

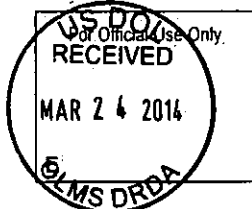
FORM LM-21

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. 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

547191

1. File Number C- 00633	2. Period Covered By This Report From:	Month/Day/Year (mm/dd/yyyy) 01 / 01 / 2013	Through:	Month/Day/Year (mm/dd/yyyy) 12 / 31 / 2013
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A. Person Filing

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

Name Steven A Beyer

Title Partner

Organization The Crossroads Group Labor Relations Con

P.O. Box, Building and Room Number, if any
505

Street 63 Via Pico Plaza

City San Clemente

State California ZIP Code + 4 92672

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 [Signature]
Title Other (Specify)
Partner
On 03 / 14 / 2014 (949) 248-0884
Date Telephone Number

President
(if other title, see
instructions)

18. Signed Michael Dana Penn
Title Other (Specify)
Partner
On 03 / 18 / 2014 (818) 999-5632
Date Telephone Number

Treasurer
(If other title, see
instructions)

Name of Person Filing: Steven Beyer	File Number C- 00633
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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 Odwalla		P.O. Box, Building and Room Number, if any	
Trade Name		Street 1900 E. Davis Drive	
Attention To Brian J Sasadu		City Dinuba	
Title Vice President, Labor Relations		State California ZIP Code + 4 93618-9372	

5.b. Termination Date 12/20/2012	5.c. Amount 31,124
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6. TOTAL RECEIPTS FROM ALL EMPLOYERS 251,002
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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	
Steven A Beyer	131,430	15,656	147,086	9. Office and Administrative Expenses
Michael D Penn	64,037	4,385	68,422	10. Publicity
		0	0	11. Fees for Professional Services
				12. Loans Made
				13. Other Disbursements
8. Total disbursements to officers and employees:			215,508	14. Total Disbursements (Sum of Items 8-13) 215,508

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	15.e. Purpose
Title	
Organization	
P.O. Box, Building and Room Number, if any	
Street	
City	
State	ZIP Code + 4
16. TOTAL DISBURSEMENTS FOR ALL REPORTABLE ACTIVITY	

Name of Person Filing: Steven Beyer		File Number C- 00633	
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 Evapco Inc.		P.O. Box, Bldg., Room No., if any	
Trade Name		Street 5151 Allendale Lane	
Attention To: John J Calkins		City Taneytown	
Title Vice President and General Counsel		State Maryland ZIP Code + 4 21787	
5.b. Termination Date 02/01/2013		5.c. Amount 34,105	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Packard Hospitality Group		P.O. Box, Bldg., Room No., if any	
Trade Name Holiday Inn LAX		Street 9901 S. La Cienega Blvd.	
Attention To: Michael Goldstein		City Los Angeles	
Title President & Chief Executive Officer		State California ZIP Code + 4 90045	
5.b. Termination Date 11/01/2012		5.c. Amount 4,319	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Capstone Logistics, LLC		P.O. Box, Bldg., Room No., if any	
Trade Name		Suite 520	
Attention To: Mike Adams		Street 6525 The Corners Parkway	
Title Chief Operating Officer		City Norcross	
		State Georgia ZIP Code + 4 30092-3353	
5.b. Termination Date 03/11/2013		5.c. Amount 11,697	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Dr. Pepper Snapple Group		P.O. Box, Bldg., Room No., if any	
Trade Name		Street 5301 Legacy Drive	
Attention To: Elizabeth Ramirez-Washka		City Plano	
Title Corporate Counsel		State Texas ZIP Code + 4 75024	
5.b. Termination Date 05/23/2013		5.c. Amount 67,478	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer CRC Health Group		P.O. Box, Bldg., Room No., if any	
Trade Name		Street 1385 Newark Road	
Attention To: Valerie Mogavero		City Kennet Square	
Title Vice President, HR Operations		State Pennsylvania ZIP Code + 4 19348	
5.b. Termination Date 06/26/2013		5.c. Amount 13,014	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer Fruitcrown Products Inc.		P.O. Box, Bldg., Room No., if any	
Trade Name		Street 250 Adams Blvd.	
Attention To: Robert Jagenburg		City Farmingdale	
Title President		State New York ZIP Code + 4 11735	
5.b. Termination Date 08/03/2013		5.c. Amount 26,767	

Name of Person Filing: Steven Beyer		File Number C- 00633	
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 Consolidated Container Company		P.O. Box, Bldg., Room No., if any Suite 300	
Trade Name		Street 3101 Towncreek Parkway	
Attention To: Matthew Patterson		City Atlanta	
Title VP and Deputy General Counsel		State Georgia ZIP Code + 4 30339	
5.b. Termination Date 11/01/2013		5.c. Amount 55,968	
5.a. Name and Address of Employer (including trade name, if any).		Mailing Address:	
Employer IKO		P.O. Box, Bldg., Room No., if any Suite 200	
Trade Name		Street 6 Denny Road	
Attention To: Aubrey Ellis		City Wilmington	
Title Vice President, Manufacturing		State Delaware ZIP Code + 4 19809	
5.b. Termination Date 06/13/2013		5.c. Amount 6,530	
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	
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	