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. 1245-0003 Expires 10-31-2013

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)

For Office	ial Use Only	_									
7 07 0 111	Juli 000 0111		READ THE IN	STRUCTIONS C	AREFUL	LY BEFORE PRE	PARING	THIS REPORT		•	
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	mber <b>C</b> - 0023	14		• •		2. Period Covered	(	lonth/Day/Year mm/dd/yyyy)		Month/Day ( mm/dd/yy	
						By This Report From	·	/[01]/[2010	Through:	12/31	/2010
										J	,
A. Perso	n Filing										
3. Name	and mailing add	dress (include 2	ZIP Code):			4. Any other addre	ess wher	e records neces	sary to verify	this report are	kept:
Name	Peter		Bennett			Name			-		]
Title	Treas	urer				Title	,				
Organi	zation The B	ennett Law	v Firm, P.A			Organization	Acres mos Aria i i i i i i i i i i i i i i i i i i		many and the same of the same		
P.O. B	ox, Building an	d Room Numb	er, if any			P.O. Box, Build	ling and I	Room Number, i	f any		
	P.O. Box	7799			}	Suite	∋ 300				
Street				-		Street 121 N	Middle	Street			
City	Portland					City Port]	land				
State	Maine		ZIP Co	de + 4 04112-	7799	State Maine	3/:		ZIP Cod	de + 4 04101	
							\				
					Signat	tures					
informatio	on contained in	any accompany	ying documents)	and other applicat has been examir the instructions).	ned by the	s of law, that all of the signatory and is, to	ne informa the best	ation submitted in of the undersign	this report (inc led's knowled	cluding the ge and belief, t	rue,
17. Signe		#M		President (if other title, instructions)	, see	18. Signed Title	easure	er d		Treasurer (If other title	
On Z	) / [7 / [2 Date		773 - 4775 hone Number			On 3/17	/2c	<u> </u>	773 - 4775 one Number		

Name of Person F	ling:	Peter Bennett						File Number C-	00214			
B. Statement of I		ipts Report all receipts fron	n employers in	connect	ion wi	th labor relation	s advice or servi	ces regardless of	the purpos	es c	of the advice	e
		or services.	<u> </u>									
5.a. Name and Add	ess c	of Employer (including trade na	ıme, if any).				ailing Address: uilding and Room	Number if any				
Employer A	ggr	egate Industries -	NE Regior	i - In	ıc.		illuling and moon	I Number, it any				
Trade Name						Street 17	15 Broadway	У		55.		
Attention To	Ri	chard Wi	inter			City Sa	ugus					
Title	HR	Manager	h.d.		_	State Ma	ssachúsetts	s	ZIP Code	+ 4	01906-4	1703
	L					· · · · · · · · · · · · · · · · · · ·	COMPANY THE PROPERTY OF THE PR	***************************************			Lanca danca const	
5.b. Termination	Date	Ongoing				5.c. Amount	242,360					
6. TOTAL RECEI	'TS	FROM ALL EMPLOYERS	804,543		-							
<u> </u>			· · · · · · · · · · · · · · · · · · ·				<u> </u>					
C. Statement of		reements Report all di	chursaments m	ade hy i	the re	porting organiza	tion in connectic	on with labor relati	one advice	or s	envices rer	
		to the emplo	yers listed in Pa		uie ie	porting organiza	.1101111100111100110	JII WILLI IADOL TOLUS	Ulia auvico	0, 0	CI VICCO ICI	lucicu
7. Disbursements to (a) Name	) Offic	cers and Employees:	(b) Salary (	(c) Expen	ıses (d	) Totals						
Meghan	Н	Baldacci	479		. 0	479	9. Office and A	Administrative Expe	enses		24	9,125
Haley	L	Bennett	120		0	120	10. Publicity				1	2,959
Jeffrey		Bennett	107,592		78	107,670	11. Fees for Pre	ofessional Service	es		3	9,644
Peter		Bennett	184,079	4,0	052	188,131	12. Loans Made	9				0
Charles	J	Carbonneau	22,800		27	22,827	13. Other Disbu	ursements				0
8. Total disburser	ents	to officers and employees	:		<u> </u>	495,961	14. Total Disburs	sements (Sum of Ite	ems 8-13)		79	7,689
D. Schedule of D	isbu	rsements for Reportable				dule to report on	ly disbursements	s made for the pur	poses des	cribe	ed in Part C	) of the
15 - Employer N		<del>-</del>		nstructio	ns. ———	T <sub>45</sub> b. Trada	Name, If any:					
15.a. Employer N	апе			ATT-10-481-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		15.0. 11406	Name, ii any.					
Li												
15.c. To Whom P	aid	-				15.d. Amou	nt	<u></u>				
Name _						15.e. Purpo	se					
Title [							*				,	
Organization						<b>_</b>						
											1	
P.O. Box, Buile	ling	and Room Number, if any		***************************************								
Street												
			, , ,					,				
City	<del></del>			·····		_		•				
State Washi			P Code + 4	***********			4.7.1.1	75, 12			. , , , , ,	
16. TOTAL DISB	JRSI	EMENTS FOR ALL REPOF	RTABLE ACTIV	/ITY								

Form LM-21 (2003)

Name of Person Filing: Peter Bennett	File Number C- 00214
B. Statement of Receipts Report all receipts from employers in connection was advice or services.	rith labor relations advice or services regardless of the purposes of the
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:
Employer Amoskeag Beverages, LLC	P.O. Box, Bldg., Room No., if any
Trade Name	Street
Attention To: Thomas A Bullock	City Manchester
Title	State New Hampshire ZIP Code + 4 03108-6540
5.b. Termination Date Ongoing	5.c. Amount 7-, 681
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Bldg., Room No., if any
Employer Associated Grocers of New England, Inc.	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 16,583
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:
Employer Auburn Motor Sales	P.O. Box. Blda., Room No., if anv
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 4, 175
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 3 , 046
	- Company of the Comp
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Blda., Room No., if any
Employer Bellavance Beverage Company, Inc.	P.O. Box 6007
Trade Name	Street
Attention To: Joseph Bellavance, Sr.	City Nashua
Title President	State New Hampshire ZIP Code + 4 03063-6007
5.b. Termination Date Ongoing	5.c. Amount 2,762
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:
Employer Bell Enterprises, Inc.	P.O. Box. Blda Room No if anv
	Street 200 North Street
Trade Name   Calais IGA   Attention To:   Kathy	City Calais
Title	State Maine ZIP Code + 4 04619-1620
5.b. Termination Date Ongoing	5.c. Amount 1,500

Name of Person Filing: Peter Bennett	File Number C- 00214
B. Statement of Receipts Report all receipts from employers in connection advice or services.	with labor relations advice or services regardless of the purposes of the
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:
Employer Charles George Companies, Inc.	P.O. Box, Bldg., Room No., if any
Trade Name	Street
Attention To: Robert J Eisenberg	City Londonderry
Title President	State New Hampshire ZIP Code + 4 03053-089
110010000	bearing the second seco
5.b. Termination Date Ongoing	5.c. Amount 4,310
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Bldg., Room No., if any
Employer Coca-Cola Bottling Co. of No. New England	Suite 330
Trade Name	Street 1 Executive Park Drive
Attention To: Lawrence Lordi	City Bedford
Title President	State New Hampshire ZIP Code + 4 03110-691
5.b. Termination Date Ongoing	5.c. Amount 79, 435
	Lanca and Marie and American an
<ol><li>5.a. Name and Address of Employer (including trade name, if any).</li></ol>	Mailing Address: P.O. Box, Blda., Room No., if any
Employer Cumberland County Federal Credit Union	
Trade Name	Street 101 Gray Road
Attention To: Karen Rickett	City Falmouth
Title Vice-President of Operations	State Maine ZIP Code + 4 04105-202
5.b. Termination Date Ongoing	5.c. Amount 2,462
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:
	P.O. Box, Bldg., Room No., if any
Employer Down East Credit Union	P.O. Box 415
Trade Name	Street
Attention To: Bert Beaulieu	City Topsham
Title President	State Maine ZIP Code + 4 04086-041
The state of the s	
5.b. Termination Date Ongoing	5.c. Amount 8 , 67.1 .
5.b. Termination Date Ongoing  5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box. Blda Room No if any
5.a. Name and Address of Employer (including trade name, if any).  Employer Federal Distributors, Inc.	Mailing Address: P.O. Box, Blda Room No if any P.O. Box 2007
5.a. Name and Address of Employer (including trade name, if any).  Employer Federal Distributors, Inc.  Trade Name	Mailing Address: P.O. Box, Blda., Room, No., if anv P.O. Box 2007  Street
5.a. Name and Address of Employer (including trade name, if any).  Employer Federal Distributors, Inc.  Trade Name Attention To: J. P Spellman	Mailing Address: P.O. Box. Blda Room No if anv P.O. Box 2007  Street City Lewiston
5.a. Name and Address of Employer (including trade name, if any).  Employer Federal Distributors, Inc.  Trade Name	Mailing Address: P.O. Box, Blda., Room, No., if anv P.O. Box 2007  Street
5.a. Name and Address of Employer (including trade name, if any).  Employer Federal Distributors, Inc.  Trade Name Attention To: J. P Spellman	Mailing Address: P.O. Box. Blda Room No if anv P.O. Box 2007  Street City Lewiston
5.a. Name and Address of Employer (including trade name, if any).  Employer Federal Distributors, Inc.  Trade Name Attention To: J. P Spellman  Title	Mailing Address:  P.O. Box. Blda Room No if any  P.O. Box 2007  Street  City Lewiston  State Maine  ZIP Code + 4 04241-200  5.c. Amount 4, 497  Mailing Address:
5.a. Name and Address of Employer (including trade name, if any).  Employer Federal Distributors, Inc.  Trade Name Attention To: J. P Spellman  Title  5.b. Termination Date Ongoing  5.a. Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Blda., Room No., if anv P.O. Box 2007  Street City Lewiston State Maine  ZIP Code + 4 04241-200  5.c. Amount 4,497
5.a. Name and Address of Employer (including trade name, if any).  Employer Federal Distributors, Inc.  Trade Name Attention To: J. P Spellman  Title  5.b. Termination Date Ongöing  5.a. Name and Address of Employer (including trade name, if any).  Employer Franklin-Somerset Federal Credit Union.	Mailing Address:  P.O. Box. Blda Room No if any  P.O. Box 2007  Street  City Lewiston  State Maine  ZIP Code + 4 04241-200  5.c. Amount 4, 497  Mailing Address:  P.O. Box. Blda Room No if any
5.a. Name and Address of Employer (including trade name, if any).  Employer Federal Distributors, Inc.  Trade Name Attention To: J. P Spellman  Title  5.b. Termination Date Ongoing  5.a. Name and Address of Employer (including trade name, if any).  Employer Franklin-Somerset Federal Credit Union  Trade Name	Mailing Address: P.O. Box. Blda Room No if anv P.O. Box 2007  Street City Lewiston State Maine  ZIP Code + 4 04241-200  5.c. Amount 4,497  Mailing Address: P.O. Box. Blda Room No if anv Street 26 Leavitt Street
5.a. Name and Address of Employer (including trade name, if any).  Employer Federal Distributors, Inc.  Trade Name Attention To: J. P Spellman  Title  5.b. Termination Date Ongöing  5.a. Name and Address of Employer (including trade name, if any).  Employer Franklin-Somerset Federal Credit Union.	Mailing Address:  P.O. Box. Blda Room No if any  P.O. Box 2007  Street  City Lewiston  State Maine  ZIP Code + 4 04241-200  5.c. Amount 4, 497  Mailing Address:  P.O. Box. Blda Room No if any

Name of Person Filing: Peter Bennett	File Number C- 00214
B. Statement of Receipts Report all receipts from employers in connection v     advice or services.	vith labor relations advice or services regardless of the purposes of the
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
Trade Name	Street 335 Valley Street
Attention To: Lorena Delcourt	City Portland
Title	State Maine ZIP Code + 4 04102-3010
5.b. Termination Date Ongoing	5.c. Amount 2,705
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Bldg., Room No., if any
Employer Goodwill Industries of Northern New Engla	
Trade Name	Street
Attention To: Theodore Caouette	City Portland
Title	State Maine ZIP Code + 4 04104 - 8600
5.b. Termination Date Ongoing	5.c. Amount 44, 412
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:
Employer Great State Beverages, Inc.	P.O. Box. Blda., Room No., if anv P.O. Box 16550
Trade Name	Street
Attention To: Robert Koslowsky	City Hookset
Title	State New Hampshire ZIP Code + 4 03106-6550
5.b. Termination Date Ongoing	5.c. Amount 43,399
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
Attention To: Terrence Young	City Guilford
Title President	State Maine ZIP Code + 4 04443 - 01/49
5.b. Termination Date Ongoing	5.c. Amount 4 , 603
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:
Employer Lafayette Inn By the Bay, Inc.	P.O. Box, Blda., Room No., if any
	Street 88 Spring Street
Trade Name Holiday Inn By the Bay  Attention To: Gustave H Tillman, Jr.	City Portland
Title General Manager	State Maine ZIP Code + 4 04101
	Processor Control of the Control of
5.b. Termination Date Ongoing	5.c. Amount 5, 333
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:
Employer Lepage Bakeries, Inc.	P.O. Box. Blda Room No if anv   P.O. Box 1900
Trade Name Country Kitchen Bakeries	Street
Attention To: Andrew Barowsky	City Auburn
Title President	State Maine ZIP Code + 4 04211-1900
5.b. Termination Date Ongoing	5.c. Amount 32, 196

Name of Person Filing: Peter Bennett	File Number C- 00214
B. Statement of Receipts Report all receipts from employers in connection values or services.	with labor relations advice or services regardless of the purposes of the
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 One
Attention To: Dan Porta	City Scarborough
Title	State Maine ZIP Code + 4 04074 - 8367
5.b. Termination Date Ongoing	5.c. Amount 2,051
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:
Employer Maine Distributors Inc.	P.O. Box, Bldg., Room No., if any
Trade Name	Street 5 .Coffee Street
Attention To: Scott Solmon	City Bangor
Title	State Maine ZIP Code + 4 04401-5757
5.b. Termination Date Ongoing	5.c. Amount 5,443
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:
Maria de la Companya	P.O. Box. Blda., Room No., if any
Employer Maine State Credit Union	P.O. Box 5659
Trade Name	
Attention To: Normand R Dubreuil	City Augusta, State Maine ZIP Code + 4 04332-5659
Title President	01332 3033
5.b. Termination Date Ongoing	5.c. Amount 1,852
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Bldg., Room No., if any
Employer National Distributors, Inc.	
Trade Name	Street 116 Wallace Avenue
Attention To: Jeffrey D Kane	City South Portland
Title President	State Maine ZIP Code + 4 04106-6144
5.b. Termination Date Ongoing	5.c. Amount 2,741
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:
Employer New Hampshire Distributors, Inc.	P.O. Box. Bldg., Room No., if any P.O. Box. 267
Control of the Contro	
Trade Name Attention To: C. T Brown	Street City Concord
Title Chief Executive Officer	State New Hampshire ZIP Code + 4 03302-0267
	to an examination of the contract of the contr
5.b. Termination Date Ongoing	5.c. Amount 16, 624
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:
Employer P.F.B. Inc.	P.O. Box. Blda Room No if anv
Trade Name Prunier's Market	Street
Attention To: William Prunier	City Bomoseen
Title Treasurer	State   Vermont   ZIP Code + 4   05732-0137
5.b. Termination Date Ongoing	5 c. Amount 1 , 080

Name of Person Filing: Peter Bennett	File Number C- 00214
B. Statement of Receipts Report all receipts from employers in connection was advice or services.	rith labor relations advice or services regardless of the purposes of the
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:
Employer Performance Food Group	P.O. Box, Bldg., Room No., if any P.O. Box 2628
Trade Name Northcenter Foodservice	Street
Attention To: Greg Piper	City Augusta
Title President	State Maine ZIP Code + 4 04338-2628
5.b. Termination Date Ongoing	5.c. Amount 6,202,
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:
Employer Portland Water District	P.O. Box, Bldq., Room No., if any
Trade Name	Street
Attention To: David Kane	City Portland
Title	State Maine ZIP Code + 4 04104-3553
	Learning to a reputation of the individual content and the individual conte
5.b. Termination Date Ongoing	5.c. Amount 29,504
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Blda Room No if any
Employer Rowe Ford Sales	P.O. Box 109
Trade Name	Street
Attention To: Wallace Camp, Jr.	City Portland
Title	State Maine ZIP Code + 4 04104-0109
5.b. Termination Date Ongoing	5.c. Amount 7 , 912
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:
	P.O. Box, Bldg., Room No., if any
Employer Sprague Energy Corporation	Suite 200
Trade Name	Street 2 International Drive
Attention To: J P Scoff	City Portsmouth
Title	State New Hampshire ZIP Code + 4 03801-6809
5.b. Termination Date Ongoing	5.c. Amount 12,896
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:
Employer Synernet, Inc.	P.O. Box, Blda., Room No. if any Suite 329
Trade Name	Street 222 St. John Street
Attention To: Becky Barrows	City Portland
Title	State Maine - ZIP Code + 4 04102-3071
	to the second control of the second control
5.b. Termination Date Ongoing	5.c. Amount 2 , 731
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:
Employer University of New England	P.O. Box. Blda Room No if anv
Trade Name	Street 11 Hills Beach Road
Attention To: Nicole Trufant	City Biddeford
Title	State Maine ZIP Code + 4 04005-9525
5 b Termination Date Ongoing	5.c. Amount 196, 123

	File Number C- 00214
B. Statement of Receipts Report all receipts from employers in connection advice or services.	vith labor relations advice or services regardless of the purposes of the
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
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 6', 229
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address: P.O. Box, Bldg., Room No., if any
Employer	
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:
	P.O. Box, Blda., Room No., if anv
Employer	Street
Trade Name	
Attention To:	City State ZIP Code + 4
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:
page to the second of the seco	P.O. Box, Bldg., Room No., if any
Employer	P.O. Box, Bldg., Room No., if any
Employer	
Employer Trade Name	Street
Employer  Trade Name  Attention To:	Street City
Employer Trade Name Attention To: Title	Street City State ZIP Code + 4  5.c. Amount Mailing Address:
Employer Trade Name Attention To: Title  5.b. Termination Date  5.a. Name and Address of Employer (including trade name, if any).	Street City State ZIP Code + 4  5.c. Amount
Employer  Trade Name Attention To: Title  5.b. Termination Date  5.a. Name and Address of Employer (including trade name, if any).  Employer	Street City State ZIP Code + 4  5.c. Amount  Mailing Address: P.O. Box. Blda Room No if any
Employer Trade Name Attention To: Title  5.b. Termination Date  5.a. Name and Address of Employer (including trade name, if any).  Employer Trade Name	Street City State ZIP Code + 4  5.c. Amount Mailing Address: P.O. Box. Blda Room No if any Street
Employer  Trade Name Attention To: Title  5.b. Termination Date  5.a. Name and Address of Employer (including trade name, if any).  Employer  Trade Name Attention To:	Street City State  ZIP Code + 4  5.c. Amount  Mailing Address: P.O. Box. Blda. Room No if any Street City
Employer  Trade Name Attention To: Title  5.b. Termination Date  5.a. Name and Address of Employer (including trade name, if any).  Employer  Trade Name Attention To:	Street City State ZIP Code + 4  5.c. Amount Mailing Address: P.O. Box. Blda Room No if any Street
Employer  Trade Name Attention To: Title  5.b. Termination Date  5.a. Name and Address of Employer (including trade name, if any).  Employer  Trade Name Attention To: Title	Street City State  ZIP Code + 4  5.c. Amount  Mailing Address: P.O. Box. Blda. Room No if any Street City
Employer  Trade Name Attention To: Title  5.b. Termination Date  5.a. Name and Address of Employer (including trade name, if any).  Employer  Trade Name Attention To: Title	Street City State  ZIP Code + 4  5.c. Amount  Mailing Address: P.O. Box. Blda Room No if any Street City State  ZIP Code + 4  5.c. Amount  Mailing Address:
Employer  Trade Name Attention To: Title  5.b. Termination Date  5.a. Name and Address of Employer (including trade name, if any).  Employer  Trade Name Attention To: Title  5.b. Termination Date  5.a. Name and Address of Employer (including trade name, if any).	Street City State  ZIP Code + 4  5.c. Amount  Mailing Address: P.O. Box. Blda Room No if anv  Street City State  ZIP Code + 4  5.c. Amount  Mailing Address: P.O. Box. Blda Room No if anv
Employer Trade Name Attention To: Title  5.b. Termination Date  5.a. Name and Address of Employer (including trade name, if any).  Employer Trade Name Attention To: Title  5.b. Termination Date  5.a. Name and Address of Employer (including trade name, if any).  Employer  Employer  Find Name Attention To: Title  5.b. Termination Date	Street City State  ZIP Code + 4  5.c. Amount  Mailing Address: P.O. Box. Blda Room No if anv  Street City State  ZIP Code + 4  5.c. Amount  Mailing Address: P.O. Box. Blda Room No if anv
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Frederick	-	Finberg	73,336	822	74,158	
Christian	-	Foster	25,531	45	25,576	
Pamela		Irish	3,925	0	3,925	
Laurie		Proctor	23,086	0	23,086	
Karin	-	Shupe -	10,668	0	10,668	
Joanne 🧼 .	I		. 39,228	93	39,321	
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Organization:

The Bennett Law Firm, P.A.

File Number:

C-00214

For the Period Ending:

**December 31, 2010** 

## ATTACHMENT 1 of 1 TO FORM LM-21

**Section B, Items 5 – 6:** We have included a list of employers for whom we provided labor relations advice and services for the time period covered by this report. The majority of these clients receive general labor and employment law advice on a retainer basis. This advice may or may not pertain to reportable activity. Further (except as noted below), the portions of receipts attributable to reportable activity are not shown separately on our records. Thus, for the time period covered by this report, no Forms LM-10 or LM-20 have been generated except for the following clients for whom specific reportable activity associated with union campaigns was undertaken and for whom separate receipts were maintained:

- Amoskeag Beverages, LLC: Forms LM-10 and LM-20 filed for Fiscal Year Ending 12/31/2010
- Lafayette Inn By the Bay, Inc., d/b/a Holiday Inn By the Bay: Forms LM-10 and LM-20 filed for Fiscal Year Ending 12/31/2010
- University of New England: Form LM-10 for Fiscal Year Ending 05/31/2010 and Form LM-20 for Fiscal Year Ending 12/31/2009

Section C, Items 7-14: We are a law firm and have disbursements for other practice areas of law in addition to labor relations advice and services. Further, those disbursements attributable to labor relations advice and services and the other practice areas are not shown separately on our records. We have calculated that the total receipts listed in Item 6 represent 48% of the firm's total receipts for the time period covered by this report. As such, we have allocated 48% of our total disbursements for Items 7-14 accordingly.