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. 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)

For Official Use Only					
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	:				

A. Person Filing

Name

Title

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

Organization CBC Consulting, LTD

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

Chairman/President

Harold

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

427336

D Craft

1 . File Number C- 00272	2. Period Covered By This Report From:	Month/Day/Year (mm/dd/yyyy)		Month/Day/Year (mm/dd/yyyy)
		1 / 1 / 2009	Through:	12 / 31 / 2009

Name

Title

Debbie

Organization CBC Consulting, LTD

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

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

Office Administrator

O'Kelley

Street 815 Walkwood Circle City Houston			Street 17240 Lechlade Lane City Dallas				
State	Texas	ZIP Code +	4 77079	State	Texas	⑤ ŻIP C	Code + 4 75252
i	Signatures						
informati	ne undersigned declares, un on contained in any accon and complete, (See the Se	npanying documents) has	been examined by the	ies of law, th e signatory	at all of the information and is, to the best of the	submitted in this report (ne undersigned's knowl	(including the edge and belief, true,
17. Sign	177 1	Coft	President (if other title, see instructions)	18. Signe		Deft	Treasurer (If other title, see instructions)
On _	3 / 26 / 2010 24 Date T	8-922-0141 Telephone Number		On _3	3/ / 26 / 2010 Date	248-922-0141 Telephone Number	

File Number C-Name of Person Filing: 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: P.O. Box, Building and Room Number, if any Employer Pet Dairy Richmond Trade Name Dean Foods Street 2515 McKinney Avenue, Suite 1200 Attention To Shane City Keith Dallas Texas ▼ ZIP Code + 4 75201 State Title Vice President of Labor Relations 5.b. Termination Date 5.c. Amount 41,600 March 2009 6. TOTAL RECEIPTS FROM ALL EMPLOYERS 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. * Sec attachment for additional employees 7. Disbursements to Officers and Employees: (c) Expenses (d) Totals (a) Name (b) Salary Philip W Craft 85,592 91,126 9. Office and Administrative Expenses 6,525 42,967 Martinez 63,953 10. Publicity Jorge Maxile Adelmann 36,775 21,762 11. Fees for Professional Services 12. Loans Made Dave Rogers 9,500 5,983 Dennis Chaivre 6,080 7,582 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: 15.b. Trade Name, If any: 15.d. Amount 15.c. To Whom Paid Name 15.e. Purpose Title Organization P.O. Box, Building and Room Number, if any Street City State ZIP Code + 4 16. TOTAL DISBURSEMENTS FOR ALL REPORTABLE ACTIVITY

Form LM-21 (2003)

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Additional Employer Addresses

5.a. Name and Address of Employer

Employer: Pet Dairy Florence

Trade Name Dean Foods Attention to Shane Keith

Title Vice President of Labor Relations Street 2515 McKinney Avenue, Suite 1200

City Dallas

State Texas 75201

5.b. Termination Date August 2009 5.c. Amount \$37,950.00

Name of Person Filing: Harold D. Craft File Number c-00272

C. Statement of Disbursement:

7. Disbursement of Officers and Employers:

(a)	Name	Salary	Expenses	(d)Totals
	James Belter	8,455	9,428	17,883
	Lizabeth Casale	44,270	36,950	81,220
	Jeanie Hyde	6,920	1,545	8,465