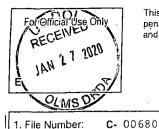
U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FUKWI LIVI-ZU AGREEMENT AND ACTIVITIES REPORT

⊢orm approved Office of Management and Budget No. 1245-0003 Expires 08-31-2016



1. File Number:

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 Reporting and Disclosure Act of 1959, as amended. (LMRDA)

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

114415

Person Filing	·
2. Name and mailing address (include ZIP Code):	3. Any other address where records necessary to verify this report are kept:
Name Ronald L Mason	. Name Ronald L Mason
Title President	Title President
Organization Midwest Management Consultants, Inc.	Organization Midwest Management Consultants, Inc.
P.O. Box, Bldg., Room No., if any P. O. Box 398	P.O. Box, Bldg., Room No., if any P. O. Box 398
Street.	Street
City Dublin	City Dublin
State Ohio	98 State Ohio ZIP Code + 4 43017-0398
4. Date fiscal year ends: 5. Type of person:	
Dec 🔽 / 31 a. Individual b. Part	nership c. X Corporation d. Other (Specify):
Nature of Agreement or Arrangement	
6. Full name and address of employer with whom made (include ZIP Code):	e): 7. Date entered into: 10 / 21 / 2019
Name Larry Watson, Owner	8. Name of person(s) through whom made:
Organization Regional Ready Mix, LLC	Name Coot Hataaa Caasaa I M
Trade Name, if any Ready Mix	Name Scot Watson, General Manager

Signatures		
Each of the undersigned declares, under penalty of perjury and other applicable the information contained in any accompanying documents) has been examined true, correct, and complete. (See Section VII on penalties in the instructions.)	penalties of law, that all of the information submitted in this report (including d by the signatory and is, to the best of the undersigned's knowledge and belief,	
13. Signed President (If other title, see instructions) Title President (If other title, see instructions)	14. Signed And Manager (flother title, see instructions) Title Treasurer (flother title, see instructions)	
On 12/3/19 614-734-9455 Date Telephone Number	On 13+3+9 614-734-9455 Telephone Number	
1/15/2020	1115/2020	

ZIP Code + 4 61068

Name

Name

Name

Name

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

Rochelle

IL

15051 E. Lind Road

Street

City

State

- 9. Check the appropriate box to indicate whether an object of the activities undertaken, is directly or indirectly:
 - a. XX 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.
 - 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.):

Verbal agreement to represent Regional Ready Mix in union campaign against the Teamsters Local 325. Agreement has never been reduced to writing, is for no specific time and may be terminated by either party at any time.

All consultations billed at \$225/hourly, including travel time and expenses.

Specific Activities to be Performed

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

Giving speeches, preparing written materials for distribution and conducting meetings with management and employees for purpose of answering questions of rights afforded by the NLRA.

11.b. Period during which performed: 10/21/19 to 10/31/19	11.c. Extent performed: Continuing
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:
Name Larry Watson, Owner Organization Regional Ready Mix, LLC P.O. Box, Bldg., Room No., if any Street 15051 E, Lind Road City Rochelle	Name Scot Watson, General Manager Organization P.O. Box, Bldg., Room No., if any Street City
State I L ZIP Code + 4 61 0 68	State ZIP Code + 4
All full time and regular part-time mechanics, drivers, loaders, and dispatchers	12.b. Identify subject labor organizations: e Teamsters Local 325