U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-21 RECEIPTS AND DISBURSEMENTS REPORT

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

This report is mandatory under P.L. 88-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.
Required of persons, including Labor Relations Consultants and Other Individuals and Organizations, Under section 203(b) of the Labor-Management Relations and Disclosure Act of 1959, as amended, (LMRDA)



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

581190

<u> </u>	
1 . File Number C- 00214	2. Period Covered Month/Day/Year Month/Day/Year (mm/dd/yyyy) (mm/dd/yyyy)
	By This Report
	11011. [01]/ [01]/ [2014] 11110ugii. [12]/ [31]/ [2014]
A. Person Filing	
Name and mailing address (include ZIP Code):	4. Any other address where records necessary to verify this report are kept:
Name Peter Bennett	Name
Title President	Title
Troutent	Tiue .
Organization The Bennett Law Firm, P.A.	Organization
P.O. Box, Building and Room Number, if any	B.O. Box Building and Box M. When You
P.O. Box, 7799	P.O. Box, Building and Room Number, if any Suite 300
Street	Street 121 Middle Street
City Portland	City Portland
State Maine ZIP Code + 4 04112-7799	State Maine ZIP Code + 4 04101-7109
	\
Signa	atures \
Each of the undersigned declares, under penalty of perjury and other applicable penalt	
information contained is any accompanying documents) has been examined by the	e signatory and is, to the best of the undersigned's knowledge and belief, true,
correct, and complete. (See the Section on penalties in the instructions).	
17. Signed President	18. Signed Treasurer
(if other title, see	(If other title, see
Title President instructions)	Title Treasurer instructions)
On 03/12/2015 (207) 773-4775	On 03/12/2015 (207) 773-4775
Date Telephone Number	Date Telephone Number

Name of Person Fi	ing:	Peter Bennett						File Number C-	00214	
B. Statement of F	ece	ipts Report all receipts from or services.	n employers ir	connect	tion wi	th labor relation	ns advice or serv	ices regardless of t	the purposes	of the advice
5.a. Name and Addr	ess (	of Employer (including trade na	ime, if any).				Mailing Address: Building and Roon	n Number if any		
Employer Ar	os	keag Beverages, LL	iC				.O. Box 114			
Trade Name				Street	Street					
Attention To	Th	omas A Bu	ıllock		7	City	oncord			
Title						State 1	ew Hampshir	e ]	ZIP Code +	4 03302-1148
								<del></del>		
5.b. Termination I	Date	Ongoing	· <u> </u>			5.c. Amou	t 6,052			
6. TOTAL RECEIF	TS	FROM ALL EMPLOYERS	676,427							
C. Statement of D	isb	ursements Report all di	shursements i	made by	the re	norting organi	ation in connecti	on with labor relation	ons advice o	r services rendered
			yers listed in I		1110 10	porting organia	ation in connecti	on with labor relatio	ons advice of	Services rendered
7. Disbursements to (a) Name	Offi	cers and Employees:	(b) Salary	(c) Exper	nses (d	) Totals				
Peter		Bennett	210,285		ol	210,285	9. Office and	Administrative Expe	enses	174,044
Charles	J	Carbonneau	28,575		0	28,57	<del>                                     </del>	<u>'</u>		16,202
Frederick	В	Finberg	132,660		0	132,660	11. Fees for Pi	ofessional Service	s	31,235
Laurie	A	Proctor	23,096		0	23,096	12. Loans Mad	e		0
Joanne	I	Simonelli	36,036		0	36,036	13. Other Disb	ursements		0
8. Total disbursem	ent	to officers and employees				430,652	14. Total Disbur	sements (Sum of Ite	ms 8-13)	652,133
							•			
D. Schedule of D	ishı	rsements for Reportable	Activity	Llea thic	Schoo	tule to report o	nly dishumamant	e made for the pur	nanas dasas	ibed in Part D of the
2. 0.1.000.00				instruction		die to report c	ny dispuisement	s made for the purp	poses descri	bed in Part D of the
15.a. Employer N	ame	:				15.b. Trac	e Name, If any:			
15.c. To Whom Pa	iid					15.d. Amo	unt			
Name				1		15.e. Purp		<del></del>		
Title					7	15.e. ruit	JSE			
Organization	_				<u> </u>	٦				
Organization						<b>-</b>				
P.O. Box Build	inn	and Room Number, if any								
1.0. 50x, 50x	mg.	and recommender, if any								İ
Street				=						
City										
State Washi	nat	on ZI	P Code + 4			¬				
		EMENTS FOR ALL REPOR	<u>_</u>	\/ITV		<u></u>	· · · · · · · · · · · · · · · · · · ·	·	<del></del>	
10. TOTAL DISBU	כאי	EMENTO FOR ALL REPU	VINDLE MO II	VIII						

Form LM-21 (2003)

Name of Person Filing: Peter Bennett	File Number C- 00214			
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:			
Employer Arc Terminals	P.O. Box, Bldg., Room No., if any Suite 250			
Trade Name	Street 3000 Research Forest Drive			
Attention To: John Didier				
Title				
	State Texas   ZIP Code + 4   77381-4385			
5.b. Termination Date Ongoing	5.c. Amount 41,656			
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Bldg., Room No., if any			
Employer Associated Grocers of New England	P.O. Box 6000			
Trade Name	Street			
Attention To: Steven Murphy	City Pembroke			
Title Sr. V.P. Finance & Administration	State New Hampshire ZIP Code + 4 03275-6000			
5.b. Termination Date Ongoing	5.c. Amount 43,605			
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:			
Employer Auburn Motor Sales	P.O. Box Bldg. Room No., if anv			
Trade Name Rowe Auburn	Street			
Attention To: Wallace   Camp, Jr.	City Auburn			
Title				
5.b. Termination Date Ongoing	State Maine ZIP Code + 4 04212-0500 5.c. Amount 6,814			
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:P.O. Box, Bldg., Room No., if any			
Employer Baltazar Contractors, Inc.	83 Carmelinas Circle			
Trade Name	Street			
Attention To: Dinis Baltazar	City Ludlow			
Title	State Massachusetts ZIP Code + 4 01056-3161			
5.b. Termination Date Ongoing	5.c. Amount 814			
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:			
Daniel de División de La Companyo	P.O. Box, Blda., Room No., if any			
Employer Bayside Distributing, Inc.	P.O. Box 710			
Trade Name	Street			
Attention To: Mark McCaddin	City Epping			
Title	State New Hampshire ZIP Code + 4 03042-0710			
5.b. Termination Date Ongoing	5.c. Amount 2, 549			
5.a. Name and Address of Employer (including trade name, if any).	<del></del>			
Employer Bellavance Beverage Company, Inc.	Mailing Address:			
cimployer L.	Mailing Address: P.O. Box. Bldo Room No., if anv			
Trade Name	P.O. Box. Bldg Room No., if any			
Trade Name Rellayance Sr	P.O. Box. Blda Room No., if anv Street 120 Northwest Boulevard			
Attention To: Joseph Bellavance, Sr.	P.O. Box. Bldg Room No., if anv Street 120 Northwest Boulevard City Nashua			
	P.O. Box. Blda Room No., if anv Street 120 Northwest Boulevard			

Name of Person Filing: Peter Bennett					File Number C- 00214		
B. Statement of I	Receipts Report all rece advice or service		nection w	ith labor r	elations advice or services reg	gardless of the purposes of the	
5.a. Name and Add	dress of Employer (include			000	Mailing Address:		
Employer Be	enevento Sand &	Stone Corp.		ا P.O. B	P.O. Box 454		
Trade Name		· · · · · · · · · · · · · · · · · · ·		Street			
Attention To:	Robert	Peckham	<u>'</u>	City	Wilmington		
Title				State	Massachusetts	ZIP Code + 4 01887-0454	
5.b. Termination D	ate Ongoing			5.c. Amo	ount 1,169		
5.a. Name and Add	dress of Employer (include	ding trade name, if any).		P.O. B	Mailing Address: ox, Bldg., Room No., if any		
Employer Bo	rggaard Constru	ction Corp.					
Trade Name				Street	70 Creeper Hill Roa	d	
Attention To:	Robert	Tefft		City	North Grafton		
Title				State	Massachusetts	ZIP Code + 4 01536-1444	
5.b. Termination D	Ongoing			5.c. Amo	ount 285		
5.a. Name and Ad	dress of Employer (inclu	ding trade name, if any).			Mailing Address:		
Employer Co	ca-Cola Bottline	g Co. of No. New Er	gland	¬Р.О. В	ox. <u>BldaRoom Noif</u> anv Suite 330		
Trade Name		<del>-</del>		Street	1 Executive Park Dr	ive	
Attention To:	Mark	Francoeur	<u>'</u>	City	Bedford		
Title	President			State	New Hampshire	ZIP Code + 4 03110-6913	
5.b. Termination D	Date Ongoing			5.c. Amo	ount 166,105		
5.a. Name and Ad	dress of Employer (inclu	ding trade name, if any).			Mailing Address:		
[6-		-b-da- of Massachus		P.O. B	ox, <u>Bldg., Room No., if any</u> Suite 403	1	
1	nstruction indus	stries of Massachus	l		1661 Worcester Road		
Trade Name			<u> </u>		<u></u>		
Attention To:				٠.	Framingham	ZIP Code + 4 01701-5401	
riue				Otato	Massachusetts	211 0000 1 1 01701-5401	
5.b. Termination [	Date			5.c. Am	ount 41,348		
5.a. Name and Ad	dress of Employer (inclu	ding trade name, if any).		P O P	Mailing Address: ox. Bldg., Room No., if anv		
Employer Cu	mberland County	Federal Credit Uni	.on		OX. Didd(NOOM) NO(1 ally		
Trade Name				 Street	101 Gray Road		
Attention To:							
Title	Karen	Smith		City	Falmouth		
	Chief Operating				Falmouth  Maine	ZIP Code + 4 04105-2029	
5.b. Termination [	Chief Operating			State		ZIP Code + 4 04105-2029	
	Chief Operating			State	Maine	ZIP Code + 4 04105-2029	
5.a. Name and Ad	Chief Operating Date Ongoing dress of Employer (inclu	Officer  ding trade name, if any).		State 5.c. Am	Maine ount 5,772  Mailing Address: ox. Bldg Room No if any	ZIP Code + 4 04105 - 2029	
5.a. Name and Ad	Chief Operating	Officer  ding trade name, if any).		State 5.c. Am P.O. B	Maine ount 5,772 Mailing Address:	ZIP Code + 4 04105-2029	
5.a. Name and Ad  Employer Do  Trade Name	Chief Operating Date Ongoing dress of Employer (inclu	ding trade name, if any).		State  5.c. Am  P.O. B	Maine ount 5,772  Mailing Address: ox. Bldg. Room No if anv P.O. Box 130	ZIP Code + 4 04105-2029	
5.a. Name and Ad  Employer  Trade Name  Attention To:	Chief Operating Date Ongoing dress of Employer (inclu	Officer  ding trade name, if any).		State  5.c. Am  P.O. B  Street City	Maine ount 5,772  Mailing Address: ox. Blda Room No if anv P.O. Box 130  Baileyville		
5.a. Name and Ad  Employer Do  Trade Name	Chief Operating Date Ongoing dress of Employer (inclu	ding trade name, if any).		State  5.c. Am  P.O. B	Maine ount 5,772  Mailing Address: ox. Bldg. Room No if anv P.O. Box 130	ZIP Code + 4 04105 - 2029  ZIP Code + 4 04694 - 0130	

Name of Person Filing: Peter Bennett		File Number C- 00214		
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 Addre			
Employer Federal Distributors, Inc.	P.O. Box, Bldg., Room P.O. Box 2			
	Street			
Trade Name Attention To: John Cronin	City Lewiston			
Title	State Maine	ZIP Code + 4 04241-2	007	
	T	01211 2	<u> </u>	
5.b. Termination Date Ongoing	5.c. Amount 3,805			
5.a. Name and Address of Employer (including trade name, if any).	Mailing Addre P.O. Bo <u>x, Bldg., Room</u>			
Employer Flowers Foods, Inc.	P.O. Box 1	.900		
Trade Name Lepage Bakeries	Street			
Attention To: Michael McCall	City Auburn			
Title President	State Maine	ZIP Code + 4 04211-1	900	
5.b. Termination Date Ongoing	5.c. Amount 30,670			
5.a. Name and Address of Employer (including trade name, if any).	Mailing Addr			
Employer Franklin-Somerset Federal Credit Union	P.O. Box <u>, Bida., Room</u>	No., It any		
	Street 26 Leavitt	Street		
Trade Name  Attention To: Karen Greenleaf	City Skowhegan			
Title	State Maine	ZIP Code + 4 04976-1	942	
5.b. Termination Date Ongoing	5.c. Amount 3, 025		<u> </u>	
5.a. Name and Address`of Employer (including trade name, if any).	Mailing Addr	acc.		
5.a. Name and Address of Employer (including trade frame, it any).	P.O. Box, Bldg., Room			
Employer Frannie Peabody House	Suite 311	}		
Employer				
Trade Name	Street 30 Danfort	h Street		
Trade Name	Street 30 Danfort	ZIP Code + 4 04101-4	502	
Trade Name  Attention To: Lorena Delcourt	Street 30 Danfort City Portland		502	
Trade Name  Attention To: Lorena Delcourt  Title	Street 30 Danfort City Portland State Maine  5.c. Amount 6,032  Mailing Addr	ZIP Code + 4 04101-4 ess:	502	
Trade Name  Attention To: Lorena Delcourt  Title  5.b. Termination Date Ongoing  5.a. Name and Address of Employer (including trade name, if any).	Street 30 Danfort City Portland State Maine  5.c. Amount 6,032	ZIP Code + 4 04101-4 ess:	502	
Trade Name  Attention To: Lorena Delcourt  Title  5.b. Termination Date Ongoing  5.a. Name and Address of Employer (including trade name, if any).  Employer Gagliarducci Construction, Inc.	Street 30 Danfort City Portland State Maine  5.c. Amount 6,032  Mailing Addr P.O. Box. Bldg., Room	ZIP Code + 4 04101-4  ess: LNoif.any	502	
Trade Name  Attention To: Lorena Delcourt  Title  5.b. Termination Date Ongoing  5.a. Name and Address of Employer (including trade name, if any).  Employer Gagliarducci Construction, Inc.  Trade Name	Street 30 Danfort City Portland State Maine  5.c. Amount 6,032  Mailing Addr P.O. Box. Bldg, Room Street 295 Pasco	ZIP Code + 4 04101-4  ess:  Noif_any  Road	502	
Trade Name  Attention To: Lorena Delcourt  Title  5.b. Termination Date Ongoing  5.a. Name and Address of Employer (including trade name, if any).  Employer Gagliarducci Construction, Inc.  Trade Name  Attention To: Jerry Gagliarducci	Street 30 Danfort City Portland State Maine  5.c. Amount 6,032  Mailing Addr P.O. Box. Bldg., Room Street 295 Pasco City Springfiel	ziP Code + 4 04101-4  ess: Noif any  Road		
Trade Name  Attention To: Lorena Delcourt  Title  5.b. Termination Date Ongoing  5.a. Name and Address of Employer (including trade name, if any).  Employer Gagliarducci Construction, Inc.  Trade Name	Street 30 Danfort City Portland State Maine  5.c. Amount 6,032  Mailing Addr. P.O. Box. Bldg. Room Street 295 Pasco City Springfiel State Massachuse	ess: Noif any Road d		
Trade Name  Attention To: Lorena Delcourt  Title  5.b. Termination Date Ongoing  5.a. Name and Address of Employer (including trade name, if any).  Employer Gagliarducci Construction, Inc.  Trade Name  Attention To: Jerry Gagliarducci	Street 30 Danfort City Portland State Maine  5.c. Amount 6,032  Mailing Addr P.O. Box. Bldg., Room Street 295 Pasco City Springfiel	ziP Code + 4 04101-4  ess: Noif any  Road		
Trade Name  Attention To: Lorena Delcourt  Title  5.b. Termination Date Ongoing  5.a. Name and Address of Employer (including trade name, if any).  Employer Gagliarducci Construction, Inc.  Trade Name  Attention To: Jerry Gagliarducci  Title	Street 30 Danfort City Portland State Maine  5.c. Amount 6,032  Mailing Addr. Room Street 295 Pasco City Springfiel State Massachuse  5.c. Amount 1,422  Mailing Addr.	ZIP Code + 4 04101-4  ess: Noif any  Road .d  tts ZIP Code + 4 01151-1		
Trade Name  Attention To: Lorena Delcourt  Title  5.b. Termination Date Ongoing  5.a. Name and Address of Employer (including trade name, if any).  Employer Gagliarducci Construction, Inc.  Trade Name  Attention To: Jerry Gagliarducci  Title  5.b. Termination Date Ongoing  5.a. Name and Address of Employer (including trade name, if any).	Street 30 Danfort City Portland State Maine  5.c. Amount 6,032  Mailing Addr P.O. Box. Bldg., Room Street 295 Pasco City Springfiel State Massachuse  5.c. Amount 1,422  Mailing Addr P.O. Box. Bldg., Room	ZIP Code + 4 04101-4  ess: Noif any  Road .d  tts ZIP Code + 4 01151-1		
Trade Name  Attention To: Lorena Delcourt  Title  5.b. Termination Date Ongoing  5.a. Name and Address of Employer (including trade name, if any).  Employer Gagliarducci Construction, Inc.  Trade Name  Attention To: Jerry Gagliarducci  Title  5.b. Termination Date Ongoing  5.a. Name and Address of Employer (including trade name, if any).  Employer Goodwill Industries of Northern New Engl	Street 30 Danfort City Portland State Maine  5.c. Amount 6,032  Mailing Addr P.O. Box. Bldg., Room Street 295 Pasco City Springfiel State Massachuse  5.c. Amount 1,422  Mailing Addr P.O. Box. Bldg., Room Unit 1	ZIP Code + 4 04101-4  ess:  Noif any  Road  d  etts  ZIP Code + 4 01151-1		
Trade Name  Attention To: Lorena Delcourt  Title  5.b. Termination Date Ongoing  5.a. Name and Address of Employer (including trade name, if any).  Employer Gagliarducci Construction, Inc.  Trade Name  Attention To: Jerry Gagliarducci  Title  5.b. Termination Date Ongoing  5.a. Name and Address of Employer (including trade name, if any).  Employer Goodwill Industries of Northern New Engl  Trade Name	Street 30 Danfort City Portland State Maine  5.c. Amount 6,032  Mailing Addr. Room Street 295 Pasco City Springfiel State Massachuse  5.c. Amount 1,422  Mailing Addr. Room Unit 1  Street 34 Hutcher	ZIP Code + 4 04101-4  ess:  Noif any  Road  d  etts  ZIP Code + 4 01151-1		
Trade Name Attention To: Lorena Delcourt Title  5.b. Termination Date Ongoing  5.a. Name and Address of Employer (including trade name, if any).  Employer Gagliarducci Construction, Inc. Trade Name Attention To: Jerry Gagliarducci Title  5.b. Termination Date Ongoing  5.a. Name and Address of Employer (including trade name, if any).  Employer Goodwill Industries of Northern New Engl Trade Name Attention To: Susan Smith	Street 30 Danfort City Portland State Maine  5.c. Amount 6,032  Mailing Addr P.O. Box. Bldg., Room Street 295 Pasco City Springfiel State Massachuse  5.c. Amount 1,422  Mailing Addr P.O. Box. Bldg. Room Unit 1  Street 34 Hutcher City Gorham	ZIP Code + 4 04101-4  ess: Noif any  Road d etts ZIP Code + 4 01151-1  ress: Noif any  reson Drive	964	
Trade Name  Attention To: Lorena Delcourt  Title  5.b. Termination Date Ongoing  5.a. Name and Address of Employer (including trade name, if any).  Employer Gagliarducci Construction, Inc.  Trade Name  Attention To: Jerry Gagliarducci  Title  5.b. Termination Date Ongoing  5.a. Name and Address of Employer (including trade name, if any).  Employer Goodwill Industries of Northern New Engl  Trade Name	Street 30 Danfort City Portland State Maine  5.c. Amount 6,032  Mailing Addr. Room Street 295 Pasco City Springfiel State Massachuse  5.c. Amount 1,422  Mailing Addr. Room Unit 1  Street 34 Hutcher	ZIP Code + 4 04101-4  ess:  Noif any  Road  d  etts  ZIP Code + 4 01151-1	964	

Name of Person Filing: Peter Bennett						File Number C- 00214			
B. Statement of I	B. Statement of Receipts Report all receipts from employers in connection with labor relations advice or services regardless of the purposes of the advice or services.								
5.a. Name and Ad	5.a. Name and Address of Employer (including trade name, if any).  Mailing Address: P.O. Box, Bldg., Room No., if any								
Employer Gr	Employer Great State Beverages, Inc.					P.O. Box, Bidg., Room No., If any P.O. Box 16650			
Trade Name		<del></del>		 Street					
Attention To:	Robert	Koslowsky		City	Hookset	<del>" </del>	]		
Title	<u> </u>			State	New Hampshir	re	ZIP Code + 4 03106-6550		
5.b. Termination D	ate Ongoing			5.c. Amo	ount 23,907				
	dress of Employer (includi			P.O. Bo	Mailing Address				
Employer Ha	rdwood Products	Company, LLC			P.O. Box 149	)			
Trade Name				Street					
Attention To:	Terrance	Young		City	Guilford		]		
Title	President			State	Maine		ZIP Code + 4 04443-0149		
5.b. Termination D	Date Ongoing			5.c. Amo	ount 6,377				
5.a. Name and Ad	dress of Employer (includi	ing trade name, if any).		D O D	Mailing Address				
Employer Ho	olcim (US) Inc.			P.U. B	ox, Blda., Room No	oıı anv			
Trade Name	Aggregate Indust	ries - NE Region		 Street	1715 Broadwa	ıy			
Attention To:	<del></del>	Winter	=-	City	Saugus	<u> </u>	7		
Title	HR Manager			- ·	Massachusett	s	ZIP Code + 4 01906-4703		
							<u> </u>		
5.b. Termination D	ate Ongoing			5.c. Amo	ount 48,489				
	dress of Employer (includi	ing trade name, if any).	<u></u>		Mailing Address				
5.a. Name and Ad	dress of Employer (includi				<u> </u>				
5.a. Name and Ad				P.O. B	Mailing Address	o., if any			
5.a. Name and Ad	dress of Employer (includi			P.O. B	Mailing Address	o., if any			
5.a. Name and Ad  Employer J  Trade Name	dress of Employer (includi	ing Co.		P.O. B Street	Mailing Address ox, Bldg, Room No	o., if any eet	ZIP Code + 4 01701 - 4692		
5.a. Name and Ad  Employer J  Trade Name  Attention To:	dress of Employer (including F White Contract	ing Co.		P.O. B Street City State	Mailing Address ox, Bldg., Room No  10 Burr Stre	o., if any eet	ZIP Code + 4 01701-4692		
5.a. Name and Ad  Employer J  Trade Name  Attention To:  Title  5.b. Termination [	dress of Employer (including F White Contract	ing Co.		P.O. B Street City State	Mailing Address ox, Bldg., Room No  10 Burr Stre Framingham Massachusett	eet s	] ZIP Code + 4 01701-4692		
5.a. Name and Ad  Employer J  Trade Name  Attention To:  Title  5.b. Termination D  5.a. Name and Ad	dress of Employer (including F White Contract Ed Ongoing dress of Employer (including for the contract)	ing Co.  Taylor  ing trade name, if any).		P.O. B Street City State 5.c. Am	Mailing Address ox, Bldg., Room No  10 Burr Stre Framingham Massachusett ount 3,044	eet s	ZIP Code + 4 01701-4692		
5.a. Name and Ad  Employer J  Trade Name  Attention To:  Title  5.b. Termination D  5.a. Name and Ad  Employer J	dress of Employer (including F White Contract Ed Contract Contract Ed Contract Contr	ing Co.  Taylor  ing trade name, if any).		P.O. B Street City State 5.c. Am	Mailing Address ox, Bldg., Room No  10 Burr Stre  Framingham  Massachusett ount 3,044  Mailing Address ox, Bldg., Room No	eet .s S: o,, if any	ZIP Code + 4 01701-4692		
5.a. Name and Ad  Employer J  Trade Name  Attention To:  Title  5.b. Termination I  5.a. Name and Ad  Employer J.  Trade Name	dress of Employer (including F White Contract Ed Contract Contract Ed Contract Contract Contract Ed Contract Co	ing Co.  Taylor  ing trade name, if any).  Inc.		P.O. B Street City State 5.c. Am	Mailing Address ox, Bldg., Room No  10 Burr Stre Framingham  Massachusett ount 3,044  Mailing Address ox, Bldg., Room No  1801 East St	eet .s S: o,, if any	ZIP Code + 4 01701-4692		
5.a. Name and Ad  Employer J  Trade Name  Attention To:  Title  5.b. Termination D  5.a. Name and Ad  Employer J  Trade Name  Attention To:	dress of Employer (including F White Contract Ed Contract Contract Ed Contract Contract Contract Ed Contract Co	ing Co.  Taylor  ing trade name, if any).		P.O. B Street City State 5.c. Am P.O. B Street City	Mailing Address ox, Bldg., Room No  10 Burr Stre  Framingham  Massachusett ount 3,044  Mailing Address ox, Bldg., Room No  1801 East St  Pittsfield	eet s s o, if any reet			
5.a. Name and Ad  Employer J  Trade Name  Attention To:  Title  5.b. Termination I  5.a. Name and Ad  Employer J.  Trade Name	dress of Employer (including F White Contract Ed Contract Contract Ed Contract Contract Contract Ed Contract Co	ing Co.  Taylor  ing trade name, if any).  Inc.		P.O. B Street City State 5.c. Am P.O. B Street City	Mailing Address ox, Bldg., Room No  10 Burr Stre Framingham  Massachusett ount 3,044  Mailing Address ox, Bldg., Room No  1801 East St	eet s s o, if any reet	ZIP Code + 4 01701-4692  ZIP Code + 4 01201-3859		
5.a. Name and Ad  Employer J  Trade Name  Attention To:  Title  5.b. Termination D  5.a. Name and Ad  Employer J  Trade Name  Attention To:	dress of Employer (including F White Contract Ed Congoing dress of Employer (including H. Maxymillian, John	ing Co.  Taylor  ing trade name, if any).  Inc.		P.O. B Street City State  5.c. Am P.O. B Street City State	Mailing Address ox, Bldg., Room No  10 Burr Stre  Framingham  Massachusett ount 3,044  Mailing Address ox, Bldg., Room No  1801 East St  Pittsfield	eet s s o, if any reet			
5.a. Name and Ad  Employer J  Trade Name  Attention To:  Title  5.b. Termination I  5.a. Name and Ad  Employer J  Trade Name  Attention To:  Title  5.b. Termination I	dress of Employer (including F White Contract Ed Congoing dress of Employer (including H. Maxymillian, John	ing Co.  Taylor  ing trade name, if any).  Inc.  Lake		P.O. B Street City State  5.c. Am P.O. B Street City State	Mailing Address ox, Bldg., Room No  10 Burr Stre Framingham Massachusett ount 3,044  Mailing Address ox, Bldg., Room No  1801 East St Pittsfield Massachusett ount 366  Mailing Address	eet  s  c, if any  reet  reet			
5.a. Name and Ad  Employer J  Trade Name  Attention To: Title  5.b. Termination D  5.a. Name and Ad  Employer J  Trade Name  Attention To: Title  5.b. Termination D	dress of Employer (including F White Contract Ed Congoing	ing Co.  Taylor  ing trade name, if any).  Inc.  Lake  ing trade name, if any).		P.O. B Street City State  5.c. Am P.O. B Street City State	Mailing Address ox, Bldg., Room No  10 Burr Stre Framingham Massachusett ount 3,044  Mailing Address ox, Bldg., Room No  1801 East St Pittsfield Massachusett ount 366	eet  s  c, if any  reet  reet			
5.a. Name and Ad  Employer J  Trade Name  Attention To: Title  5.b. Termination D  5.a. Name and Ad  Employer J  Trade Name  Attention To: Title  5.b. Termination D	dress of Employer (including F White Contract Ed Congoing dress of Employer (including H. Maxymillian, Lohn Coate Ongoing dress of Employer (including Coate Ongoing Co	ing Co.  Taylor  ing trade name, if any).  Inc.  Lake  ing trade name, if any).		P.O. B Street City State  5.c. Am P.O. B Street City State  5.c. Am	Mailing Address ox, Bldg, Room No  10 Burr Stre Framingham  Massachusett ount 3,044  Mailing Address ox, Bldg. Room No  1801 East St  Pittsfield  Massachusett ount 366  Mailing Address ox, Bldg. Room No	eet s c, if any cet s c, if any creet s c, if any creet			
5.a. Name and Ad  Employer J  Trade Name  Attention To:  Title  5.b. Termination I  5.a. Name and Ad  Employer J.  Trade Name  Attention To:  Title  5.b. Termination I  5.a. Name and Ad  Employer Lice	dress of Employer (including F White Contract Ed Contr	ing Co.  Taylor  ing trade name, if any).  Inc.  Lake  ing trade name, if any).		P.O. B Street City State  5.c. Am P.O. B Street City State  5.c. Am	Mailing Address ox, Bldg., Room No  10 Burr Stre  Framingham  Massachusett ount 3,044  Mailing Address ox, Bldg., Room No  1801 East St  Pittsfield  Massachusett ount 366  Mailing Address ox, Bldg., Room No  Box 15	eet s c, if any cet s c, if any creet s c, if any creet			
5.a. Name and Ad  Employer J  Trade Name  Attention To: Title  5.b. Termination I  5.a. Name and Ad  Employer J  Trade Name  Attention To: Title  5.b. Termination I  5.a. Name and Ad  Employer Lc  Trade Name	dress of Employer (including F White Contract Ed Contr	ing Co.  Taylor  ing trade name, if any).  Inc.  Lake  ing trade name, if any).  etplace, Inc.		P.O. B Street City State  5.c. Am P.O. B Street City State  5.c. Am P.O. B	Mailing Address ox, Bldg., Room No  10 Burr Stre Framingham  Massachusett ount 3,044  Mailing Address ox, Bldg., Room No  1801 East St  Pittsfield  Massachusett ount 366  Mailing Address ox, Bldg., Room No  Box 15  152 U.S. Rou	eet s c, if any cet s c, if any creet s c, if any creet			

Name of Person Filing: Peter Bennett	File Number C- 00214		
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 Addr		
Employer Maine Distributors, Inc.	P.O. Box, Bldg., Room	No., il any	
Trade Name	Street 5 Coffey S	treet	
Attention To: Scott Solman	City Bangor		
Title	State Maine	ZIP Code + 4 04401-5757	
5.b. Termination Date Ongoing	5.c. Amount 4,865		
5.a. Name and Address of Employer (including trade name, if any).	Mailing Addr	1	
Employer Maine State Credit Union	P.O. Box, Bldg., Room		
	Street		
Trade Name  Attention To: Normand R Dubreuil	City Augusta		
Attention To: Normand R Dubreuil  Title		ZIP Code + 4 04332 - 5659	
Tide	State Maine	211 0000 1 4 [04332-5659]	
5.b. Termination Date Ongoing	5.c. Amount 1,870		
5.a. Name and Address of Employer (including trade name, if any).	Mailing Addr	· · · · · · · · · · · · · · · · · · ·	
Employer National Distributors, Inc.	P.O. Box, Blda., Room	No., II any	
Trade Name	Street 116 Wallac	e Avenue	
Attention To: Jeffrey D Kane	City South Port		
Title President	State Maine	ZIP Code + 4 04106-6144	
12002000		04100-0144	
5.b. Termination Date Ongoing	5.c. Amount 7, 205		
5.a. Name and Address of Employer (including trade name, if any).	Mailing Addr P.O. Box, Bldg., Room		
Employer New Hampshire Distributors, LLC	P.O. Box 2		
Trade Name	Street		
Attention To: Christopher T Brown	City Concord		
Title Chief Executive Officer	State New Hampsh	ire ZIP Code + 4 03302-0267	
5.b. Termination Date Ongoing	5.c. Amount 19,333		
5.b. Termination Date Ongoing      5.a. Name and Address of Employer (including trade name, if any).	Mailing Addr	ess:	
5.a. Name and Address of Employer (including trade name, if any).	Mailing Addr	ess: Noif.anv	
5.a. Name and Address of Employer (including trade name, if any).  Employer P.F.B. Inc.	Mailing Addr	ess: Noif.anv	
5.a. Name and Address of Employer (including trade name, if any).  Employer P.F.B. Inc.  Trade Name Prunier's Market	Mailing Addr	ess: Noif.anv	
5.a. Name and Address of Employer (including trade name, if any).  Employer P.F.B. Inc.  Trade Name Prunier's Market  Attention To: William Prunier	P.O. Box. BldaRoom P.O. Box 1 Street City Bomoseen	ess: Noif anv 37	
5.a. Name and Address of Employer (including trade name, if any).  Employer P.F.B. Inc.  Trade Name Prunier's Market	Mailing Addr	ess: Noif.anv	
5.a. Name and Address of Employer (including trade name, if any).  Employer P.F.B. Inc.  Trade Name Prunier's Market  Attention To: William Prunier	Mailing Addr P.O. Box. BldaRoom P.O. Box 1 Street City Bomoseen	ess: Noif anv 37	
5.a. Name and Address of Employer (including trade name, if any).  Employer P.F.B. Inc.  Trade Name Prunier's Market  Attention To: William Prunier  Title Treasurer	Mailing Addr P.O. Box, Blda., Room P.O. Box 1 Street City Bomoseen State Vermont  5.c. Amount 990  Mailing Addr	ZIP Code + 4 05732-0137	
5.a. Name and Address of Employer (including trade name, if any).  Employer P.F.B. Inc.  Trade Name Prunier's Market  Attention To: William Prunier  Title Treasurer  5.b. Termination Date Ongoing  5.a. Name and Address of Employer (including trade name, if any).	Mailing Addr P.O. Box, Blda., Room P.O. Box 1 Street City Bomoseen State Vermont  5.c. Amount 990  Mailing Addr P.O. Box, Blda., Room	ess: Noif any 37  ZIP Code + 4 05732-0137  ess: Noif any	
5.a. Name and Address of Employer (including trade name, if any).  Employer P.F.B. Inc.  Trade Name Prunier's Market  Attention To: William Prunier  Title Treasurer  5.b. Termination Date Ongoing  5.a. Name and Address of Employer (including trade name, if any).  Employer Performance Food Group	Mailing Addr P.O. Box. BldaRoom P.O. Box 1 Street City Bomoseen State Vermont  5.c. Amount 990  Mailing Addr P.O. Box. BldaRoom P.O. Box. 2	ess: Noif any 37  ZIP Code + 4 05732-0137  ess: Noif any	
5.a. Name and Address of Employer (including trade name, if any).  Employer P.F.B. Inc.  Trade Name Prunier's Market  Attention To: William Prunier  Title Treasurer  5.b. Termination Date Ongoing  5.a. Name and Address of Employer (including trade name, if any).  Employer Performance Food Group  Trade Name PFG Northcenter	Mailing Addr   P.O. Box, Blda., Room     P.O. Box 1     Street     City   Bomoseen     State   Vermont     5.c. Amount   990     Mailing Addr     P.O. Box, Blda., Room     P.O. Box 2     Street	ess: Noif.any 37  ZIP Code + 4 05732-0137  ess: Noif.any	
5.a. Name and Address of Employer (including trade name, if any).  Employer P.F.B. Inc.  Trade Name Prunier's Market  Attention To: William Prunier  Title Treasurer  5.b. Termination Date Ongoing  5.a. Name and Address of Employer (including trade name, if any).  Employer Performance Food Group  Trade Name PFG Northcenter  Attention To: David Crowell	Mailing Addr P.O. Box, Blda., Room P.O. Box 1  Street City Bomoseen State Vermont  5.c. Amount 990  Mailing Addr P.O. Box 2  Street City Augusta	ess: Noif.anv 37  ZIP Code + 4 05732-0137  ess: Noif.any 628	
5.a. Name and Address of Employer (including trade name, if any).  Employer P.F.B. Inc.  Trade Name Prunier's Market  Attention To: William Prunier  Title Treasurer  5.b. Termination Date Ongoing  5.a. Name and Address of Employer (including trade name, if any).  Employer Performance Food Group  Trade Name PFG Northcenter	Mailing Addr   P.O. Box, Blda., Room     P.O. Box 1     Street     City   Bomoseen     State   Vermont     5.c. Amount   990     Mailing Addr     P.O. Box, Blda., Room     P.O. Box 2     Street	ess: Noif.any 37  ZIP Code + 4 05732-0137  ess: Noif.any	

Name of Person F	iling: Peter Bennett	;			Fi	ile Number C-	00214	
B. Statement of	Receipts Report all rece advice or services		in connection w	vith labor r	elations advice or serv	vices regardles	s of the purposes of the	
5.a. Name and Ad	dress of Employer (includ	ing trade name, if any	y).		Mailing Address:			
Employee RC	owe Ford Sales		<del></del>		ox, Bldg., Room No., if P.O. Box 109	any		
Trade Name		······································		Street				
Attention To:	Wallace	Camp, Jr.		City	Westbrook			
Title					Maine		ZIP Code + 4 04098-0	0109
5.b. Termination D	Date Ongoing			5.c. Amo	ount 9,070			
5.a. Name and Ad	dress of Employer (includ	ing trade name, if any	y).	P.O. Bo	Mailing Address: ox, Bldg., Room No., if	any		
Employer Sp	orague Operating	Resources, LL	С					
Trade Name	Sprague Energy			Street	185 Internatio	nal Drive		
Attention To:	J	PScoff		City	Portsmouth			
Title				State	New Hampshire		ZIP Code + 4 03801-6	836
5.b. Termination [	Date Ongoing		-	5.c. Amo	ount 65,930			
5.a. Name and Ad	dress of Employer (include	ling trade name, if an	y).	D O D	Mailing Address:	·		
FISV	re Winner Foods,	Inc.		P.O. B	ox. <u>Blda,, Room No., it</u> 2 Lehner Road	r anv		
Trade Name				ــــا Street				
Attention To:	Mark	Doiron		City	Saco		]	
Title	President			State	Maine		ZIP Code + 4 04072-1	1836
5.b. Termination D				5.c. Amo	ount 56,550		l L	
5.a. Name and Ad	dress of Employer (includ	ling trade name, if an	у).	<u> </u>	Mailing Address:			
[ <del>[</del> ]	llar Diatributar	- Inc		P.O. B	ox, Bldg., Room No., if P.O. Box 8	f any		
1	alley Distributor	s, mc.		 				
Trade Name			<del></del> _	Street City		<del></del>		
Attention To:	Michael	Runser		State	Oakland		ZIP Code + 4 04963-0	2000
- Title				T	Maine		104963-0	0008
5.b. Termination (	Date Ongoing			5.c. Am	ount 6,089			
5.a. Name and Ad	dress of Employer (includ	ling trade name, if an	у).		Mailing Address:	,		
	<del>, ,</del>			— Р.О. В	oxBldaRoom_Noit 	t_anv		
Employer Trade Name	r			Street		<del></del>		
Attention To:		7		City				
Title				State			ZIP Code + 4	
,				T				
5.b. Termination I	Date L			5.c. Am	ount [			
5.a. Name and Ac	dress of Employer (include	ding trade name, if an	y).	P.O. B	Mailing Address: ox. Blda Room No., it	f anv		
Employer					<u> </u>	<del></del>		
Trade Name				Street				
Attention To:			3	O:L .	t .		•	
				City		<del></del>	]	
Title				State		: <del></del>	ZIP Code + 4	