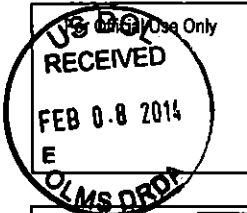


# FORM LM-21

## RECEIPTS AND DISBURSEMENTS REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.

Required of persons, including Labor Relations Consultants and Other Individuals and Organizations, Under section 203(b) of the Labor-Management Relations and Disclosure Act of 1959, as amended. (LMRDA)



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

540698

1. File Number C-758	2. Period Covered By This Report From: 01/01/2013 Through: 12/31/2013
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<b>A. Person Filing</b>	
3. Name and mailing address (include ZIP Code):	
Name	KAREN T. LITTMANN
Title	LEGAL ADMINISTRATOR
Organization	MARCUS & SHAPIRA LLP
P.O. Box, Building and Room Number, if any	
Street	301 GRANT STREET, ONE OXFORD CENTRE
City	PITTSBURGH
State	Pennsylvania ZIP Code + 4 15219-6401
4. Any other address where records necessary to verify this report are kept:	
Name	
Title	
Organization	
P.O. Box, Building and Room Number, if any	
Street	
City	
State	

### Signatures

Each of the undersigned declares, under penalty of perjury and other applicable penalties of law, that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the Section on penalties in the instructions).

17. Signed	18. Signed
Title Managing Partner	Title Other (Specify) Legal Administrator
On 2/7/14	On 2/7/14
Date	Date
Telephone Number 412-338-5200	Telephone Number 412-338-5235

Name of Person Filing: KAREN LITTMANN	File Number C- 758
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**B. Statement of Receipts** Report all receipts from employers in connection with labor relations advice or services regardless of the purposes of the advice or services.

5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer	GIANT EAGLE, INC.	P.O. Box, Building and Room Number, if any	
Trade Name		Street	101 KAPPA DRIVE, RIDC PARK
Attention To	LORA DIKUN	City	PITTSBURGH
Title		State	Pennsylvania ZIP Code + 4 15238
5.b. Termination Date 12/31/2013		5.c. Amount 389,841	
6. TOTAL RECEIPTS FROM ALL EMPLOYERS 389,841			

**C. Statement of Disbursements** Report all disbursements made by the reporting organization in connection with labor relations advice or services rendered to the employers listed in Part B.

7. Disbursements to Officers and Employees:				
(a) Name	(b) Salary	(c) Expenses	(d) Totals	
				9. Office and Administrative Expenses
				10. Publicity
				11. Fees for Professional Services
				12. Loans Made
				13. Other Disbursements
8. Total disbursements to officers and employees:				14. Total Disbursements (Sum of Items 8-13) 389,841

**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: GIANT EAGLE, INC.	15.b. Trade Name, If any: GIANT EAGLE
15.c. To Whom Paid Name: GLENN M OLCERST Title: COUNSEL Organization: MARCUS & SHAPIRA LLP P.O. Box, Building and Room Number, if any: Street: 301 GRANT STREET, ONE OXFORD CENTRE City: PITTSBURGH State: Pennsylvania ZIP Code + 4 15219-6401	15.d. Amount: 389,841 15.e. Purpose: Educate employees about their rights under the NLRB, including their rights to organize and bargain collectively.
16. TOTAL DISBURSEMENTS FOR ALL REPORTABLE ACTIVITY 389,841	