name: Bob's Discount Fur	rniture	15.b. Trade Name, if any:
15.c. To Whom Paid Name Ronald	Pfeifer	15.d. Amount 3,766 15.e. Purpose
Title Organization		Engaged to offer advice to Employer. Did not participate in persuader activity.
P.O. Box, Building and Room I	Number, if any	
Street 1545 Arapahoe T	Trail	
City Green Bay		
State WI	ZIP Code + 4 54313	

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

Street 151 Forge Road

City Delran State NJ

Name of Per	rson Filing: LRI Cons	sulting Services In	nc ·	File Number C- 00525
D. Schedule	e of Disbursements for	Reportable Activity	Use this Scheinstructions.	dule to report only disbursements made for the purposes described in Part D of the
15:a. Emplo Bruc	oyer Name: ce Packaging			15.b. Trade Name, if any:
15.c. To W	hom Paid			15.d. Amount 38,916
Name	Angel	Cornejo		15.e. Purpose
Title Organizat	tion			Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: Bruce Packaging	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 32,863
Name Simon Jara	15.e. Purpose
Title	Engaged to communicate to employees regarding
Organization	exercising their rights to organize and bargain collectively.
•	
P.O. Box, Building and Room Number, if any	
Street 10380 Rochelle Avenue	
City Santec	
State CA ZIP Code + 4	2071

15.a. Employer Name: Bruce Packaging		15.b. Trade Name, if any:	
15.c. To Whom Paid		15.d. Amount 7, 320	
Name Michael	Rosado	15.e. Purpose	
Title Organization M Rosado I	Manaement Consultants LLC	Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.	
P.O. Box, Building and Room	Number, if any		
Street 5 Quail Court			
City Englewood			
State NJ	ZIP Code + 4 07024		

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

Street 1427 Dent Street

City Escalon
State California

Name of Person Filing: LRI Consulting Services In	File Number C- 00525
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: Buffalo Wild Wings, Inc.	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 2, 526
Name Eric Vanetti	15.e. Purpose Engaged to offer advice to Employer along with communicating to Employees regarding exercising
Organization Vantage Point Alliance P.O. Box, Building and Room Number, if any	their rights to organize and bargain collectively.
Street 18632 River Crossing Blvd City Davidson	

15.a. Employer Name: Campbell Soup Company		15.b. Trade Name, if any:
15.c. To Whom Paid		15.d. Amount 4, 250
Name Scott Title	Michel	15.e. Purpose Engaged to communicate to employees regarding exercising their rights to organize and bargain
Organization		collectively.
P.O. Box, Building and Room Number, if any		
Street 819 Herman Road		
City Horsham		
State PA	ZIP Code + 4 19044	

15.a. Employer Name: Cargill Meat Solutions	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 4, 012
Name Armando Talan	n 15.e. Purpose
Title	Engaged to communicate to employees regarding
Organization AES2	exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Number, if any	
Street 142 Northgate Road	
City Riverside	
State IL ZIP Co	9+4 60546

State North Carolina

ZIP Code + 4 28036

Name of Person Filing: LRI Consulting Services Inc			File Number C 00525	
D. Schedule of Disbursements for Reportable Activity Use this Schedule to report only disbursements made for the purposes described in Part D or instructions.			ents made for the purposes described in Part D of the	
15.a Employer Name: Clarkson Eyecare Inc		15.b. Trade Name, if any:		
15.c. To Whom Paid		15.d. Amount 41,075		
Name Evelyn Fragoso		15.e. Purpose		
Title			icate to employees regarding rights to organize and bargain	
Organization		collectively.		
P.O. Box, Building and Room Number, if any				
Street 2700 Courtleigh Drive				
City Bakersfield				
State CA ZIP Code + 4	93309			

15.a. Employer Name: Clean Harbor Environmental Services	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 8, 075
Name Scott Michel	15.e. Purpose
Title	Engaged to communicate to employees regarding exercising their rights to organize and bargain
Organization	collectively.
P.O. Box, Building and Room Number, if any	
Street 819 Herman Road	
City Horsham	
State PA ZIP Code + 4 19044	

15.a. Employer Name: COIM USA, Inc.		15.b. Trade Name, if any:
15.c. To Whom Paid		15.d. Amount 1,500
Name Joseph Title Organization East Coast La		15.e. Purpose Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
Street 151 Forge Road City Delran		
State NJ	ZIP Code + 4 08075	

Name of Person Filing: LR	RI Consulting Services Inc	File Number C- 00525
		L.,,,

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: Confident Care Corporation	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 30,882
Name David Acosta	15.e. Purpose
Title Organization Redstone Enterprises Inc	Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Number, if any	
Street 5415 East Willowick	
City Anaheim	
State CA ZIP Code + 4	92807

15.a. Employer Name:	15.b. Trade Name, if any:
Cooper Health Systems	Cooper University Hospital
15.c. To Whom Paid	15.d. Amount 11,914
Name Carina Hunt	15.e. Purpose
Title	Engaged to communicate to employees regarding
Organization C Hunt Management Consulting Inc	exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Number, if any	
Street 701 Love Henry Court	
City Southlake	
State TX ZIP Code + 4 76092	

15.a. Employer Name: Daniel C. Tanney,	Inc	15.b. Trade Name, if any:
15.c. To Whom Paid		15.d. Amount 1,500
Name Scott Title	Michel	15.e. Purpose Engaged to communicate to employees regarding exercising their rights to organize and bargain
Organization		collectively.
P.O. Box, Building and Room N	lumber, if any	
Street 819 Herman Road		
City Horsham		
State PA	ZIP Code + 4 19044	

Name of Person Filing: LRI Consulting Services Inc	File Number C- 00525
· .	

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: Daniel C. Tanney, Inc	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 1,500
Name Joseph Brock Title Organization East Coast Labor Relations LLC P.O. Box, Building and Room Number, if any	15.e Purpose Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
Street 151 Forge Road City Delran	
State NJ ZIP Code + 4 08	0,75

15:a. Employer Name: Diversified Restaurant Holdings		15.b. Trade Name, if any:
15.c. To Whom Paid		15.d. Amount 1,070
Name Nancy	Jowske	15.e. Purpose
Title Organization Jowske Co	nsülting Servicės LLC	Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room	Number, if any	
Street 4435 Cornwell	Lane	
City Whitmore Lake		
State MI	ZIP Code + 4 48189	

15.a. Employer Name: Doss Aviation	15.b. Trade Name, if any:	
15:c. To Whom Paid	15.d. Amount 2, 089	
Name Patrick O'Mara Title Organization OMara & Associates LLC . P.O. Box, Building and Room Number, if any	15.e. Purpose Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.	
Street 6 Drakewood Lane , City Novato State CA ZIP Code + 4 94947		

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:

DPI Secuprint, Inc.

15.c. To Whom Paid

5

Name

Eric

Funston

Title

Organization SEO Solutions LLC

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

Street 4613 E 13th Street

City Tulsa

State OK

State NJ

ZIP Code + 4 74112

ZIP Code + 4 08075

15.d. Amount 2, 185

15.e. Purpose

Engaged to communicate to employees regarding exercising their rights to organize and bargain $% \left(1\right) =\left(1\right) \left(1\right) \left$

collectively.

15.b. Trade Name, if any:

15.a. Employer Name: 15.b. Trade Name, if any: DSC Logistics 15.d. Amount 4,141 15.c. To Whom Paid Joseph Brock Name 15.e. Purpose Engaged to communicate to employees regarding exercising their rights to organize and bargain Organization East Coast Labor Relations LLC collectively. P.O. Box, Building and Room Number, if any Street 151 Forge Road Delran City

15.a. Employer Name:		15.b. Trade Name, if any:
Ducommun Aerostructu	res	
15.c. To Whom Paid		15.d. Amount 24, 454
Name Byron	Clay	15.e. Purpose
Title		Engaged to communicate to employees regarding
Organization BJC and Associates Inc		exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Num	ber, if any	
Street 10108 Fehlberg Co	ırt	
City St John		
State IN	ZIP Code + 4 46379	

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: Ducommun Aerostructures	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 8,124
Name Evelyn Fragoso Title	15.e. Purpose Engaged to communicate to employees regarding exercising their rights to organize and bargain
Organization	collectively.
P.O. Box, Building and Room Number, if any	
Street 2700 Courtleigh Drive	

15.a. Employer Name: Ducommun Aerostructures	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 19, 306
Name Simon Jara	15.e. Purpose
Title	Engaged to communicate to employees regarding exercising their rights to organize and bargain
Organization	collectively.
P.O. Box, Building and Room Number, if any	·
Street 10380 Rochelle Avenue	
City Santec	
State CA ZIP Code + 4 92	071

15.a. Employer Name: Ducommun Aerostructures	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 13, 559
Name Rebecca Smith	15.e. Purpose
Title	Engaged to communicate to employees regarding
Organization Taltos Consulting Inc	exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Number, if any	
Street 1474 Lodgepole Drive	
City Henderson	
State NV ZIP Code + 4 890	014

City Bakersfield

State CA

Name of Person Filing: LRI Consulting Services Inc	File Number C- 00525	

D. Schedule of Disbursements for Reportable Activity Use this Schedule to report only disbursements made for the purposes described in Part D of tinstructions.		
15.a. Employer Name: Eagle Healthcare	15.b. Tradé Name, if any:	
15.c. To Whom Paid	15.d. Amount 9,801	
Name James Clegg Title Organization Clegg & Associates Management Group P.O. Box, Building and Room Number, if any	15.e. Purpose Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.	
Street 17583 26th Avenue City Surrey State BC ZIP Code + 4 V3S0A4		

15.a. Employer Name: Eddy Packing Company, Inc.	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount. 6, 473
Name Angel Cornejo	15.e. Purpose
Title	Engaged to communicate to employees regarding exercising their rights to organize and bargain
Organization	collectively.
P.O. Box, Building and Room Number, if any	
Street 1427 Dent Street	
City Escalon	
State California ZIP Code + 4 95320	

15.a. Employer Name: Eddy Packing Compan	y, Inc.	15.b. Trade Name, if any:
15.c. To Whom Paid	_	15.d. Amount 41,015
Name Evelyn Title	Fragoso	15.e. Purpose Engaged to communicate to employees regarding exercising their rights to organize and bargain
Organization		collectively.
P.O. Box, Building and Room Nur	mber, if any	
Street 2700 Courtleigh I	Orive	
City Bakersfield		
State CA	ZIP Code + 4 93309	

15.a. Employer Name: Eddy Packing Company, Inc.	15.b. Trade Name, if any:
15.c. To Whom Paid Name Eric Funston Title Organization SEO Solutions LLC P.O. Box, Building and Room Number, if any Street 4613 E 13th Street	15.d. Amount 44,518 15.e. Purpose Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
City Tulsa State OK ZIP Code + 4 741	12

15.a. Employer Name:	15.b. Trade Name, if any:
Fritz Industries	
15.c. To Whom Paid	15.d. Amount 17,220
Name Joseph Brock	15.e. Purpose
Title	Engaged to communicate to employees regarding
Organization East Coast Labor Relations LLC	exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Number, if any	
Street 151 Forge Road	
City Delran	
State NJ ZIP Code + 4 08075	

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D. Schedule of Disbursements for Reportable Activity Use this Schedule to report only disbursements made for the purposes described in Parinstructions.	
15.a. Employer Name:	15.b. Trade Name, if any:
Fritz Industries	
15.c. To Whom Paid	15.d. Amount 1,769
Name Russell Brown	15.e. Purpose
Title	Engaged to communicate to employees regarding exercising their rights to organize and bargain
Organization RoadWarrior Productions LLC	collectively.
P.O. Box, Building and Room Number, if any	
Street 108 South Indian Circle	
City Coca	
State FL ZIP Code + 4 329	922

15.a. Employer Name: Fritz Industries		15.b. Trade Name, if any:
15.c. To Whom Paid		15.d. Amount 14, 947
Name Eric	Funston	15.e. Purpose
Title Organization SEO Solutions	LLC	Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Num	ber, if any	
Street 4613 E 13th Street	ī.	
City Tulsa		
State OK	ZIP Code + 4 74112	

15.a. Employer Name: FSI Disposal		15.b. Trade Name, if any:
15.c. To Whom Paid		15.d. Amount 2,887
Name Eric Title	Funston	15.e. Purpose Engaged to communicate to employees regarding
Organization SEO Solution	ns LLC	exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room No	umber, if any	
Street 4613 E 13th Stre	eet	
City Tulsa		
State OK	ZIP Code + 4 74112	

Name of Person Filing: LRI Consulting Services Inc	,	File Number C- 00525

D. Schedule of Disbursements for Reportable Activity Use this Schedule to report only disbursements made for the purposes described instructions.	
15.a. Employer Name: G & K Services	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 750
Name Joseph Brock Title Organization East Coast Labor Relations LLC	15.e. Purpose Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Number, if any Street 151 Forge Road	
City Delran	
State NJ ZIP Code + 4 08	3075

15.a. Employer Name: General Electric	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 13,548
Name Rebecca Smith	15.e. Purpose
Title Organization Taltos Consulting Inc	Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Number, if any	
Street 1474 Lodgepole Drive	
City Henderson	
State NV ZIP Code + 4 89	014

15.a. Employer Name: Golden Farm Church		15.b. Trade Name, if any:
15.c. To Whom Paid		15.d. Amount 24, 836
Name Joseph Title	Mieluchowski	15.e. Purpose Engaged to communicate to employees regarding exercising their rights to organize and bargain
Organization		collectively.
P.O. Box, Building and Room Nu	mber, if any	
Street 47 E Jonathan Co	urt	
City Kennett Square		
State Pennsylvania	ZIP Code + 4 19348	

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Organization RoadWarrior Productions LLC exercising their rights to organize and bargain collectively.

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

Street 108 South Indian Circle
City Coca

City Coca

State FL ZIP Code + 4 32922

15.a. Employer Name: 15.b. Trade Name, if any: HealthSouth Rehab Hospital of Spring Hill 15.d. Amount 4,028 15.c. To Whom Paid Carina Hunt Name 15.e. Purpose Engaged to communicate to employees regarding exercising their rights to organize and bargain Organization C Hunt Management Consulting Inc collectively. P.O. Box, Building and Room Number, if any Street 701 Love Henry Court Southlake ZIP Code + 4 76092 State TX

15.a Employer Name: HollyFrontier Companies	15.b. Trade N	lame, if any:
15.c. To Whom Paid	15.d. Amoun	69,113
Name James Cle	gg 15.e. Purpos	9
Title Organization Clegg & Associates Mar	Engaged exercisi	to communicate to employees regarding ng their rights to organize and bargain
P.O. Box, Building and Room Number, if any		
Street 17583 26th Avenue		
City Surrey		
State BC Z	Code + 4 V3S0A4	

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Name of Person Filing: LRI Consulting Services Inc	File Number C- 00525

D. Schedule of Disbursements for Reportable Activity Use this Schedule to report only disbursements made for the purposes described in Part D instructions.		
15.a. Employer Name: HollyFrontier Companies	15.b. Trade Name, if any:	
15.c. To Whom Paid	15.d. Amount 50,178	
Name Joseph Brock Title	15.e. Purpose Engaged to communicate to employees regarding	
Organization East Coast Labor Relations LLC	exercising their rights to organize and bargain collectively.	
P.O. Box, Building and Room Number, if any		
Street 151 Forge Road		
City Delran	}	
State NJ ZIP Code + 4 08	8075	

15.a. Employer Name: Hunter Jersey Peterbilt & Paclease		15.b. Trade Name, if any:	
15.c. To Whom Paid		15.d. Amount 750	
Name Michael	Rosado	15.e. Purpose	
Title Organization M Rosado M	anaement Consultants LLC	Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.	
P.O. Box, Building and Room	Number, if any		
Street 5 Quail Court			
City Englewood			
State NJ	ZIP Code + 4 07024		

15.a. Employer Name: International Paper Company	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 2, 268
Name Simon Jara Title	15.e. Purpose Engaged to communicate to employees regarding exercising their rights to organize and bargain
Organization	collectively.
P.O. Box, Building and Room Number, if any	
Street 10380 Rochelle Avenue	
City Santec	
State CA ZIP Code + 4	92071

Name of Person Filing:	LRI Consulting Services Inc	File Number C- 00525
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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: Interplastic Corporation	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 32, 713
Name Joseph Brock	15.e. Purpose
Title Organization East Coast Labor Relations LLC	Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Number, if any	
Street 151 Forge Road	
City Delran	

15.a. Employer Name: Inventure Foods		15.b. Trade Name, if any:
15.c. To Whom Paid		15.d. Amount 40,861
Name Mary	Holden	15.e. Purpose
Title Organization Mary L Hol	den HR	Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room	Number, if any	
Street 1090 Willow Gro	ove Court	
City Rochester Hill:	s	
State MI	ZIP Code + 4 48307	

15.a. Employer Name: Johnson Controls, Inc.	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 24, 923
Name Byron Clay	15.e. Purpose
Title	Engaged to communicate to employees regarding
Organization BJC and Associates Inc	exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Number, if any	
Street 10108 Fehlberg Court	
City St John	
State IN ZIP Code + 4	46379

State NJ

15.a. Employer Name: JWF Industries, Inc.	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 15, 837
Name Eric Funston	15.e. Purpose
Title Organization SEO Solutions LLC	Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Number, if any	
Street 4613 E 13th Street	
City Tulsa	
State OK ZIP Code + 4 74	112

15.a. Employer Näme: Ken Cannon	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 8,053
Name Joseph Brock	15.e. Purpose
Title Organization East Coast Labor Relations LLC	Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Number, if any	
Street 151 Forge Road	
City Delran	
State NJ ZIP Code + 4 08075	

15.a. Employer Name: Lakewood Machine Products	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 5,844
Name Eric Funston	15.e. Purpose
Title	Engaged to communicate to employees regarding exercising their rights to organize and bargain
Organization SEO Solutions LLC	collectively.
P.O. Box, Building and Room Number, if any	
Street 4613 E 13th Street	
City Tulsa	
State OK ZIP Code + 4 7411	2

15.a. Employer Name: Lancaster Food, LLC	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 15, 013
Name Joseph Brock	15.e. Purpose
Title Organization East Coast Labor Relations LLC	Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Number, if any	
Street 151 Forge Road	
City Delran	
State NJ ZIP Code + 4 08075	

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Name of Person Filing: LRI Consulting Services In	c File Ņumber C- 00525
D. Schedule of Disbursements for Reportable Activity	Use this Schedule to report only disbursements made for the purposes described in Part D of instructions.
15:a.Employer Name: Lancaster Food, LLC	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 12,277
Name Russell Brown	15.e. Purpose
Title Organization RoadWarrior Productions LLC	Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Number, if any	
Street 108 South Indian Circle	
City Coca	

15.a. Employer Name: Lyngblomsten Care Cente	r	15.b. Trade Name, if any:
15.c. To Whom Paid		15.d. Amount 44,134
Name Versala	Parish	15.e. Purpose
Title Organization Quick Response M	Management	Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Number,	if any	
Street 9684 Cornell Street		
City Taylor		
State MI	ZIP Code + 4 48180	

15.a. Employer Name: .McCollisters Transportation Group	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 38, 400
Name Scott Michel Title	15.e. Purpose Engaged to communicate to employees regarding exercising their rights to organize and bargain
Organization	collectively.
P.O. Box, Building and Room Number, if any	
Street 819 Herman Road	
City Horsham	
State PA ZIP Code + 4 1904	44

State FL

Name of Person Filing: LRI Consulting Services Inc	File Number C- 00525
D. Schedule of Disbursements for Reportable Activity Use this Scheinstructions.	edule to report only disbursements made for the purposes described in Part D of the
15.a. Employer Name: McDonald's Restaurant No. 4489	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 4,500
Name Michael Rosado Title Organization M Rosado Manaement Consultants LLC	15.e. Purpose Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Number, if any	

15.a. Employer Name: MediLodge		15.b. Trade Name, if any:	
15.c. To Whom Paid		15.d. Amount 27,069	
Name Carina Title Organization C Hunt Management of P.O. Box, Building and Room Number, if an	Hunt Consulting Inc	15.e. Purpose Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.	
Street 701 Love Henry Court			
City Southlake .			
State TX	ZIP Code + 4 76092		

15.a. Employer Name: Mission Healthcare LLC	15.b. Trade Name, if any: Evergreen Terrace
15.c. To Whom Paid	15.d. Amount 16,819
Name Versala Parish	15.e. Purpose
Title Organization Quick Response Management	Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Number, if any	
Street 9684 Cornell Street	
City Taylor	
State MI ZIP Code + 4	. 48180

··· .

Street 5 Quail Court
City Englewood

State NJ

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: Mission Healthcare LLC	15.b. Trade Name, if any: Evergreen Terrace	
15.c. To Whom Paid	15.d. Amount 4,709	
Name Joseph Brock Title	15.e. Purpose Engaged to communicate to employees regarding exercising their rights to organize and bargain	
Organization East Coast Labor Relations LLC P.O. Box, Building and Room Number, if any	collectively.	
Street 151 Forge Road		

City Delran State NJ

15.a Employer Name: Mission Healthcare LLC	15.b. Trade Name, if any: Evergreen Terrace
15.c. To Whom Paid	15.d. Amount 8,592
Name Carina Hunt	15.e. Purpose
Title Organization C Hunt Management Consulting Inc	Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Number, if any	
Street 701 Love Henry Court	
City Southlake	
State TX ZIP Code + 4 76092	

15.d. Amount 4, 697
13.d. Amount 17 99 /
15.e. Purpose
Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
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15.a. Employer Name: Montaplast		15.b. Trade Name, if any:
15.c. To Whom Paid	Funston	15.d. Amount 5,701
Name Eric Title	ranscon	15.e. Purpose Engaged to communicate to employees regarding
Organization SEO Solutio	ons LLC	exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room N	Number, if any	
Street 4613 E 13th Street		
City Tulsa		
State OK	ZIP Code + 4 74112	

15.a. Employer Name: Multiband		15.b. Trade Name, if any:	
15.c. To Whom Paid		15.d. Amount 28, 457	
Name Matt	Perovic	15.e. Purpose	
Title Organization Quantum (Consulting Inc	Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.	
P.O. Box, Building and Roor	n Number, if any		
Street 10917 Kilpatr	ick		
City Oak Lawn			
State IL	ZIP Code + 4 60453		

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State PA

Name of Person Filing: LRI Consulting Services Inc			File Number C- 00525	
D. Schedule of Disbursements for Reportable Activity Use this Scheinstructions.			dule to report only disbursements made for the purposes described in Part D of the	
15.a. Employ Nexca	erName: are Health Systems, LLC		15.b. Trade Name, if any:	
15.c. To Whom Paid			15.d. Amount 1,718	
Name	Byron Clay		15.e. Purpose	
Title			Engaged to communicate to employees regarding	
Organizatio	on BJC and Associates Inc		exercising their rights to organize and bargain collectively.	

15.a. Employer Name: Next Generation Vending, LLC		15.b. Trade Name, if any:
15.c. To Whom Paid		15.d. Amount 7, 241
Name Salvatore Cle	emente	15.e. Purpose
Title		Engaged to communicate to employees regarding
Organization		exercising their rights to organize and bargain collectively.
		Collegelvely
P.O. Box, Building and Room Number, if any		
Street 1729 Ryerson Avenue		
·		
State PA .ZI	P Code + 4 18509	

15.a. Employer Name: Next Generation Vend	ling, LLC	15.b. Trade Name, if any:	
15.c. To Whom Paid		15.d. Amount 11,189	
Name Scott	Michel	15.e. Purpose	
Title			
Organization			
P.O. Box, Building and Room Number, if any			
Street 819 Herman Road			
City Horsham			
State PA	ZIP Code + 4 19044		

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

Street 10108 Fehlberg Court

City St John
State IN

Name of Person Filing: LRI Consulting Services Inc	File Number C- 0,0525
D. Schedule of Disbursements for Reportable Activity	Use this Schedule to report only disbursements made for the purposes described in Part D of transtructions.
15.a. Employer Name: Niagara Lutheran Health & Rehab Ctr	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 3, 912

10.07 10 11.10			
Name	Salvatore	Clemente	15.e. Purpose
Title			Engaged to communicate to employees regarding
Organizatio	n		exercising their rights to organize and bargain collectively.
P.O. Box, E	Building and Room Number, if a	ny	
Street 17	29 Ryerson Avenue		
City Sc	ranton		
State PA		ZIP Code + 4 18509	
		·	

15.a. Employer Name: Niagara Lutheran Health & Rehab Ctr	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 4,715
Name Mary Holden	15.e. Purpose
Title	Engaged to communicate to employees regarding
Organization Mary L Holden HR	exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Number, if any	
Street 1090 Willow Grove Court	
City Rochester Hills	
State MI ZIP Code + 4 48307	

15.a. Employer Name: Niagara Lutheran Health & Rehab Ctr	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 19,850
Name Nancy Jowske Title	15.e. Purpose Engaged to communicate to employees regarding
Organization Jowske Consulting Services LLC	exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Number, if any	
Street 4435 Cornwell Lane	
City Whitmore Lake	
State MI ZIP Code + 4 48189	

Name of Person Filing: LRI Consulting	Services Inc	File Number (C- 00525	
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D. Schedule of Disbursements for Reportable Activity Use this Schedule to report only disbursements made for the purposes described instructions.		
15.a. Employer Name:	15.b. Trade Name, if any:	
Niagara Lutheran Health & Rehab Ctr		
15.c. To Whom Paid	15.d. Amount 12,506	
Name Rebecca Smith	15.e. Purpose	
Title	Engaged to communicate to employees regarding exercising their rights to organize and bargain	
Organization Taltos Consulting Inc	collectively.	
P.O. Box, Building and Room Number, if any	·	
Street 1474 Lodgepole Drive		
City Henderson		
State NV ZIP Code + 4	89014	

15.a. Employer Name: Northwest Pipe Company	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 14,808
Name Eric Funston	15.e. Purpose
Title Organization SEO Solutions LLC	Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Number, if any	
Street 4613 E 13th Street	
City Tulsa	
State OK ZIP Code + 4	4112

15.a. Employer Name: NTN-Bower Corporation		15.b. Trade Name, if ariy:
15.c. To Whom Paid		15.d. Amount 37,374
Name Byron	Clay	15.e. Purpose
Title		Engaged to communicate to employees regarding
Organization BJC and Ass	ociates Inc	exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room No	•	
Street 10108 Fehlberg (Court	
City St John		
State IN	ZIP Code + 4 46379	

15.a. Employer Name: NTN-Bower Corporation		15.b. Trade Name, if any:	
15.c. To Whom Paid Name Patrick O' Mara Title Organization OMara & Associates LLC		15.d Amount 53,723 15.e Purpose Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.	
P.O. Box, Building and Room N	·		
Street 6 Drakewood Lan	ıe		
City Novato			
State CA	ZIP Code + 4 94947		

15.a. Employer Name: NTN-Bower_Corporation		15.b. Trade Name, if any:	
15.c. To Whom Paid		15.d. Amount 53,.042	
Name Joseph Brock Title Organization East Coast Labor Relations LLC P.O. Box, Building and Room Number, if any		15.e. Purpose Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.	
Street 151 Forge Road City Delran State NJ ZIP Code + 4 08075			

Name of Person Filing: LRI Consulting Services Inc			c File Number C- 00525
D. Schedule of Disbursements for Reportable Activity Use this Schedule to report only disbursements made for the purposes described in Part D of transtructions.			
15.a. Emplo	oyerName: Bower Corporati	on	15.b. Trade Name, if any:
15.c. To Wh	nom Paid		15.d. Amount 45, 473
Name	Eric	Funston	15.e. Purpose
Title			Engaged to communicate to employees regarding
Organization SEO Solutions LLC		ns LLC	exercising their rights to organize and bargain collectively.

5.a. Employer Name: Old Bridge Chemicals	15.b. Trade Name, if any:
5.c. To Whom Paid	15.d. Amount 1,838
Name Michael Rosado	15.e. Purpose
Title	Engaged to communicate to employees regarding
Organization M Rosado Manaement Consultants LLC	exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Number, if any	
Street 5 Quail Court	
City Englewood	
State NJ ZIP Code + 4 07024	

15.a. Employer Name: Panera Bread	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 4,931
Name Nancy Jowske Title Organization Jowske Consulting Services LLC P.O. Box, Building and Room Number, if any	15.e. Purpose Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
Street 4435 Cornwell Lane City Whitmore Lake State MI ZIP Code + 4 48189	

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

Street 4613 E 13th Street

City Tulsa State OK

Name of Person Filing: LRI Consulting Services In	File Number C- 00525	
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.aEmployer Name:	15.b. Trade Name, if any:	

15.a.Employer Name: Paris Companies		15.b. Trade Name, if any:
15.c. To Whom Paid Name Byron C Title Organization BJC and Associates Ir P.O. Box, Building and Room Number, if any Street 10108 Fehlberg Court City St John	lay	15.d. Amount 6,331 15.e. Purpose Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
State IN	ZIP Code + 4 46379	

15.a. Employer Name: Park Aerospace Technologies Corporation	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 11, 320
Name Mike Couch Title Organization MWC Consulting Group	15.e. Purpose Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Number, if any	
Street 1813 E Ithica Street	
City Broken Arrow State Oklahoma ZIP Code + 4 74012	

15.a. Employer Name: Patriot Machining Manufacturing Services	15.b. Trade Name, if any:		
15.c. To Whom Paid	15.d. Amount 18,321		
Name Mike Couch	15.e. Purpose		
Title Organization MWC Consulting Group	Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.		
P.O. Box, Building and Room Number, if any			
Street 1813 E Ithica Street			
City Broken Arrow			
State Oklahoma ZIP Code + 4 74012			

Name of Person Filing: LRI	Consulting Services Inc		File Number C- 00525	
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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: Pep Boys	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 750
Name Joseph Brock	15.e. Purpose
Title	Engaged to communicate to employees regarding
Organization East Coast Labor Relations LLC	exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Number, if any	
Street 151 Forge Road	,
City Delran	ì
State NJ ZIP Code + 4	08075
,	08075

15.a. Employer Name: Pinnacle Foods Group LLC	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 15, 932
Name Angel Cornejo Title	15.e. Purpose Engaged to communicate to employees regarding exercising their rights to organize and bargain
Organization P.O. Box, Building and Room Number, if any	collectively.
Street 1427 Dent Street	
City Escalon	
State California ZIP Code + 4 95320	

15.a. Employer Name: Pioneer Supermarket		15.b. Trade Name, if any:
15.c. To Whom Paid	- · · · · · · · · · · · · · · · · · · ·	15.d. Amount 3, 140
Name Michael	Rosado	15.e. Purpose
Title Organization M Rosado M	anaement Consultants LLC	Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room	Number, if any	
Street 5 Quail Court		
City Englewood		
State NJ	ZIP Code + 4 07024	

Name of Person Filing: LRI Consulting Services I	nc File Number C- 00525
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: Pirate Dinner Adventure, Inc.	15.b. Trade Name, if any:
	15 d Amount 12 500

15.a. Employer Name: Pirate Dinner Adventure, Inc.	15.b. Trade Name, if any:	
15.c. To Whom Paid	15.d. Amount 12,500	
Name Russell Brown	15.e. Purpose	
Title Organization RoadWarrior Productions LLC	Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.	
P.O. Box, Building and Room Number, if any		
Street 108 South Indian Circle		
City Coca		
State FL ZIP Code + 4 32922		

15.a. Employer Name: Poet	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 3,834
Name Joseph Brock Title Organization East Coast Labor Relations LLC P.O. Box, Building and Room Number, if any	15.e. Purpose Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
Street 151 Forge Road City Delran State NJ ZIP Code + 4 08075	

15.a. Employer Name: Portola Packaging	3	15.b. Trade Name, if any:
15.c. To Whom Paid		15.d. Amount 1,025
Name Armando Title	Talancon	15.e. Purpose Engaged to communicate to employees regarding
Organization AES2		exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room	Number, if any	
Street 142 Northgate	Road	
City Riverside		
State IL	ZIP Code + 4 60546	

Name of Person Filing: LRI Consulting Services Inc	File Number C- 00525
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: Professional Transportation Inc.	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 3,508
Name Joseph Brock Title	15:e Purpose Engaged to communicate to employees regarding

Organization East Coast Labor Relations LLC		collectively.	rights	to	organize	and	bargain			
P.O. B	ox, Building and Room Number, if any	,								
Street	151 Forge Road									
City	Delran									
State	NJ	ZIP Code + 4	08075		,					

5.a. Employer Name: Professional Transportation Inc.	15.b. Trade Name, if any:
5.c. To Whom Paid	15.d. Amount 32, 585
Name Russell Brown	15.e. Purpose
Title	Engaged to communicate to employees regarding exercising their rights to organize and bargain
Organization RoadWarrior Productions LLC	collectively.
P.O. Box, Building and Room Number, if any	
Street 108 South Indian Circle	
City Coca	
State FL ZIP Code + 4 3292	2

15.a. Employer Name: Progress Rail Service Corporation			15.b. Trade Name, if any:		
15.c. To Whom Paid			15.d. Amount 14, 430		
Name	Eric	Funston	15.e. Purpose		
Title Organization SEO Solutions LLC			Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.		
		ons LLC			
P.O. Box,	Building and Room N	Number, if any			
Street 46	513 E 13th Str	reet			
City Tu	ılsa				
State OF	<	ZIP Code + 4 74112			

Name of Person Filing: LRI Consulting Services I	nc	File Number C- 00525		
D. Schedule of Disbursements for Reportable Activity	Use this Scheo instructions.	redule to report only disbursements made for the purposes described in Part D of the		
15.a. Employer Name: PSC Metals - Garn	·	15.b. Trade Name, if any:		
15.c. To Whom Paid		15.d. Amount 32, 431		
Name Scott Michel		15.e. Purpose		
Title Organization		Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.		
P.O. Box, Building and Room Number, if any				
Street 819 Herman Road				
City Horsham				
State PA ZIP Code + 4	19044	•		

15.a. Employer Name: Putnam Ridge	15.b. Trade Name, if any:		
15.c. To Whom Paid	15.d. Amount 26, 666		
Name Joseph Mieluchowski			
Title .	Engaged to communicate to employees regarding exercising their rights to organize and bargain		
Organization	collectively.		
P.O. Box, Building and Room Number, if any			
Street 47 E Jonathan Court			
City Kennett Square			
State Pennsylvania ZIP Code + 4 19348			

15.a. Employer Name:		15.b. Trade Name, if any:		
Putnam Ridge				
15.c. To Whom Paid Name Mark Lema Title Organization Lema & Associates P.O. Box, Building and Room Number, if any		15.d. Amount 26, 393		
		15.e. Purpose		
		Engaged to communicate to employees regarding exercising their rights to organize and bargain		
		collectively.		
Po Box 129				
Street				
City Burlington				
State New Jersey	ZIP Code + 4 08016			

Name of Person Filing: LRI Consulting Services Inc	File Number C- 00525
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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: R.J. Reynolds Tobacco Company	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 27, 676
Name Joseph Brock	15.e. Purpose
Title Organization East Coast Labor Relations LLC	Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Number, if any	· ·
Street 151 Forge Road	·
City Delran	
State NJ ZIP Code + 4 0	8075

15.a. Employer Name: R.J. Reynolds Toba	acco Company	15.b. Trade Name, if any:		
15.c. To Whom Paid		15.d. Amount 28, 473		
Name Eric	Funston	15.e. Purpose		
Title Organization SEO Solutions LLC		Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.		
P.O. Box, Building and Room N	Number, if any			
Street 4613 E 13th Street				
City Tulsa				
State OK	ZIP Code + 4 74112			
		_		

15.a. Emplöyer Name: Rea Algonquin Industries Division	15.b. Trade Name, if any:		
15.c. To Whom Paid	15.d. Amount 1, 132		
Name Robert Gaglione Title	15.e. Purpose Engaged to communicate to employees regarding exercising their rights to organize and bargain		
Organization	collectively.		
P.O. Box, Building and Room Number, if any			
Street 2 Westview Drive			
City Westerly			
State Rhode Island ZIP Code + 4 02891			

Name of Person Filing: LRI Consulting Services	Inc	File Number C- 00525
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	nis Schedule to report only disbursements made for the purposes described in Part D of the purpose described in Part D of the Part D of the purpose described in Part D of the Part D of th
15.a. Employer Name: Rea Algonquin Industries Division	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 29, 909
Name Joseph Mieluchowski	15.e. Purpose
Title	Engaged to communicate to employees regarding
Organization	exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Number, if any	
Street 47 E Jonathan Court	
City Kennett Square	
State Pennsylvania ZIP Code + 4 19348	

15.a. Employer Name: Riverview Health	& Rehab Center	15.b. Trade Name, if any:
15.c. To Whom Paid		15.d. Amount 20,091
Name Byron	Clay	15.e. Purpose
Title Organization BJC and A	ssociates Inc	Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room	Number, if any	
Street 10108 Fehlberg	g Court	
City St John		
State IN	ZIP Code + 4 46379	

15.a. Employer Name: RosDev Group		15.b. Trade Name, if any:
15.c. To Whom Paid		15.d. Amount 16,751
Name Mary Title Organization Mary L Holden HR	Hölden	15.e. Purpose Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Number, if a	any	
Street 1090 Willow Grove Cour	t	
City Rochester Hills		
State MI	ZIP Code + 4 48307	

Name of Person Filing: LRI Consulting Services Inc	File Number C- 00525
Traine of Foldon wing. Ext. Concatena, Contractor inc	

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: Schimmer Ford	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 2,122
Name Eric Funston Title Organization SEO Solutions LLC P.O. Box, Building and Room Number, if any	15.e. Purpose Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
Street 4613 E 13th Street City Tulsa State OK ZIP Code + 4	74112

Shuttle Wagon/NORDCO	15.b. Trade Name, if any:
s.c. To Whom Paid	15.d. Amount 2,119
Name Joseph Brock	15.e. Purpose
Title	Engaged to communicate to employees regarding
Organization East Coast Labor Relations LLC	exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Number, if any	
Street 151 Forge Road	
City Delran	
State NJ ZIP Code + 4 08075	

15.a. Employer Name: Sigma Processed Meats LLC	15.b. Trâde Name, if any:
15.c. To Whom Paid	15.d. Amount 4,596
Name Simon Jara	15.e. Purpose
Title	Engaged to communicate to employees regarding exercising their rights to organize and bargain
Organization	collectively.
P.O. Box, Building and Room Number, if any	
Street 10380 Rochelle Avenue	
City Santec	
State CA ZIP Code	le + 4 92071

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Name of Person Filing: LRI Consu	lting Services Inc	File Number C- 00525	
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D. Schedule of Disbursements for Reportable Activity Use this Schedule to report only disbursements made for the purposes described in Part D of instructions.		
15.a. Employer Name: Sitel	15.b. Trade Name, if any:	
15.c. To Whom Paid	15.d. Amount 5, 708	
Name Patrick O'Mara Title Organization OMara & Associates LLC	15.e. Purpose Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.	
P.O. Box, Building and Room Number, if any		
Street 6 Drakewood Lane		
City Novato		
State CA ZIP Code + 4	94947	

15.a. Employer Name: Sitel		15.b. Trade Name, if any:
15.c. To Whom Paid		15.d. Amount 6, 214
Name Rebecca	Smith	15.e. Purpose
Title Organization Taltos	Consulting Inc	Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
P.O. Box, Building and Ro	oom Number, if any	
Street 1474 Lodgepo	ole Drive	
City Henderson		
State NV	ZIP Code + 4 89014	

15.a. Employer Name: Southeast Berrien Co. Landfill Authority	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 7, 885
Name Mike Couch	15.e. Purpose
Title Organization MWC Consulting Group	Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Number, if any	
Street 1813 E Ithica Street	
City Broken Arrow	
State Oklahoma ZIP Code + 4 74012	

Name of Person Filing: LRI Consulting Services Inc	File Number C- 00525
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D. Schedule of Disbursements for Reportable Activity Use this Schedule to report only disbursements made for the purposes descriptions.		
15.a. Employer Name: Steel Dynamics/Mesabi Nugget LLC	15.b. Trade Name, if any:	
15.c. To Whom Paid	15.d. Amount 5, 229	
Name William Scott Title Organization Scott Consulting P.O. Box, Building and Room Number, if any	15.e Purpose Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.	
Street 1032 Meda Street City Memphis		
State TN ZIP Code + 4	38104	

15.a. Employer Name: Steel Warehouse	15.b. Trade Name, if any:,
15.c. To Whom Paid	15.d. Amount 8, 459
Name Joseph Mieluchowski	15.e. Purpose
Title	Engaged to communicate to employees regarding
Organization	exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Number, if any	
Street 47 E Jonathan Court	
City Kennett Square	
State Pennsylvania ZIP Code + 4 19348	

15.a. Employer Name: Sysco		15.b. Trade Name, if any:
15.c. To Whom Paid		15.d. Amount 12,505
Name Simon	Jara	15.e. Purpose
Title		Engaged to communicate to employees regarding exercising their rights to organize and bargain
Organization		collectively.
P.O. Box, Building and Room Nu	mber, if any	
Street 10380 Rochelle A	venue	
City Santec		
State CA	ZIP Code + 4 92071	

Name of Person Filing: LRI Consulting Services Inc	File Number C- 00525
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D. Schedule of Disbursements for Reportable Activity Use this Schedule to report only disbursements made for the purposes described in Part D of transcriptions.	
15.a. Employer Name: Tendercare West	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 20, 646
Name Mary Holden	15.e. Purpose
Title Organization Mary L Hölden HR	Engaged to communicate to employees regarding exercising their rights to organize and bargain . collectively.
P.O. Box, Building and Room Number, if any	
Street 1090 Willow Grove Court	
City Rochester Hills	
State MI ZIP Code + 4	48307

15.a. Employer Name: The Boyd Law Group	15.b. Trade Name, if any:
15.c. To Whom Paid Name Michael Rosado Title Organization M Rosado Manaement Consultants LLC	15.d Amount 435 15.e Purpose Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Number, if any	
Street 5 Quail Court City Englewood State NJ ZIP Code + 4 '07024	

15.a. Employer Name: The May Institute,	Inc.	15.b. Trade Name, if any:
15.c. To Whom Paid		15.d. Amount .10, 785
Name Mike Title Organization MWC Consult	Couch ing Group	15.e. Purpose Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room N	umber, if any	
Street 1813 E Ithica S	treet	
City Broken Arrow		
State Oklahoma	ZIP Code + 4 74012	

Name of Person Filing: LRI Consulting Services Inc		File Number C- 00525
<u> </u>	<u></u>	<u> </u>
D. Schedule of Disbursements for Reportable Activity	Use this Schedule to report only disbursement	ents made for the purposes described in Part D of the

D. Schedule of Disbursements for Reportable Activity Use this Schedule to report only disbursements made for the purposes described in Part D of instructions.	
15.a. Employer Name: The May Institute, Inc.	15.b. Tradé Namé, if any:
15.c. To Whom Paid	15.d. Amount 27, 013
Name Patrick O'Mara Title Organization OMara & Associates LLC P.O. Box, Building and Room Number, if any	15.e. Purpose Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
Street 6 Drakewood Lane City Novato State CA ZIP Code + 4	94947

15.a. Employer Name: The May Institute, Inc.	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 7,729
Name Rebecca Smith	. 15.e. Purpoŝe
Title	Engaged to communicate to employees regarding
Organization Taltos Consulting Inc	exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Number, if any	
Street 1474 Lodgepole Drive	
City Henderson	
State NV ZIP Code + 4 89014	

15.a. Employer Name:	15.b. Trade Name, if any:
The May Institute, Inc.	
15.c. To Whom Paid	15.d. Amount 16, 325
Name Carina Hunt	15.e. Purpose
Title	Engaged to communicate to employees regarding
Organization C Hunt Management Consulting Inc	exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Number, if any	
Street 701 Love Henry Court	
City Southlake	
State TX ZIP Code + 4 76092	

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Name of Person Filing: LRI Consulting Services Inc	File Number C- 00525

D. Schedule of Disbursements for Reportable Activity Use this Schedule to report only disbursements made for the purposes described in Part D instructions.	
15.a. Employer Name: The Vintage Country Club	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 19,816
Name Evelyn Fragoso	15.e. Purpose
Title Organization	Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Number, if any	
Street 2700 Courtleigh Drive	
City Bakersfield	
State CA ZIP Code + 4	93309

15.a. Employer Name: The Vintage Country Club	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 22, 171
Name Simon Jara	15.e. Purpose
Title	Engaged to communicate to employees regarding exercising their rights to organize and bargain
Organization	collectively.
P.O. Box, Building and Room Number, if any	
Street 10380 Rochelle Avenue	
City Santec	
State CA ZIP Code + 4 92071	

15.a. Employer Name: TMK IPSCO Tubulars, Inc.	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 6,016
Name Joseph Brock Title Organization East Coast Labor Relations LLC P.O. Box, Building and Room Number, if any	15.e. Purpose Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
Street 151 Forge Road City Delran	
State NJ ZIP Code + 4 0	8075

Name of Person Filing: LRI Consulting Services Inc	File Number C- 00525
Name of Fason mig. Like Consulting Services The	1 lie 14d1 bei 0 00325

D. Schedule of Disbursements for Reportable Activity Use this Schedule to report only disbursements made for the purposes described in Prinstructions:	
15.a. Employer Name: United Cerebral Palsy of Gtr Sacramento	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 1, 982
Name Denise Malwitz	15.e. Purpose
Title	Engaged to communicate to employees regarding exercising their rights to organize and bargain
Organization	collectively.
P.O. Box, Building and Room Number, if any	
Street 3530 Milford Haven	
City Las Vegas	
State Nevada ZIP Code + 4 89	9122

15.a. Employer Name: UPS	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 10,017
Name Simon Jara	15.e. Purpose
Title	Engaged to communicate to employees regarding exercising their rights to organize and bargain
Organization	collectively.
P.O. Box, Building and Room Number, if any	
Street 10380 Rochelle Avenue	
City Santec	
State CA ZIP Code + 4	02071

15.a. Employer Name: UPS		15.b. Trade Name, if any:
15.c. To Whom Paid		15.d. Amount 19,500
Name Russell	Brown	15.e. Púrpose
Title Organization RoadWarrio	or Productions LLC	Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room	Number, if any	
Street 108 South India	an Circle	
City Coca		
State FL	ZIP Code + 4 32922	

D. Schedule of Disbursements for Reportable Activity Use this Schedule to report only disbursements made for the purposes described in Part D. instructions.	
15.a. Employer Name: ÜPS	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 8,593
Name Rebecca Smith Title Organization Taltos Consulting Inc P.O. Box, Building and Room Number, if any	15.e. Purpose Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
Street 1474 Lodgepole Drive City Henderson	

15.a. Employer Name: Utopia Home Care,	Inc.	15.b. Trade Name, if any:
15.c. To Whom Paid		15.d. Amount 2,133
Name Michael	Rosado	15.e. Purpose
Title Organization M Rosado M	anaement Consultants LLC	Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room	Number, if any	
Street 5 Quail Court		
City Englewood		
State NJ	ZIP Code + 4 07024	·

15.a. Employer Name: Waterview Hills Rehab & Nursing Home Care	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 15,840
Name Simon Jara	15.e. Purpose
Title	Engaged to communicate to employees regarding exercising their rights to organize and bargain
Organization	collectively.
P.O. Box, Building and Room Number, if any	
Street 10380 Rochelle Avenue	
City Santec	
State CA ZIP Code + 4 92071	

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: Waterview Hills Rehab & Nursing Home Care	15.b. Trade Name, if any:	
15.c. To Whom Paid	15.d. Amount 7, 616	
Name Joseph Brock Title Organization East Coast Labor Relations LLC P.O. Box, Building and Room Number, if any	15.e. Purpose Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.	
Street 151 Forge Road City Delran		
State NJ ZIP Code + 4 08075		

15.a. Employer Name: Waterview Hills Rehab & Nursing Home Care	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 11, 170
Name Eric Funston	15.e. Purpose
Title	Engaged to communicate to employees regarding
Organization SEO Solutions LLC	exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Number, if any	
Street 4613 E 13th Street	
City Tulsa	
State OK ZIP Code + 4 74112	

15.a. Employer Name: Western Refining Wholesale, Inc.	15.b. Trade Name, if any:
15.c. To Whom Paid	15.d. Amount 35,048
Name David Acosta	15.e. Purpose
Title Organization Redstone Enterprises Inc	Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room Number, if any	
Street 5415 East Willowick	
City Anaheim	
State CA ZIP Code + 4 928	

Name of Person Filing: LRI Consulting Services Inc	File Number C- 00525

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: World Imports	15.b. Trade Name, if any:	
15.c. To Whom Paid	15.d. Amount 1,500	
Name Scott Michel	15.e. Purpose	
Title Organization	Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.	
P.O. Box, Building and Room Number, if any		
Street 819 Herman Road		
City Horsham		
State PA ZIP Code + 4	19044	

15.a. Employer Name: World Imports		15.b. Trade Name, if any:
15.c. To Whom Paid		15.d. Amount 4,115
Name Joseph Title Organization East Coast	Brock t Labor Relations LLC	15.e. Purpose Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.
P.O. Box, Building and Room	Number, if any	·
Street 151 Forge Road	ı	
City Delran		
State NJ	ZIP Code + 4 08075	