

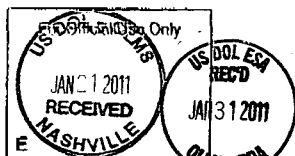
U.S. Department of Labor
Office of Labor-Management
Standards
Washington, DC 20210

FORM LM-21

RECEIPTS AND DISBURSEMENTS REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 09-30-2011

This report is mandatory under P.L. 85-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 20 U.S.C. 435 or 444. 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

442250

1. File Number C- <u>384</u>	2. Period Covered By This Report From: <u>01/01/2008</u> Through: <u>12/31/2008</u>
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A. Person Filing	
3. Name and mailing address (Include ZIP Code):	4. Any other address where records necessary to verify this report are kept:
<p>Name <u>Herman C. Wiggins</u></p> <p>Title <u>Laboe Relation Consultant</u></p> <p>Organization <u>Wiggins Consulting</u></p> <p>P.O. Box, Building and Room Number, if any</p> <p>Street <u>8017 McKee Blvd</u></p> <p>City <u>Oklahoma City</u></p> <p>State <u>Oklahoma</u> ZIP Code + 4 <u>73122</u></p>	<p>Name <u>Cathy Smith</u></p> <p>Title</p> <p>Organization <u>Virtue All Support LLC</u></p> <p>P.O. Box, Building and Room Number, if any</p> <p>Street <u>2621 Prospect Hill Drive</u></p> <p>City <u>Forth Worth</u></p> <p>State <u>Texas</u> ZIP Code + 4</p>

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).

<p>17. Signed <u>Herman C. Wiggins</u> President (if other title, see instructions)</p> <p>Title <u>President</u></p> <p>On <u>09/10/2010</u> Date <u>(405) 203-4367</u> Telephone Number</p>	<p>18. Signed _____ Treasurer (if other title, see instructions)</p> <p>Title <u>Treasurer</u></p> <p>On <u>1/1</u> Date _____ Telephone Number</p>
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Name of Person Filing: HERMAN C WIGGINS		File Number C-
B. Statement of Receipts Report all receipts from employers in connection with labor relations advice or services regardless of the purposes of the advice or services.		
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:
Employer: Averitt Express Inc		P.O. Box, Building and Room Number, if any: P.O. BOX 3166
Trade Name:		Street: 1415 Neal Street
Attention To: ELSA LEESON		City: COOKVILLE
Title: HUMAN RESOURCE MANAGER		State: Tennessee ZIP Code + 4: 38502
5.b. Termination Date: 11/08/2008		5.c. Amount: 31,334
6. TOTAL RECEIPTS FROM ALL EMPLOYERS 31,334		

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	
HERMAN C WIGGINS	31,334			
				9. Office and Administrative Expenses
				10. Publicity
				11. Fees for Professional Services
				12. Loans Made
				13. Other Disbursements
8. Total disbursements to officers and employees:				14. Total Disbursements (Sum of Items 8-13)

D. Schedule of Disbursements for Reportable Activity		Use this Schedule to report only disbursements made for the purposes described in Part D of the instructions.
15.a. Employer Name: All Virtue Support LLC		15.b. Trade Name, if any:
15.c. To Whom Paid:		15.d. Amount: 31,334
Name: HERMAN C WIGGINS		15.e. Purpose: TO Assist The Company with its Employee Communication Program during the Law Campaign by meeting with employees and consulting with management.
Title: Labor Relation Consultant		
Organization: Wiggins Consulting		
P.O. Box, Building and Room Number, if any:		
Street: 8017 McKee Blvd		
City: Ukiahville		
State: Iowa	ZIP Code + 4: 52132	
16. TOTAL DISBURSEMENTS FOR ALL REPORTABLE ACTIVITY \$31,334		