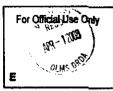
U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-20 AGREEMENT AND ACTIVITIES REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2009



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 Reporting and Disclosure Act of 1959, as amended. (LMRDA)

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2/ (2) 111 /			
1. File Number: C- 00272 340 466			
Person Fiting			
Name and mailing address (include ZIP Code):	3. Any other address where records necessary to verify this report are kept:		
Name Harold D Craft	Name Sue L Maniscalchi		
	Title Office Administrator		
7			
Organization CBC Consulting, Ltd.	Organization CBC Consulting, Ltd.		
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any		
Street 5900 Lorac Drive, Suite 101	Street 6770 Langle Drive		
City Clarkston	City Clarkston		
State Michigan ZIP Code + 4 48346	State Michigan ZIP Code + 4 48346		
4. Date fiscal year ends: 5. Type of person:			
Dec / 31 a. Individual b. Partnership	c. Corporation d. Other (Specify):		
Nature of Agreement or Arrangement			
6. Full name and address of employer with whom made (include ZIP Code):	7. Date entered into 1 / 30 / 2007		
Name Neil Finerty	8. Name of person(s) through whom made:		
Organization Trauth Dairy	1		
Trade Name, if any Dean Foods, Inc.	Name Gary Sparks		
P.O. Box, Bidg., Room No., if any	Name		
Street 1316 Standard Avenue	Name		
City Indianapolis	Name		
State Indiana ZIP Code + 4 46221	Name		
Signatures			
Each of the undersigned declares, under penalty of perjury and other applicable the information contained in any accompanying documents) has been examined true, correct, and complete. (See Section VII on penalties in the instructions.)  13. Signed President (If other title, see	penalties of law, that all of the information submitted in this report (including by the signatory and is, to the best of the undersigned's knowledge and belief,  14. Signed   Treasurer (If other title, see		
Title President instructions)	Title Treasurer instructions)		
On Date Telephone Number	On		

		*			
Filer:	Harol	ď	Cra	ft	

CBC	Const	ult	ina.	Ltd

File Number C-	00272	

9. Check the appropriate box to indicate whether an object of the activities under	aken, is directly or indirectly:	
a. To persuade employees to exercise or not to exercise, or persuade employees as to the mariner of exercising, the right to organize and bargain collectively through representatives of their own choosing.		
	ployees or a labor orgenization in connection with a labor dispute involving nadministrative or arberal proceeding or a criminal or civil judicial proceeding.	
10. Terms and conditions (Explain in detail; see instructions. Written agreements	must be attached.):	
For services rendered during the union campaign. To answer questions of management and employees concerning the law so as not to violate the employee's rights or the rights of the union. Included would be group meetings with employees. \$ 20,025 to be paid by check.		
Specific Activities to be Performed		
11. For each activity, separately list in detail the information required (See instructions):  a. Nature of activity:  Group meetings with employees.		
11.b. Period during which performed: 01-2007 - 02-2007	11.c. Extent perform∉d: Complete	
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:	
Name	Name	
Organization CBC Consulting, Ltd.	Organization	
P.O. Box, Bidg., Room No., if any	P.O. Box, Bldg., Room No., if any	
Street 5900 Lorac Drive, Suite 101	Street	
City Clarkston	City	
State Michigan ZIP Code + 4 48346	State ZIP Code + 4	
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:	
Dairy distribution drivers.	Teamsters	