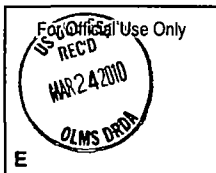


FORM LM-21

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

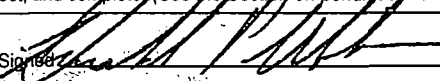
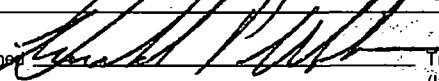
427341

1. File Number C- 00525	2. Period Covered By This Report From:	Month/Day/Year (mm/dd/yyyy) 01 / 01 / 2009	Through:	Month/Day/Year (mm/dd/yyyy) 12 / 31 / 2009
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A. Person Filing	
3. Name and mailing address (include ZIP Code): Name Title Organization LRI Consulting Services, Inc. P.O. Box, Building and Room Number, if any Street 7850 S Elm Place, Suite E City Broken Arrow State Oklahoma ZIP Code + 4 74011	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 ZIP Code + 4

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  Title President On 02 / 17 / 2009 Date 918-455-9995 Telephone Number	18. Signed  Title Treasurer On 02 / 17 / 2009 Date 918-455-9995 Telephone Number
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Name of Person Filing: LRI Consulting Services, Inc	File Number C- 00525
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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 400 HIE, LLC Trade Name Attention To Beverly Berube Title Human Resource Manager	Mailing Address: P.O. Box, Building and Room Number, if any Street 400 Old Loudon Road City Latham State New York ZIP Code + 4 12110
5.b. Termination Date 7/9/2009	5.c. Amount 3,040
6. TOTAL RECEIPTS FROM ALL EMPLOYERS 1,801,989	

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	
	0	0	0	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:			0	14. Total Disbursements (Sum of Items 8-13)
				0

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: 400 HIE, LLC	15.b. Trade Name, if any: 	
15.c. To Whom Paid Name Natasha Gordon Title Organization P.O. Box, Building and Room Number, if any Street 350 Riverbirch Lane City Lawrenceville State Georgia ZIP Code + 4 30044	15.d. Amount 1,540 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.	
16. TOTAL DISBURSEMENTS FOR ALL REPORTABLE ACTIVITY 958,049		

Name of Person Filing: LRI Consulting Services, Inc	File Number C- 00525
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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 Advanced Life Systems Trade Name Attention To: Bill Woodcock Title President	Mailing Address: P.O. Box, Bldg., Room No., if any Street 2106 Washington Ave., Suite 3 City Yakima State Washington ZIP Code + 4 98903
5.b. Termination Date 8/19/09	5.c. Amount 41,589

5.a. Name and Address of Employer (including trade name, if any). Employer AEGIS Communications Group Trade Name Attention To: Mary Mullin Title Vice President HR	Mailing Address: P.O. Box, Bldg., Room No., if any Street 8201 Richpoint Drive City Irving State Texas ZIP Code + 4 75063
5.b. Termination Date 1/15/09	5.c. Amount 8,537

5.a. Name and Address of Employer (including trade name, if any). Employer American Environmental Trade Name Attention To: Danny Hirschberger Title President	Mailing Address: P.O. Box, Bldg., Room No., if any Street 188 Long Island Avenue City Wyandanch State New York ZIP Code + 4 11798
5.b. Termination Date 5/4/09	5.c. Amount 2,625

5.a. Name and Address of Employer (including trade name, if any). Employer Apple Metro, Inc. Trade Name Attention To: Zane Tankel Title CEO	Mailing Address: P.O. Box, Bldg., Room No., if any Street 550 Mamaroneck, Suite 204 City Harrison State New York ZIP Code + 4 10528
5.b. Termination Date	5.c. Amount 15,000

5.a. Name and Address of Employer (including trade name, if any). Employer Attentive Care Trade Name Attention To: Brian Botschon Title President	Mailing Address: P.O. Box, Bldg., Room No., if any Street 5 Computer Drive West City Albany State New York ZIP Code + 4 12205
5.b. Termination Date 2/10/09	5.c. Amount 24,886

5.a. Name and Address of Employer (including trade name, if any). Employer AWS - Advantage Wholesale Supply Trade Name Attention To: David Smetena Title Owner	Mailing Address: P.O. Box, Bldg., Room No., if any Street 962 Washington Avenue City Bronx State New York ZIP Code + 4 10456
5.b. Termination Date 1/22/09	5.c. Amount 1,125

Name of Person Filing: LRI Consulting Services, Inc		File Number C- 00525
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 Beehive Retirement Community		P.O. Box, Bldg., Room No., if any
Trade Name		Street 401 West Maple Street
Attention To: Marvin Pratt		City McCleary
Title		State Washington ZIP Code + 4 98557
5.b. Termination Date 2/10/09		5.c. Amount 6,364
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:
Employer Best Buy		P.O. Box, Bldg., Room No., if any
Trade Name		Street B2-272 7601 Penn Avenue South
Attention To: Jim Showalter		City Richfield
Title Director, Employee Relations		State Minnesota ZIP Code + 4 55423
5.b. Termination Date 12/29/09		5.c. Amount 111,546
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:
Employer Brooks Provisions/Latin American Dist		P.O. Box, Bldg., Room No., if any
Trade Name		Street 3445 South Front Street
Attention To: Dana Kellum		City Philadelphia
Title Director of HR		State Pennsylvania ZIP Code + 4 19148
5.b. Termination Date		5.c. Amount 1,925
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:
Employer Central Peninsula Hospital		P.O. Box, Bldg., Room No., if any
Trade Name		Street 250 Hospital Place
Attention To: Sally Walker		City Soldotna
Title Vice President, Human Resources		State Alaska ZIP Code + 4 99669
5.b. Termination Date 12/14/09		5.c. Amount 135,244
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:
Employer Chicago Packaging, a Quality Color Co		P.O. Box, Bldg., Room No., if any
Trade Name		Street 4340 West 47th Street
Attention To: Mark Mazzone		City Chicago
Title Director of Business Operations		State Illinois ZIP Code + 4 60632
5.b. Termination Date		5.c. Amount 7,500
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:
Employer Cintas Corporation		P.O. Box, Bldg., Room No., if any
Trade Name		Street 6800 Cintas Boulevard
Attention To: Greg Hart		City Mason
Title Assistant to CEO		State Ohio ZIP Code + 4 45040
5.b. Termination Date 9/14/09		5.c. Amount 50,431

Name of Person Filing: LRI Consulting Services, Inc		File Number C- 00525
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 Coral Option 1, LLC Trade Name Andalusia Country Club Attention To: Grady Sparks Title		Mailing Address: P.O. Box, Bldg., Room No., if any Street 81-570 Carboneras City La Quinta State California ZIP Code + 4 92253
5.b. Termination Date 7/28/09		5.c. Amount 40,249
5.a. Name and Address of Employer (including trade name, if any). Employer Crescent Foods Trade Name Attention To: Asma Khan Title VP Operations Management		Mailing Address: P.O. Box, Bldg., Room No., if any Street 2605 West 22nd Street, Suite 39 City Oak Brook State Illinois ZIP Code + 4 60523
5.b. Termination Date 8/12/09		5.c. Amount 6,632
5.a. Name and Address of Employer (including trade name, if any). Employer Culinary Standards Trade Name Attention To: Joe Stefanutti Title President		Mailing Address: P.O. Box, Bldg., Room No., if any Street 1101 East Washington Street City Louisville State Kentucky ZIP Code + 4 40202
5.b. Termination Date 8/5/09		5.c. Amount 7,877
5.a. Name and Address of Employer (including trade name, if any). Employer Dairy Farmers of America Trade Name Attention To: Annette Regan Title Human Resources		Mailing Address: P.O. Box, Bldg., Room No., if any Street 10220 North Ambassador Drive City Kansas City State Missouri ZIP Code + 4 64153
5.b. Termination Date		5.c. Amount 24,363
5.a. Name and Address of Employer (including trade name, if any). Employer Devereux Foundation Trade Name Attention To: John O'Keefe Title		Mailing Address: P.O. Box, Bldg., Room No., if any Street 2012 Renaissance Boulevard City King of Prussia State Pennsylvania ZIP Code + 4 19406
5.b. Termination Date 7/28/09		5.c. Amount 60,055
5.a. Name and Address of Employer (including trade name, if any). Employer DSC Logistics Trade Name Attention To: Verlyn Suderman Title General Council		Mailing Address: P.O. Box, Bldg., Room No., if any Street 1750 South Wolf Road City Des Plains State Illinois ZIP Code + 4 60018
5.b. Termination Date		5.c. Amount 158,505

Name of Person Filing: LRI Consulting Services, Inc.	File Number C- 00525
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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 G & D Integrated Trade Name Attention To: Kent Kallina Title	Mailing Address: P.O. Box, Bldg., Room No., if any Street 37353 South Frontage Road East City Channahon State Illinois ZIP Code + 4 60410
5.b. Termination Date 9/28/09	5.c. Amount 51,652

5.a. Name and Address of Employer (including trade name, if any). Employer Georges Shop & Rock, Inc Trade Name Attention To: Brandon Williams Title President	Mailing Address: P.O. Box, Bldg., Room No., if any Street 650 Hope Street City Vale State Oregon ZIP Code + 4 97918
5.b. Termination Date 12/29/09	5.c. Amount 21,239

5.a. Name and Address of Employer (including trade name, if any). Employer Gerald Subaru Trade Name Attention To: Donna Lawler Title	Mailing Address: P.O. Box, Bldg., Room No., if any Street 1210 East Ogden Avenue City Naperville State Illinois ZIP Code + 4 60563
5.b. Termination Date 6/16/09	5.c. Amount 19,237

5.a. Name and Address of Employer (including trade name, if any). Employer GModelo Agriculture, Inc. Trade Name Attention To: Luis Alvarez Title	Mailing Address: P.O. Box, Bldg., Room No., if any Street 5005 South 15th West City Idaho Falls State Idaho ZIP Code + 4 83404
5.b. Termination Date 11/17/09	5.c. Amount 11,662

5.a. Name and Address of Employer (including trade name, if any). Employer United Hospitality Resources Mgt Trade Name Hampton Inn O'Hare Attention To: Steven Bader Title President	Mailing Address: P.O. Box, Bldg., Room No., if any Street 3939 North Mannheim Road City Schiller Park State Illinois ZIP Code + 4 60176
5.b. Termination Date 8/19/09	5.c. Amount 11,325

5.a. Name and Address of Employer (including trade name, if any). Employer Hartley & Parker Limited, Inc. Trade Name Attention To: Jerry Rosenberg Title	Mailing Address: P.O. Box, Bldg., Room No., if any Street 100 Browning Road City Stratford State Connecticut ZIP Code + 4 06615
5.b. Termination Date 1/5/09	5.c. Amount 14,462

Name of Person Filing: LRI Consulting Services, Inc.	File Number C- 00525
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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.	
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5.a. Name and Address of Employer (including trade name, if any). Employer HFS North America Trade Name Attention To: Terry Conway Title	Mailing Address: P.O. Box, Bldg., Room No., if any Street 359 Long View Drive City Bloomington State Illinois ZIP Code + 4 60108
5.b. Termination Date 4/16/09	5.c. Amount 68,662

5.a. Name and Address of Employer (including trade name, if any). Employer Isle of Capri Casino, Inc. Trade Name Attention To: Lynne Banks Title Corp Sr Director, Human Resources	Mailing Address: P.O. Box, Bldg., Room No., if any Street 600 Emerson Road, Suite 300 City St Louis State Missouri ZIP Code + 4 63141
5.b. Termination Date 9/1/09	5.c. Amount 14,213

5.a. Name and Address of Employer (including trade name, if any). Employer LED Electrical & Mechanical Contractors LLC Trade Name Attention To: Dave Carmona Title	Mailing Address: P.O. Box, Bldg., Room No., if any Street 517 Clements Bridge Road City Barrington State New Jersey ZIP Code + 4 08007
5.b. Termination Date 2/10/09	5.c. Amount 1,177

5.a. Name and Address of Employer (including trade name, if any). Employer Lifestyle Support Services Trade Name Attention To: Connie Bennati Title	Mailing Address: P.O. Box, Bldg., Room No., if any Street 1109 Deveaux Street City Elmora State Pennsylvania ZIP Code + 4 15737
5.b. Termination Date 9/28/09	5.c. Amount 43,131

5.a. Name and Address of Employer (including trade name, if any). Employer Metro One Loss & Prevention Service Group Trade Name Attention To: Cliff Ingber Title General Council	Mailing Address: P.O. Box, Bldg., Room No., if any Street 900 South Avenue, Suite 200 City Staten Island State New York ZIP Code + 4 10314
5.b. Termination Date 10/19/09	5.c. Amount 46,500

5.a. Name and Address of Employer (including trade name, if any). Employer Noble Environmental Power Trade Name Attention To: Timothy McNeil Title Director of Operations	Mailing Address: P.O. Box, Bldg., Room No., if any Street 8 Railroad Avenue City Essex State Connecticut ZIP Code + 4 06426
5.b. Termination Date 3/25/09	5.c. Amount 6,000

Name of Person Filing: LRI Consulting Services, Inc		File Number C- 00525
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 Northrop Grumman		P.O. Box, Bldg., Room No., if any
Trade Name		Street 2650 Louisiana Boulevard
Attention To: Barbara Remmel		City Fort Polk
Title Manager Labor Relations Tech Serv		State Louisiana ZIP Code + 4 71459
5.b. Termination Date 5/14/09		5.c. Amount 33,775
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:
Employer Pankl Aerospace Systems		P.O. Box, Bldg., Room No., if any
Trade Name		Street 16615 Edwards Road
Attention To: Jackie Sanchez		City Cerritos
Title		State California ZIP Code + 4 90703
5.b. Termination Date		5.c. Amount 62,438
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:
Employer Petermann Transportation		P.O. Box, Bldg., Room No., if any
Trade Name		Street 14444 Northeast 199th Street
Attention To: Lisa Forsthoefel		City Battleground
Title		State Washington ZIP Code + 4 98604
5.b. Termination Date 12/2/09		5.c. Amount 13,041
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:
Employer PetSmart		P.O. Box, Bldg., Room No., if any
Trade Name		Street 19601 North 27th Avenue
Attention To: Andrew Iwaskow		City Phoenix
Title Vice President		State Arizona ZIP Code + 4 85027
5.b. Termination Date 9/8/09		5.c. Amount 120,485
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:
Employer PSC, Environmental Services Division		P.O. Box, Bldg., Room No., if any
Trade Name		Street 5252 San Felipe, Suite 1600
Attention To: Chuck Niederhofer		City Houston
Title Division HR Manager		State Texas ZIP Code + 4 77056
5.b. Termination Date 12/28/09		5.c. Amount 15,000
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:
Employer Quantem Aviation Services		P.O. Box, Bldg., Room No., if any
Trade Name		Street 175 Ammon Drive
Attention To: Salvatore Calvino		City Manchester
Title President		State New Hampshire ZIP Code + 4 03103
5.b. Termination Date		5.c. Amount 71,950

Name of Person Filing: LRI Consulting Services, Inc.	File Number C- 00525
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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.

<p>5.a. Name and Address of Employer (including trade name, if any).</p> <p>Employer Quesos La Ricura</p> <p>Trade Name</p> <p>Attention To: Jesus Guitierrez</p> <p>Title</p>	<p>Mailing Address:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street 225 Park Avenue</p> <p>City Hicksville</p> <p>State New York ZIP Code + 4 11801</p>
5.b. Termination Date 12/7/09	5.c. Amount 37,970

<p>5.a. Name and Address of Employer (including trade name, if any).</p> <p>Employer Sandvik Coromant</p> <p>Trade Name</p> <p>Attention To: Doug Barber</p> <p>Title VP Human Resources</p>	<p>Mailing Address:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street 300 Technology Court</p> <p>City Smyrna</p> <p>State Georgia ZIP Code + 4 30082</p>
5.b. Termination Date 10/27/09	5.c. Amount 130,281

<p>5.a. Name and Address of Employer (including trade name, if any).</p> <p>Employer Scherman Trucking</p> <p>Trade Name</p> <p>Attention To: Terry Lacasse</p> <p>Title Vice President Human Resources</p>	<p>Mailing Address:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street 1801 Lonestar Drive</p> <p>City Dallas</p> <p>State Texas ZIP Code + 4 75212</p>
5.b. Termination Date 9/30/09	5.c. Amount 25,416

<p>5.a. Name and Address of Employer (including trade name, if any).</p> <p>Employer SEB Security</p> <p>Trade Name</p> <p>Attention To: Robert Dinozzi</p> <p>Title CEO</p>	<p>Mailing Address:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street 8 Revolutionary Road</p> <p>City Ossining</p> <p>State New York ZIP Code + 4 10562</p>
5.b. Termination Date 11/18/09	5.c. Amount 75,844

<p>5.a. Name and Address of Employer (including trade name, if any).</p> <p>Employer Spirit Trucking Company</p> <p>Trade Name</p> <p>Attention To: Carolyn Svoboda</p> <p>Title Sr Vice President Human Resources</p>	<p>Mailing Address:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street 5400 West 47th Street</p> <p>City Forestview</p> <p>State Illinois ZIP Code + 4 60638</p>
5.b. Termination Date 6/16/09	5.c. Amount 31,248

<p>5.a. Name and Address of Employer (including trade name, if any).</p> <p>Employer St. Nicholas Health Care</p> <p>Trade Name</p> <p>Attention To: Howard Russo</p> <p>Title</p>	<p>Mailing Address:</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street 425 Ovington Avenue</p> <p>City Brooklyn</p> <p>State New York ZIP Code + 4 11209</p>
5.b. Termination Date 11/4/09	5.c. Amount 3,000

Name of Person Filing: LRI Consulting Services, Inc.	File Number C- 00525
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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.	
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5.a. Name and Address of Employer (including trade name, if any). Employer Sutphen Towers, Inc. Trade Name Attention To: Julie Phelps Title President	Mailing Address: P.O. Box, Bldg., Room No., if any Street 4500 Sutphen Court City Hilliard State Ohio ZIP Code + 4 43026
5.b. Termination Date 8/12/09	5.c. Amount 3,709

5.a. Name and Address of Employer (including trade name, if any). Employer Swire Coca-Cola, USA Trade Name Attention To: Joyce Hawkins Title Vice President Human Resources	Mailing Address: P.O. Box, Bldg., Room No., if any Street 12634 South 265 West City Draper State Utah ZIP Code + 4 84020
5.b. Termination Date 12/2/09	5.c. Amount 24,308

5.a. Name and Address of Employer (including trade name, if any). Employer Tecta America Trade Name Stock Roofing Attention To: Jim Phillips Title	Mailing Address: P.O. Box, Bldg., Room No., if any Street 629 Oak Farm Court City Timonium State Maryland ZIP Code + 4 21093
5.b. Termination Date 11/10/09	5.c. Amount 25,384

5.a. Name and Address of Employer (including trade name, if any). Employer The Pace Water Systems, Inc. Trade Name Attention To: Ted Dobson Title	Mailing Address: P.O. Box, Bldg., Room No., if any Street 4401 Woodline Road City Pace State Florida ZIP Code + 4 32571
5.b. Termination Date 9/22/09	5.c. Amount 3,484

5.a. Name and Address of Employer (including trade name, if any). Employer Tree of Life Trade Name Attention To: Keith Morrison Title	Mailing Address: P.O. Box, Bldg., Room No., if any Street 405 Golfway West Drive City St Augustine State Florida ZIP Code + 4 32905
5.b. Termination Date 7/7/09	5.c. Amount 21,000

5.a. Name and Address of Employer (including trade name, if any). Employer University of the Sciences in Philadelphia Trade Name Attention To: Bet Rosa Title	Mailing Address: P.O. Box, Bldg., Room No., if any Street 600 South 43rd Street City Philadelphia State Pennsylvania ZIP Code + 4 19104
5.b. Termination Date 9/16/09	5.c. Amount 37,000

Name of Person Filing: LRI Consulting Services, Inc	File Number C- 00525
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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.	
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5.a. Name and Address of Employer (including trade name, if any). Employer W. D. Manor Mechanical Contractors, Inc. Trade Name _____ Attention To: Don Petty Title Executive Vice President	Mailing Address: P.O. Box, Bldg., Room No., if any _____ Street 1838 North 23rd Avenue City Phoenix State Arizona ZIP Code + 4 85009
5.b. Termination Date 5/19/09	5.c. Amount 45,396

5.a. Name and Address of Employer (including trade name, if any). Employer York Linings International Trade Name _____ Attention To: Lisa Todd Title Secretary/Treasurer	Mailing Address: P.O. Box, Bldg., Room No., if any _____ Street 18600 Media Drive City Robertsdale State Alabama ZIP Code + 4 36567
5.b. Termination Date 10/14/09	5.c. Amount 4,507

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

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

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

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

Name of Person Filing:	LRI Consulting Services, Inc	File Number C- 00525
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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.
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15.a. Employer Name: Advanced Life Systems	15.b. Trade Name, If any:
15.c. To Whom Paid Name Scott Michel Title Organization P.O. Box, Building and Room Number, if any Street 819 Herman Road City Horsham State Pennsylvania ZIP Code + 4 19044	15.d. Amount 22,089 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: AEGIS Communications Group	15.b. Trade Name, If any:
15.c. To Whom Paid Name Scott Michel Title Organization P.O. Box, Building and Room Number, if any Street 819 Herman Road City Horsham State Pennsylvania ZIP Code + 4 19044	15.d. Amount 4,787 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: American Environmental	15.b. Trade Name, If any:
15.c. To Whom Paid Name Title Organization M. Rosado Management Consultants, LLC P.O. Box, Building and Room Number, if any Street 96 Linwood Plaza, Suite 103 City Fort Lee State New Jersey ZIP Code + 4 07024	15.d. Amount 1,313 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

Name of Person Filing: LRI Consulting Services, Inc.	File Number C- 00525
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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.
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15.a. Employer Name: Chicago Packaging, a Quality Color Company	15.b. Trade Name, If any:
15.c. To Whom Paid Name Luis Padilla Title Organization P.O. Box, Building and Room Number, if any Street 543 Forest Avenue City River Forest State Illinois ZIP Code + 4 60305	15.d. Amount 3,522 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: Cintas	15.b. Trade Name, If any:
15.c. To Whom Paid Name Title Organization East Coast Labor Relations, LLC P.O. Box, Building and Room Number, if any Street 151 Forge Road City Delran State New Jersey ZIP Code + 4 08075	15.d. Amount 20,876 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: Cintas	15.b. Trade Name, If any:
15.c. To Whom Paid Name Title Organization M. Rosado Management Consultants, LLC P.O. Box, Building and Room Number, if any Street 96 Linwood Plaza, Suite 103 City Fort Lee State New Jersey ZIP Code + 4 07024	15.d. Amount 12,693 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

Name of Person Filing: LRI Consulting Services, Inc.	File Number C- 00525
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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.
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15.a. Employer Name: Coral Option 1, LLC	15.b. Trade Name, If any: Andalusia Country Club
15.c. To Whom Paid Name Title Organization Redstone Enterprises, Inc. P.O. Box, Building and Room Number, if any Street 5415 East Willowick City Anaheim State California ZIP Code + 4 92807	15.d. Amount 20,749 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: Crescent Foods	15.b. Trade Name, If any:
15.c. To Whom Paid Name Luis Padilla Title Organization P.O. Box, Building and Room Number, if any Street 543 Forest Avenue City River Forest State Illinois ZIP Code + 4 60305	15.d. Amount 3,350 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: Culinary Standards	15.b. Trade Name, If any:
15.c. To Whom Paid Name Title Organization M. Rosado Management Consultants, LLC P.O. Box, Building and Room Number, if any Street 96 Linwood Plaza, Suite 103 City Fort Lee State New Jersey ZIP Code + 4 07024	15.d. Amount 4,877 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

Name of Person Filing:	LRI Consulting Services, Inc	File Number C- 00525
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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.
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15.a. Employer Name: Dairy Farmers of America	15.b. Trade Name, If any:
15.c. To Whom Paid Name Scott Michel Title Organization P.O. Box, Building and Room Number, if any Street 819 Herman Road City Horsham State Pennsylvania ZIP Code + 4 19044	15.d. Amount 6,850 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: Dairy Farmers of America	15.b. Trade Name, If any:
15.c. To Whom Paid Name Title Organization East Coast Labor Relations, LLC P.O. Box, Building and Room Number, if any Street 151 Forge Road City Delran State New Jersey ZIP Code + 4 08075	15.d. Amount 6,852 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: Devereux Foundation	15.b. Trade Name, If any:
15.c. To Whom Paid Name Title Organization Taltos Consulting, Inc. P.O. Box, Building and Room Number, if any Street 8915 Sandy Slate Way City Las Vegas State Nevada ZIP Code + 4 89123	15.d. Amount 6,880 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

Name of Person Filing: LRI Consulting Services, Inc.	File Number C- 00525
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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.
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15.a. Employer Name: Devereux Foundation	15.b. Trade Name, If any:
15.c. To Whom Paid Name Salvatore Clemente Title Organization P.O. Box, Building and Room Number, if any Street 138 Walnut Street City Dunmore State Pennsylvania ZIP Code + 4 18512	15.d. Amount 12,275 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: Devereux Foundation	15.b. Trade Name, If any:
15.c. To Whom Paid Name Natasha Gordon Title Organization P.O. Box, Building and Room Number, if any Street 350 Riverbirch Lane City Lawrenceville State Georgia ZIP Code + 4 30044	15.d. Amount 12,429 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name:	15.b. Trade Name, If any:
15.c. To Whom Paid Name Title Organization P.O. Box, Building and Room Number, if any Street City State ZIP Code + 4	15.d. Amount 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

Name of Person Filing: LRI Consulting Services, Inc	File Number C- 00525
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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.
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15.a. Employer Name: DSC Logistics	15.b. Trade Name, If any:
15.c. To Whom Paid Name Title Organization BJC and Associates, Inc. P.O. Box, Building and Room Number, if any Street 10108 Fehlberg Court City St John State Indiana ZIP Code + 4 46373	15.d. Amount 35,680 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: DSC Logistics	15.b. Trade Name, If any:
15.c. To Whom Paid Name Title Organization Prestige Consulting Solutions, LLC P.O. Box, Building and Room Number, if any Street 5500 Florence Harbor Drive City Orlando State Florida ZIP Code + 4 32829	15.d. Amount 15,696 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: DSC Logistics	15.b. Trade Name, If any:
15.c. To Whom Paid Name Title Organization East coast Labor Relations, LLC P.O. Box, Building and Room Number, if any Street 151 Forge Road City Delran State New Jersey ZIP Code + 4 08075	15.d. Amount 25,778 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

Name of Person Filing: LRI Consulting Services, Inc	File Number C- 00525
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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.
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15.a. Employer Name: G & D Integrated	15.b. Trade Name, If any:
15.c. To Whom Paid Name Scott Michel Title Organization P.O. Box, Building and Room Number, if any Street 819 Herman Road City Dunmore State Pennsylvania ZIP Code + 4 18512	15.d. Amount 29,152 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: Georges Shop & Rock, Inc.	15.b. Trade Name, If any:
15.c. To Whom Paid Name Title Organization O'Mara & Associates, LLC P.O. Box, Building and Room Number, if any Street 6 Drakewood Lane City Novato State California ZIP Code + 4 94947	15.d. Amount 10,779 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: Gerald Subaru	15.b. Trade Name, If any:
15.c. To Whom Paid Name Hector Barcenias Title Organization P.O. Box, Building and Room Number, if any Street 6217 Crossfire Court City Corona State California ZIP Code + 4 92880	15.d. Amount 3,773 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

Name of Person Filing: LRI Consulting Services, Inc	File Number C- 00525
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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.
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15.a. Employer Name: Hartley & Parker Limited, Inc.	15.b. Trade Name, If any:
15.c. To Whom Paid Name Hector Barcenas Title Organization P.O. Box, Building and Room Number, if any Street 6217 Crossfire Ct City Corona State California ZIP Code + 4 92880	15.d. Amount 8,087 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: HFS North America	15.b. Trade Name, If any:
15.c. To Whom Paid Name Scott Michel Title Organization P.O. Box, Building and Room Number, if any Street 819 Herman Road City Horsham State Pennsylvania ZIP Code + 4 19044	15.d. Amount 32,187 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: HFS North America	15.b. Trade Name, If any:
15.c. To Whom Paid Name Hector Barcenas Title Organization P.O. Box, Building and Room Number, if any Street 7218 Crossfire Court City Corona State California ZIP Code + 4 92880	15.d. Amount 5,913 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

Name of Person Filing: LRI Consulting Services, Inc	File Number C- 00525
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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.
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15.a. Employer Name: Isle of Capri Casino, Inc.	15.b. Trade Name, If any:
15.c. To Whom Paid Name Title Organization Taltos Consulting, Inc. P.O. Box, Building and Room Number, if any Street 8915 Sandy Slate Way City Las Vegas State Nevada ZIP Code + 4 89123	15.d. Amount 8,213 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: LED Electrical and Mechanical Contractors LLC	15.b. Trade Name, If any:
15.c. To Whom Paid Name Salvatore Clemente Title Organization P.O. Box, Building and Room Number, if any Street 138 Walnut Street City Dunmore State Pennsylvania ZIP Code + 4 18512	15.d. Amount 615 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: Lifestyle Support Services, Inc.	15.b. Trade Name, If any:
15.c. To Whom Paid Name Title Organization BJC and Associates, Inc. P.O. Box, Building and Room Number, if any Street 10108 Fehlberg Court City St John State Indiana ZIP Code + 4 46373	15.d. Amount 22,820 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

Name of Person Filing: LRI Consulting Services, Inc	File Number C- 00525
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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: Metro One	15.b. Trade Name, If any:
15.c. To Whom Paid Name Salvatore Clemente Title Organization P.O. Box, Building and Room Number, if any Street 138 Walnut Street City Dunmore State Pennsylvania ZIP Code + 4 18512	15.d. Amount 3,000 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: Metro One	15.b. Trade Name, If any:
15.c. To Whom Paid Name Title Organization Criterion Workforce Solutions, LLC P.O. Box, Building and Room Number, if any Street 323 Marioners Way City Copiague State New York ZIP Code + 4 11726	15.d. Amount 8,203 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: Metro One	15.b. Trade Name, If any:
15.c. To Whom Paid Name Title Organization Axiomatix, LLC P.O. Box, Building and Room Number, if any Street 323 Marioners Way City Copiague State New York ZIP Code + 4 11726	15.d. Amount 2,500 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

Name of Person Filing: LRI Consulting Services, Inc	File Number C- 00525
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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.
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15.a. Employer Name: Metro One	15.b. Trade Name, If any:
15.c. To Whom Paid Name Title Organization M. Rosado Management Consultants LLC P.O. Box, Building and Room Number, if any Street 96 Linwood Plaza, Suite 103 City Fort Lee State New Jersey ZIP Code + 4 08075	15.d. Amount 6,750 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: Metro One	15.b. Trade Name, If any:
15.c. To Whom Paid Name Title Organization East Coast Labor Relations, LLC P.O. Box, Building and Room Number, if any Street 151 Forge Road City Delran State New Jersey ZIP Code + 4 08075	15.d. Amount 1,597 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: Metro One	15.b. Trade Name, If any:
15.c. To Whom Paid Name Scott Michel Title Organization P.O. Box, Building and Room Number, if any Street 819 Herman Road City Horsham State Pennsylvania ZIP Code + 4 19044	15.d. Amount 1,606 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

Name of Person Filing: LRI Consulting Services, Inc	File Number C- 00525
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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: Noble Environmental Power	15.b. Trade Name, If any:
15.c. To Whom Paid Name Salvatore Clemente Title Organization P.O. Box, Building and Room Number, if any Street 138 Walnut Street City Dunmore State Pennsylvania ZIP Code + 4 18512	15.d. Amount 6,188 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: Northrop Grumman	15.b. Trade Name, If any:
15.c. To Whom Paid Name Title Organization East Coast Labor Relations, LLC P.O. Box, Building and Room Number, if any Street 151 Forge Road City Delran State New Jersey ZIP Code + 4 08075	15.d. Amount 9,573 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: Northrop Grumman ,	15.b. Trade Name, If any:
15.c. To Whom Paid Name Scott Michel Title Organization P.O. Box, Building and Room Number, if any Street 819 Herman Road City Horsham State Pennsylvania ZIP Code + 4 19044	15.d. Amount 9,202 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

Name of Person Filing: LRI Consulting Services, Inc	File Number C- 00525
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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.	
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15.a. Employer Name: Pankl Aerospace Systems	15.b. Trade Name, If any:
15.c. To Whom Paid Name Title Organization Redstone Enterprises, Inc. P.O. Box, Building and Room Number, if any Street 5415 East Willowick City Anaheim State California ZIP Code + 4 92807	15.d. Amount 31,406 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: Petermann Transportation	15.b. Trade Name, If any:
15.c. To Whom Paid Name Title Organization Taltos Consulting, Inc. P.O. Box, Building and Room Number, if any Street 815 Sandy Slate Way City Las Vegas State Nevada ZIP Code + 4 89123	15.d. Amount 7,416 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: PetSmart	15.b. Trade Name, If any:
15.c. To Whom Paid Name Title Organization BJC and Associates, Inc. P.O. Box, Building and Room Number, if any Street 10108 Fehlberg Court City St John State Indiana ZIP Code + 4 46373	15.d. Amount 63,298 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

Name of Person Filing: LRI Consulting Services, Inc	File Number C- 00525
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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.
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15.a. Employer Name: PSC, Environmental Services Division	15.b. Trade Name, If any:
15.c. To Whom Paid Name Scott Michel Title Organization P.O. Box, Building and Room Number, if any Street 819 Herman Road City Horsham State Pennsylvania ZIP Code + 4 19044	15.d. Amount 7,500 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: Quantem Aviation Services	15.b. Trade Name, If any:
15.c. To Whom Paid Name Title Organization Action Resources P.O. Box, Building and Room Number, if any Street 3892 Brook Hills Road City Fallbrook State California ZIP Code + 4 92028	15.d. Amount 36,550 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: Quantem Aviation Services	15.b. Trade Name, If any:
15.c. To Whom Paid Name Title Organization Criterion Workforce Solutions, LLC P.O. Box, Building and Room Number, if any Street 323 Mariners Way City Copiague State New York ZIP Code + 4 11726	15.d. Amount 563 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

Name of Person Filing: LRI Consulting Services, Inc.	File Number C- 00525
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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.
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15.a. Employer Name: Quantem Aviation Services	15.b. Trade Name, If any:
15.c. To Whom Paid Name Title Organization RoadWarrior Productions LLC P.O. Box, Building and Room Number, if any Street 108 South Indian Circle City Coca State Florida ZIP Code + 4 32922	15.d. Amount 619 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: Quesos La Ricura	15.b. Trade Name, If any:
15.c. To Whom Paid Name Title Organization M. Rosado Management Consultants, LLC P.O. Box, Building and Room Number, if any Street 96 Linwood Plaza, Suite 103 City Fort Lee State New Jersey ZIP Code + 4 07024	15.d. Amount 19,314 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: Sandvik Coromant	15.b. Trade Name, If any:
15.c. To Whom Paid Name Title Organization The Employee Consulting Group P.O. Box, Building and Room Number, if any Street 597 Bowen Estate Road City Russelville State Arkansas ZIP Code + 4 72802	15.d. Amount 68,248 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

Name of Person Filing: LRI Consulting Services, Inc.	File Number C- 00525
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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.
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15.a. Employer Name: Sandvik Coromant	15.b. Trade Name, If any:
15.c. To Whom Paid Name Scott Michel Title Organization P.O. Box, Building and Room Number, if any Street 819 Herman Road City Horsham State Pennsylvania ZIP Code + 4 19044	15.d. Amount 3,515 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: Schwerman Trucking	15.b. Trade Name, If any:
15.c. To Whom Paid Name Title Organization Labor Crisis, Inc. P.O. Box, Building and Room Number, if any Street 906 W McDermott, Suite 116 City Allen State Texas ZIP Code + 4 75013	15.d. Amount 12,994 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: SEB Security	15.b. Trade Name, If any:
15.c. To Whom Paid Name Title Organization Axiomatix, LLC P.O. Box, Building and Room Number, if any Street 323 Mariners Way City Copiague State New York ZIP Code + 4 11726	15.d. Amount 26,291 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

Name of Person Filing: LRI Consulting Services, Inc.	File Number C- 00525
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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.
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15.a. Employer Name: SEB Security	15.b. Trade Name, If any:
15.c. To Whom Paid Name Salvatore Clemente Title Organization P.O. Box, Building and Room Number, if any Street 138 Walnut Street City Dunmore State Pennsylvania ZIP Code + 4 18512	15.d. Amount 8,225 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: SEB Security	15.b. Trade Name, If any:
15.c. To Whom Paid Name Title Organization M. Rosado Management Consultants, LLC P.O. Box, Building and Room Number, if any Street 96 Linwood Plaza, Suite 103 City Fort Lee State New Jersey ZIP Code + 4 07024	15.d. Amount 6,000 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: Spirit Trucking Company	15.b. Trade Name, If any:
15.c. To Whom Paid Name Title Organization East Coast Labor Relations, LLC P.O. Box, Building and Room Number, if any Street 151 Forge Road City Delran State New Jersey ZIP Code + 4 08075	15.d. Amount 16,248 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

Name of Person Filing: LRI Consulting Services, Inc.	File Number C- 00525
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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.
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15.a. Employer Name: St. Nicholas Health Care	15.b. Trade Name, If any:
15.c. To Whom Paid Name Title Organization M. Rosado Management Consultants, LLC P.O. Box, Building and Room Number, if any Street 96 Linwood Plaza, Suite 103 City Fort Lee State New Jersey ZIP Code + 4 07024	15.d. Amount 1,500 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: Sutphen Towers, Inc.	15.b. Trade Name, If any:
15.c. To Whom Paid Name Title Organization Taltos Consulting, Inc. P.O. Box, Building and Room Number, if any Street 8915 Sandy Slate Way City Las Vegas State Nevada ZIP Code + 4 89123	15.d. Amount 2,209 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: Swire Coca-Cola, USA	15.b. Trade Name, If any:
15.c. To Whom Paid Name Title Organization Taltos Consulting, Inc. P.O. Box, Building and Room Number, if any Street 8915 Sandy Slate Way City Las Vegas State Nevada ZIP Code + 4 89123	15.d. Amount 13,808 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

Name of Person Filing: LRI Consulting Services, Inc.	File Number C- 00525
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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.
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15.a. Employer Name: Tecta America	15.b. Trade Name, If any: Stock Roofing
15.c. To Whom Paid Name Hector Barcenas Title Organization P.O. Box, Building and Room Number, if any Street 6217 Crossfire Court City Corona State California ZIP Code + 4 92880	15.d. Amount 13,384 <hr/> 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: The Pace Water Systems, Inc	15.b. Trade Name, If any:
15.c. To Whom Paid Name Title Organization RoadWarrior Productions, LLC P.O. Box, Building and Room Number, if any Street 108 South Indian Circle City Coca State Florida ZIP Code + 4 32922	15.d. Amount 1,984 <hr/> 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: Tree of Life	15.b. Trade Name, If any:
15.c. To Whom Paid Name Hector Barcenas Title Organization P.O. Box, Building and Room Number, if any Street 6217 Crossfire Court City Corona State California ZIP Code + 4 92880	15.d. Amount 10,500 <hr/> 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

Name of Person Filing: LRI Consulting Services, Inc.	File Number C- 00525
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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.
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15.a. Employer Name: University of the Sciences in Philadelphia	15.b. Trade Name, If any:
15.c. To Whom Paid Name Title Organization East Coast Labor Relations, LLC P.O. Box, Building and Room Number, if any Street 151 Forge Road City Delran State New Jersey ZIP Code + 4 08075	15.d. Amount 18,600 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: W.D. Manor Mechanical Contractors, Inc	15.b. Trade Name, If any:
15.c. To Whom Paid Name Hector Barcenas Title Organization P.O. Box, Building and Room Number, if any Street 6217 Crossfire Court City Corona State California ZIP Code + 4 92880	15.d. Amount 23,646 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

15.a. Employer Name: York Linings International	15.b. Trade Name, If any:
15.c. To Whom Paid Name Title Organization M. Rosado Management Consultants, LLC P.O. Box, Building and Room Number, if any Street 96 Linwood Plaza, Suite 103 City Fort Lee State New Jersey ZIP Code + 4 07024	15.d. Amount 2,444 15.e. Purpose Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.