

FORM LM-20
AGREEMENT & ACTIVITIES 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).

No: 1245-0003
Expires: 08/31/2016

For Official Use Only
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PLEASE READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. a. File Number: C- 214

☒ Amended Report

2.Name and mailing address(include ZIP code):		3. Any other address where records necessary to verify this report are kept:	
Name: PETER BENNETT		Name :	
Title: Signers		Title:	
Organization: AAA Organization		Organization:	
P.O. Box, Bldg., Room No., if any:		P.O. Box, Bldg., Room No., if any:	
Street: 121 MIDDLE STREET, SUITE 300		Street:	
City: PORTLAND State: ME ZIP: 04101-7109		City: State: ZIP:	
4. Date fiscal year ends: Mar / 20		5: Type of person <input type="checkbox"/> a. Individual <input type="checkbox"/> b. Partnership <input checked="" type="checkbox"/> c. Corporation <input type="checkbox"/> d. Other (Specify):	

Nature of Agreement or Arrangement	
6. Full name and address of employer with whom made(include ZIP Code): Name (first,middle,last) : Kumar dss sss Organization DAVIS VISION, INC. Trade Name, if any: P.O. Box, Bldg., room No., if any: Street: 175 E. HOUSTON ST City SAN ANTONIO State TX ZIP 78205	
7. Date entered into: 08/09/2018	
8. Name of person(s) through whom made: Name : Kumar dss sss - Additional names at the end of the report	

Signature and Verification

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 Section VII on penalties in the instructions.)

13. SIGNED: Peter Pan

PRESIDENT

(If other title, see instructions)

14. SIGNED: Peter Pan

TREASURER

(If other title, see instructions)

Date: 04/30/2019

Telephone Number: 444-555-4445

Date: 04/30/2019

Telephone Number: 444-555-4445

Nature of Agreement or Arrangement (Continuation)

9. Check the appropriate box(es) to indicate whether an object of the activities undertaken is directly or indirectly:

☒ a. To persuade employees to exercise or not to exercise, or persuade employees as to the manner of exercising, the right to organize and bargain collectively through representatives of their own choosing.☒ b. To supply an employer with information concerning the activities of employees or a labor organization in connection with a labor dispute involving such employer, except information for use solely in conjunction with an administrative or arbitral proceeding or a criminal or civil judicial proceeding.☐ 10. Terms and conditions. (Explain in detail; see instructions. Written agreements must be attached by clicking the "Add Attachments" link at the top of the form.)

Written Agreement/Arrangement

Some Info

Specific Activities to be performed

11. For each activity, separately list in detail the information required (See instructions):

Activity 1

a. Nature of activity

Nature of Act 1111

11b. Period during which activities performed:

asdasd

11c. Extent performed:

aaaa

11d. Name and Address of person(s) through whom activities were performed:

Name (first,middle,last) :

Peter Kumar

Organization:

Jeffy Corps

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP

ccc

asdsd

Falls Church

VA

22043

12a. Identify subject groups of employees:

aaa

12b. Identify subject labor organizations:

VARIETY ARTISTS AAAA AFL-CIO(NATIONAL HEADQUARTERS) - 147