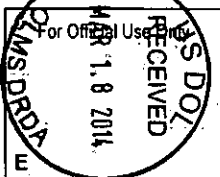


FORM LM-21 RECEIPTS AND DISBURSEMENTS REPORT

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

54501

1. File Number C- 00214	2. Period Covered By This Report From: 01/01/2013 Through: 12/31/2013
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A. Person Filing	
3. Name and mailing address (include ZIP Code): Name: Peter Bennett Title: President Organization: The Bennett Law Firm, P.A. P.O. Box, Building and Room Number, if any: P.O. Box 7799 Street: City: Portland State: Maine ZIP Code + 4: 04112-7799	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: Suite 300 Street: 121 Middle Street City: Portland State: Maine ZIP Code + 4: 04101-7109

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: [Signature] Title: President On: 03/11/2014 Date: 03/11/2014 Telephone Number: (207) 773-4775	President (if other title, see instructions)	18. Signed: [Signature] Title: Treasurer On: 03/11/2014 Date: 03/11/2014 Telephone Number: (207) 773-4775	Treasurer (if other title, see instructions)

Name of Person Filing: Peter Bennett	File Number C- 00214
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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	Amoskeag Beverages, LLC	P.O. Box, Building and Room Number, if any	P.O. Box 1148
Trade Name		Street	
Attention To	Thomas A Bullock	City	Concord
Title		State	New Hampshire
		ZIP Code + 4	03302-1148

5.b. Termination Date	Ongoing	5.c. Amount	7,920
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6. TOTAL RECEIPTS FROM ALL EMPLOYERS 818,208

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		
Peter Bennett	278,300	0	278,300	9. Office and Administrative Expenses	211,029
Charles Carbonneau	19,866	0	19,866	10. Publicity	13,738
Frederick B Finberg	172,960	0	172,960	11. Fees for Professional Services	23,736
Robin A O'Leary	8,866	0	8,866	12. Loans Made	0
Laurie A Proctor	23,339	0	23,339	13. Other Disbursements	
8. Total disbursements to officers and employees:				549,463	14. Total Disbursements (Sum of Items 8-13)
					797,966

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.c. To Whom Paid	15.d. Amount
Name	
Title	
Organization	
P.O. Box, Building and Room Number, if any	
Street	
City	
State	
Washington	
ZIP Code + 4	
15.e. Purpose	

16. TOTAL DISBURSEMENTS FOR ALL REPORTABLE ACTIVITY

Name of Person Filing: Peter Bennett		File Number C-00214	
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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: Arc Terminals	P.O. Box, Bldg., Room No., if any: Suite 250
Trade Name: 	Street: 3000 Research Forest Drive
Attention To: John Didier	City: The Woodlands
Title: 	State: Texas ZIP Code + 4: 77381-4385

5.b. Termination Date: **Ongoing** 5.c. Amount: **26,458**

5.a. Name and Address of Employer (including trade name, if any). Mailing Address:

Employer: Associated Grocers of New England	P.O. Box, Bldg., Room No., if any: 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: **25,667**

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 any: P.O. Box 500
Trade Name: Rowe, Auburn	Street:
Attention To: Wallace Camp, Jr.	City: Auburn
Title: 	State: Maine ZIP Code + 4: 04212-0500

5.b. Termination Date: **Ongoing** 5.c. Amount: **7,489**

5.a. Name and Address of Employer (including trade name, if any). Mailing Address:

Employer: Bayside Distributing, Inc.	P.O. Box, Bldg., Room No., if any: 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: **2,565**

5.a. Name and Address of Employer (including trade name, if any). Mailing Address:

Employer: Bellavance Beverage Company, Inc.	P.O. Box, Bldg., Room No., if any:
Trade Name: 	Street: 120 Northwest Boulevard
Attention To: Joseph Bellavance, Sr.	City: Nashua
Title: President	State: New Hampshire ZIP Code + 4: 03063-4006

5.b. Termination Date: **Ongoing** 5.c. Amount: **3,091**

5.a. Name and Address of Employer (including trade name, if any). Mailing Address:

Employer: Coca-Cola Bottling Co. of No. New England	P.O. Box, Bldg., Room No., if any: Suite 330
Trade Name: 	Street: 1 Executive Park Drive
Attention To: Mark Francoeur	City: Bedford
Title: President	State: New Hampshire ZIP Code + 4: 03110-6913

5.b. Termination Date: **Ongoing** 5.c. Amount: **76,170**

Name of Person Filing: Peter Bennett		File Number C- 00214	
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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: Construction Industries of Massachusetts		P.O. Box, Bldg., Room No., if any: Suite 403	
Trade Name:		Street: 1661 Worcester Road	
Attention To: [] []		City: Framingham	
Title:		State: Massachusetts ZIP Code + 4: 01701-5401	
5.b. Termination Date: Ongoing		5.c. Amount: 138,808	

5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer: Cumberland County Federal Credit Union		P.O. Box, Bldg., Room No., if any:	
Trade Name:		Street: 101 Gray Road	
Attention To: Karen [] Smith		City: Falmouth	
Title: Chief Operating Officer		State: Maine ZIP Code + 4: 04105-2029	
5.b. Termination Date: Ongoing		5.c. Amount: 3,856	

5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer: Down East Credit Union		P.O. Box, Bldg., Room No., if any: P.O. Box 130	
Trade Name:		Street:	
Attention To: Donna [] Cochran		City: Baileyville	
Title:		State: Maine ZIP Code + 4: 04694-0130	
5.b. Termination Date: Ongoing		5.c. Amount: 4,231	

5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer: Federal Distributors, Inc.		P.O. Box, Bldg., Room No., if any: P.O. Box 2007	
Trade Name:		Street:	
Attention To: John [] Cronin		City: Lewiston	
Title:		State: Maine ZIP Code + 4: 04241-2007	
5.b. Termination Date: Ongoing		5.c. Amount: 4,162	

5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer: Flowers Foods, Inc.		P.O. Box, Bldg., Room No., if any: P.O. Box 1900	
Trade Name: Lepage Bakeries		Street:	
Attention To: Michael [] McCall		City: Auburn	
Title: President		State: Maine ZIP Code + 4: 04211-1900	
5.b. Termination Date: Ongoing		5.c. Amount: 49,885	

5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer: Franklin Somerset Federal Credit Union		P.O. Box, Bldg., Room No., if any:	
Trade Name:		Street: 26 Leavitt Street	
Attention To: Karen [] Greenleaf		City: Skowhegan	
Title:		State: Maine ZIP Code + 4: 04976-1842	
5.b. Termination Date: Ongoing		5.c. Amount: 4,399	

Name of Person Filing: Peter Bennett		File Number C- 00214	
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: Frannie Peabody House		P.O. Box, Bldg., Room No., if any: Suite 311	
Trade Name:		Street: 30 Danforth Street	
Attention To: Lorena Delcourt		City: Portland	
Title:		State: Maine ZIP Code + 4: 04101-4502	
5.b. Termination Date: Ongoing		5.c. Amount: 5,005	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer: Goodwill Industries of New England		P.O. Box, Bldg., Room No., if any: Unit 1	
Trade Name:		Street: 34 Hutcherson Drive	
Attention To: Susan Smith		City: Gorham	
Title:		State: Maine ZIP Code + 4: 04038-2750	
5.b. Termination Date: Ongoing		5.c. Amount: 24,726	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer: Great State Beverages, Inc.		P.O. Box, Bldg., Room No., if any: P.O. Box 16650	
Trade Name:		Street:	
Attention To: Robert Koslowsky		City: Hooksett	
Title:		State: New Hampshire ZIP Code + 4: 03106-6550	
5.b. Termination Date: Ongoing		5.c. Amount: 19,560	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer: Hardwood Products Company, LLC		P.O. Box, Bldg., Room No., if any: P.O. Box 149	
Trade Name:		Street: 1	
Attention To: Terrence Young		City: Guilford	
Title: President		State: Maine ZIP Code + 4: 04443-0149	
5.b. Termination Date: Ongoing		5.c. Amount: 3,956	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer: Holcim (US) Inc.		P.O. Box, Bldg., Room No., if any:	
Trade Name: Aggregate Industries - NE Region		Street: 1715 Broadway	
Attention To: Richard Winter		City: Saugus	
Title: HR Manager		State: Massachusetts ZIP Code + 4: 01906-4703	
5.b. Termination Date: Ongoing		5.c. Amount: 211,158	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer: Lois Natural Marketplace, Inc.		P.O. Box, Bldg., Room No., if any: Box 15	
Trade Name:		Street: 152 U.S. Route 1	
Attention To: Dan Porta		City: Scarborough	
Title:		State: Maine ZIP Code + 4: 04074-8365	
5.b. Termination Date: Ongoing		5.c. Amount: 1,333	

Name of Person Filing: Peter Bennett		File Number C- 00214	
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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).

Employer: <u>Maine Distributors, Inc.</u> Trade Name: <u></u> Attention To: <u>Scott</u> <u>Solman</u> Title: <u></u>	Mailing Address: P.O. Box, Bldg., Room No., if any: <u></u> Street: <u>5 Coffey Street</u> City: <u>Bangor</u> State: <u>Maine</u> ZIP Code + 4: <u>04401-5757</u>
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5.b. Termination Date: Ongoing 5.c. Amount: 5,958

5.a. Name and Address of Employer (including trade name, if any).

Employer: <u>Maine State Credit Union</u> Trade Name: <u></u> Attention To: <u>Normand</u> <u>R</u> <u>Dubreuil</u> Title: <u></u>	Mailing Address: P.O. Box, Bldg., Room No., if any: <u>P.O. Box 5659</u> Street: <u></u> City: <u>Augusta</u> State: <u>Maine</u> ZIP Code + 4: <u>04332-5659</u>
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5.b. Termination Date: Ongoing 5.c. Amount: 2,205

5.a. Name and Address of Employer (including trade name, if any).

Employer: <u>National Distributors, Inc.</u> Trade Name: <u></u> Attention To: <u>Jeffrey</u> <u>D</u> <u>Kane</u> Title: <u>President</u>	Mailing Address: P.O. Box, Bldg., Room No., if any: <u></u> Street: <u>116 Wallace Avenue</u> City: <u>South Portland</u> State: <u>Maine</u> ZIP Code + 4: <u>04106-6144</u>
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5.b. Termination Date: Ongoing 5.c. Amount: 7,782

5.a. Name and Address of Employer (including trade name, if any).

Employer: <u>New Hampshire Distributors, Inc.</u> Trade Name: <u></u> Attention To: <u>Christopher</u> <u>T</u> <u>Brown</u> Title: <u>Chief Executive Officer</u>	Mailing Address: P.O. Box, Bldg., Room No., if any: <u>P.O. Box 267</u> Street: <u></u> City: <u>Concord</u> State: <u>New Hampshire</u> ZIP Code + 4: <u>03302-0267</u>
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5.b. Termination Date: Ongoing 5.c. Amount: 26,076

5.a. Name and Address of Employer (including trade name, if any).

Employer: <u>P.F.B., Inc.</u> Trade Name: <u>Prunier's Market</u> Attention To: <u>William</u> <u></u> <u>Prunier</u> Title: <u>Treasurer</u>	Mailing Address: P.O. Box, Bldg., Room No., if any: <u>P.O. Box 137</u> Street: <u></u> City: <u>Bromoseen</u> State: <u>Vermont</u> ZIP Code + 4: <u>05732-0137</u>
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5.b. Termination Date: Ongoing 5.c. Amount: 1,170

5.a. Name and Address of Employer (including trade name, if any).

Employer: <u>Performance Food Group</u> Trade Name: <u>PFG Northcenter</u> Attention To: <u>David</u> <u></u> <u>Crowell</u> Title: <u>President</u>	Mailing Address: P.O. Box, Bldg., Room No., if any: <u>P.O. Box 2628</u> Street: <u></u> City: <u>Augusta</u> State: <u>Maine</u> ZIP Code + 4: <u>04338-2628</u>
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5.b. Termination Date: Ongoing 5.c. Amount: 10,782

Name of Person Filing: Peter Bennett		File Number C-00214	
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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: Portland Water District		P.O. Box, Bldg., Room No., if any: P.O. Box 3553	
Trade Name:		Street:	
Attention To: David Kane		City: Portland	
Title:		State: Maine ZIP Code + 4: 04104-3553	
5.b. Termination Date: Ongoing		5.c. Amount: 101,064	

5.a. Name and Address of Employer (including trade name, if any):		Mailing Address:	
Employer: Rowe Ford Sales		P.O. Box, Bldg., Room No., if any: P.O. Box 109	
Trade Name:		Street:	
Attention To: Wallace Camp, Jr.		City: Westbrook	
Title:		State: Missouri ZIP Code + 4: 04098-0109	
5.b. Termination Date: Ongoing		5.c. Amount: 4,694	

5.a. Name and Address of Employer (including trade name, if any):		Mailing Address:	
Employer: Sprague Operating Resources, LLC		P.O. Box, Bldg., Room No., if any:	
Trade Name: Sprague Energy		Street: 185 International Drive	
Attention To: J. Scoff		City: Portsmouth	
Title:		State: New Hampshire ZIP Code + 4: 03801-6836	
5.b. Termination Date: Ongoing		5.c. Amount: 32,355	

5.a. Name and Address of Employer (including trade name, if any):		Mailing Address:	
Employer: Valley Distributors, Inc.		P.O. Box, Bldg., Room No., if any: P.O. Box 8	
Trade Name:		Street:	
Attention To: Michael Runser		City: Oakland	
Title:		State: Maine ZIP Code + 4: 04963-0008	
5.b. Termination Date: Ongoing		5.c. Amount: 5,683	

5.a. Name and Address of Employer (including trade name, if any):		Mailing Address:	
Employer:		P.O. Box, Bldg., Room No., if any:	
Trade Name:		Street:	
Attention To:		City:	
Title:		State: ZIP Code + 4:	
5.b. Termination Date:		5.c. Amount:	

5.a. Name and Address of Employer (including trade name, if any):		Mailing Address:	
Employer:		P.O. Box, Bldg., Room No., if any:	
Trade Name:		Street:	
Attention To:		City:	
Title:		State: ZIP Code + 4:	
5.b. Termination Date:		5.c. Amount:	

7. Disbursements to Officers and Employers:

Form LM-21 (2003)