Department of Labor Office of Labor-Management Standards

## 1m20 **FURM LM-20 AGREEMENT AND ACTIVITIES 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 Reporting and Disclosure Act of 1959, as amended. (LMRDA)

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

498020		
1. File Number: C- 658		
Person Filing		
Name and mailing address (include ZIP Code):	3. Any other address where records necessary to verify this report are kept:	
Name Jason J Greer	Name	
Title President	Title	
Organization Greer Consulting, Inc.	Organization	
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any	
Street 6311 Ronald Reagan Dr. Suite 162	Street	
City Lake St. Louis	City	
State Missouri ZIP Code + 4 63367	State ZIP Code + 4	
4. Date fiscal year ends: 5. Type of person:		
Dec / 12 a. Individual b. Partnership	c. Corporation d. Other (Specify):	
Nature of Agreement or Arrangement		
6. Full name and address of employer with whom made (include ZIP Code):	7. Date entered into: 5 / 01 / 2007	
Name Michelle Olson		
Organization New Age Electronics	8. Name of person(s) through whom made:	
Trade Name, if any	Name Michelle Olson	
P.O. Box, Bldg., Room No., if any	Name	
Street 21950 Arnold Center Road	Name	
City Carson	Name	
State California ZIP Code + 4 90810	Name	
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 Not Ready To Sign  13. Signed  President  President  President  (If other title, see instructions)	penalties of law, that all of the information submitted in this report (including by the signatory and is, to the best of the undersigned's knowledge and belief,  Not Ready To Sign  14. Signed  Treasurer (If other title, see instructions)	
On 5/21/12 314-643-6572  Date Telephone Number	On Date Telephone Number	
Suc Tolopholio Nullibol	Totopholic Hulliber	
orm LM-20 (2003)	Page 1 of	

Greer Consulting, Inc.		File Number C- 658	
9. Check the appropriate box 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.):			
		•	
Specific Activities to be Performed			
11. For each activity, separately list in detail the information required (See instructions):			
a. Nature of activity:			
Employed to give speeches to employees regarding exercising their right to organize and bargain collectively			
501100017017			
11.b. Period during which performed:	11.c. Extent performed:		
May 2007	Completed		
11.d. Name and address through whom performed:	Additional Name and addres	s through whom performed, if any:	
Name	Name		
Organization New Age Electronics	Organization		
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No.,	if any	
Street 21950 Arnold Center Road	Street		
City Carson	City		
State California ZIP Code + 4 90810	State	ZIP Code + 4	
12.a. Identify subject groups of employees:	12.b. Identify subject labor of	organizations:	
All full-time and part-time warehouse employee	International Asso	ciation of Machinists and	