Office of Labor-Management Standards

A. Person Filing	7
Name and mailing address (include ZIP code):	Any other address where records necessary to verify this report are kept:
Berens & Tate, P.C.	of the state of th
10050 Regency Circle, Suite 400	n/a
Omaha, NE 68114	cation and accompanies to the anomal and the action and accompanies to the action accompanies to the accompanie
Date fiscal year ends: 4. Type of person:	
1/31/2001 a. 🗆 Individual b. [□ Partnership c. 🖾 Corporation d. □ Other (Specify):
B. Nature of Agreement or Arrangement	The control of the co
5. Full name and address of employer with whom made (include ZI	
Niobrara Valley Electric Membership Corporation	On or about July 12, 2000
427 N. 4th Street, P.O. Box 60	7. Names of persons through whom made:
O'Neill, NE 68763	John Hoke
 Check the appropriate box to indicate whether an object of the a a. XXTo persuade employees to exercise or not to exercise, or 	activities undertaken, is directly or indirectly: or persuade employees as to the manner of exercising, the right to organize and bargain
collectively through representatives of their own choosin	
	activities of employees or a labor organization in connection with a labor dispute involv- conjunction with an administrative or arbitral proceeding or a criminal or civil judicial pro-
9. Terms and conditions (Explain in detail; see Part B-9 of instruction	ons):
	grand to the production of the company of the compa
When performing general legal se	ervices for the employer, a member of Berens & ich may be considered persuader activities.

C. Specific Activities to be Performed

10. For each activity, separately list in detail the information required (See Part C-10 of instructions):

Provide employees with general information on unionization during employee meetings. Monitor employer speeches and answer questions on behalf of the employer.

b. Period during which performed: c. Extent performed: n/a During organizing activity

d. Names and addresses of persons through whom performed:

Mark E. McQueen & George E. Martin ,10050 Regency Circle, Suite 400, Omaha, NE 68114

11. Identify (a) Subject employees, groups of employees, and (b) labor organizations:

Employees of Niobrara Valley Electric Membership Corporation.

D. Verification and Signature. The person in item 1 above and each of his undersigned authorized officers declares, under penalty of law, that all in-

formation in this report, including all attachments incorporated the knowledge and belief, true, correct, and complete.	erein or referred to in this report, has been exam	ined by him and is, to the best of his
Signed: C Berry	Signed:	Treasu

(If other title, cross out and write in correct title above.) (If other title, cross out and write in correct title above.) State Date State City City Date

(If other title, cross out and write in correct title above.)

State

NE

Date

City

Omaha

at:

U.S. Departn t of Labor

Office of Labor-Management Standards



This report is mandatory under P.L. 86-257 as amended. Failure to comply may result in criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 439, 440.

OMB No. 1214-0001 12/31/86

Required of Persons, including Labor Relations Consultants and Other Individuals and Organizations, Under Section 203(b) of the Labor-Management Reporting and Disclosure Act of 1959, as amended (LMRDA).

File No. C. 376

Under Section 203(b) of the Labor-Management Reporting and Disclosure Ac	t of 1959, as amended (LMRDA).				
A. Person Filing	-8930				
1. Name and mailing address (include ZIP code): Berens & Tate, P.C. 10050 Regency Circle, Suite 400 Omaha, NE 68114	Any other address where records necessary to verify this report are kept: n/a				
Date fiscal year ends:					
1/31/2001 a. Individual b. Part	nership c. 🛣 Corporation d. 🗆 Other (Specify):				
B. Nature of Agreement or Arrangement					
 Full name and address of employer with whom made (include ZIP code) Sitel Corporation 7277 World Communications Drive Omaha, NE 68134 	6. Date entered into: On or about July 10, 2000 7. Names of persons through whom made: Andie Gordman				
Check the appropriate box to indicate whether an object of the activities.					
ing such employer, except information for use solely in conjuncticeeding. 9. Terms and conditions (Explain in detail; see Part B-9 of instructions): When performing general legal service Tate was involved in activities which m C. Specific Activities to be Performed 10. For each activity, separately list in detail the information required (See a. Nature of activity: Provide employees with gene					
	employer speeches and anower queetiens				
on behalf of the employer.					
b. Period during which performed: c. Extent perfo	rmed:				
During organizing activity	n/a				
d. Names and addresses of persons through whom performed:	posterior				
Mark E. McQueen,10050 Regency Circle, Su	ite 400, Omaha, NE 68114				
11. Identify (a) Subject employees, groups of employees, and (b) labor org	anizations: AUG 1 5 2000				
Employees of Sitel Corporation at Las Vegas					
D. Verification and Signature. The person in item 1 above and each of tormation in this report, including all attachments incorporated therein or knowledge and belief, true, correct, and complete.	his undersigned authorized officers declares, under penalty of law, that all in- referred to in this report, has been examined by him and is, to the best of his				
Signed: VOC	Signed:				
Receident President	Treasurer				

(If other title, cross out and write in correct title above.)

City

Office of Labor-Management Standards



This report is mandatory under P.L. 86-257 as amended. Failure to comply may result in criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 439, 440.

OMB No. 1214-0001 12/31/86

Required of Persons, including Labor Relations Consultants and Other Individuals and Organizations,

Ur	nder Section 203(b) of the	Labor-Management Reporting	and Disclosure Ac	t of 1959, as	amended (LMRDA).	File No. C. 3/6	bini.	
A.	Person Filing					0.000	Plumping and the second	
1.	Name and mailing address (include ZIP code):		2. Any oth	er address where records	s necessary to verify this re	port are kept:		
	Berens & Tate,			2/0				
		Circle, Suite 400		n/a				
	Omaha, NE 681	114						
3.	Date fiscal year ends:	4. Type of person:		100			2583 2598	
	1/31/2001	a. 🗆 Individua	b. 🗆 Parti	nership	c. 🖸 Corporation	d. Other (Specify):		
B.	. Nature of Agreement	or Arrangement		Soffice		100 100 no. 10	0000	
5.	Full name and address of employer with whom made (include ZIP code):):	6. Date entered into:	4 1 45 2000	Vines	
	CS Integrated Retail Services, LLC 500 S. 99th Ave.					out June 15, 2000	The state of the s	
	Tolleson, AZ 8535	3			7. Names of persons to			
_			-1 -6 1611 111-		Nancy M	uramoto		
Ö.	V	ox to indicate whether an obje ployees to exercise or not to ex				ercising, the right to organi	ze and hargain	
		gh representatives of their ow		ado omployo	s as to the marmer of exc	rolong, the light to organi	ze and bargain	
	 To supply an emping such employe ceeding. 	oloyer with information concer er, except information for use s	rning the activities solely in conjuncti	s of employee ion with an ac	s or a labor organization i ministrative or arbitral pro	in connection with a labor occeeding or a criminal or ci	dispute involv- ivil judicial pro-	
9.	Terms and conditions (E	xplain in detail; see Part B-9 o	f instructions):			- 200 To 100 TO	FOLLOW	
						mbor of Porons 8		
	When pe	erforming general le	gal service	s for the	employer, a mer	der ectivities		
	Tate was	s involved in activitie	es which ma	ay be co	nsidered persua	der activities.		
C	Specific Activities to b	o Parformed						
		rately list in detail the informat	tion required (See	Part C-10 of i	nstructions):			
	a. Nature of activity:	Provide employees				ration during		
	employee meetings. Monitor emp				e speeches and	answer questions	S	
	on behalf of the employer.							
		Name of the last o						
	b. Period during which	performed:	c. Extent perfo	rmed:		prihodo nicibo e isto ed pr		
	During organizi	ng activity	2.74	n/a				
_		es of persons through whom p					0.50	
	William M. Mut	h, Jr.,10050 Regen	cy Circle, S	uite 400	Omaha, NE 68	114		
11.	. Identify (a) Subject emp	loyees, groups of employees,	and (b) labor orga	anizations:		n E G E I W	7 3 1	
	Employees of (CS Integrated Retai	I Services	LLC	11 12 25 10 10 10 10 10 10			
	Employees of C	Jo integrated Netai	ii Oei vices,	LLO		JUL 1 0 200	00 00	
						10 002 . 0 200		
tor	Verification and Signat mation in this report, inci owledge and belief, true, or	ture. The person in item 1 ab juding all attachments incorpo correct, and complete.	ove and each of orated therein or	his undersign referred to in	ed authorized officers de this report, has been ex-	clares, under penalty of la amined by him and is/sot	aw, that all in- the best of his	
,	Keli CBe	len	President	Signed:			Treasurer	
(If o		write in correct title above.)	e stores a	(If other title	, cross out and write in co			
	City	State	Date		City	State	Date	

on:6/26/00

NE

at:

Omaha

on:

U.S. Departi it of Labor

Office of Labor-Management Standards



This report is mandatory under P.L. 86-257 as amended. Failure to comply may result in criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 439, 440.

OMB No. 1214-0001

Rec	quired of Persons, including Laborater Section 203(b) of the Laborater	abor Relations Consultants or-Management Reporting	and Other Individuand Disclosure Ac	luals and Orga at of 1959, as	nizations, amended (LMRDA).	File No.	c. 376	5	
A.	Person Filing								
	Name and mailing address (include ZIP code):			2. Any other	er address where records	necessary to	verify this	report are ke	pt:
Berens & Tate, P.C. 10050 Regency Circle, Suite 400				W 10 10					
				n/a					
Omaha, NE 68114									
					province described to the control	man a s	100,1902	0 0000	
3.	Date fiscal year ends:	4. Type of person:			A X o transfer year	onth fed co.75	no the fire		
	1/31/2001	a. 🗆 Individus	b. D Part	nership (. 🗵 Corporation d.	□ Other (Specify):		
В.	Nature of Agreement or A	rrangement		26-72-4		21 180 100 119 11		No. par	
5.	Full name and address of employer with whom made (include ZIP code): 6. Date entered into:					STATE HALL TO		01 1816	
	Wolfe Electric				On or abo	ut June	14, 200	00	
	7121 Amanda Rd. 7. Names of persons through					rough whom	made:	pielye :	
	Lincoln, NE 68507				Dick Wolf	e			
8.	Check the appropriate box to	indicate whether an obje	ect of the activities	s undertaken,	is directly or indirectly:				
	a. XX To persuade employe	ees to exercise or not to e epresentatives of their ow	xercise, or persua	ade employee	s as to the manner of exer	rcising, the ri	ght to orga	nize and barg	gain
	b. To supply an employe		ming the activities	s of employee	s or a labor organization in	n connection	with a labo	or dispute inv	olv-
	ceeding.			19 11 11			to the different	M3C3	
	Specific Activities to be P	ly list in detail the informat				A CONTRACTOR		A STATE OF THE STA	
	a. Nature of activity: Provide employees with general information on unionizatio					ation du	ring		
	employee meetings. Monitor employee speeches and answ					answer (questio	ns	
	on behalf of the employer.								
	b. Period during which perf	ormed:	c. Extent perfo	ormed:	na nitra più accominante	and the same	Mary De Colonia de Mary De Colonia de Colonia		
	During organizing	activity	100	n/a					
	d. Names and addresses of persons through whom performed:								
	Mark E. McQueen, 10050 Regency Circle, Suite 400, O			Omaha, NE 6811	4		E 0 05		
	Mark E. McQueel	II, 10000 Regene	y 011010, 0a		ordenja i na postava na		E 6	[] W	15
11.	Identify (a) Subject employees, groups of employees, and (b) labor organizations:			10/	N NO VILLOGIA	NI SCOTT	-		
	1 - 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -						111	2 0 2000	
	Employees of Wolfe Electric					100	JOL	2 0 2000	1
		Figures 1					119	DOL/ESA	
_								S/DOE/SRD	
	Verification and Signature	The server to be a dis-	area and stack of	ble condensity	ad authorized attended	alama			12

Signed:

President

(If other title, cross out and write in correct title above.)

City

State

Date

Omaha

NE

On:

Signed:

Treasurer

City

State

Date

City

State

Date

At:

On: