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

## FORM LM-20 AGREEMENT AND ACTIVITIES REPORT

Form approved
Office of Management
and Budget
No. 1245-0000
Expires 10

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Form LM-20 (2003)

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)

649267 READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT. 1. File Number: 00525 Person Filing 2. Name and mailing address (include ZIP Code): 3. Any other address where records necessary to verify this report are kept: Name Name Title Title Organization LRI Consulting Services, Inc. Organization P.O. Box, Bidg., Room No., if any P.O. Box, Bldg., Room No., if any Street 7850 South Elm Place, Suite E Street City Broken Arrow City State Oklahoma ZIP Code + 4 74011 ZIP Code + 4 4. Date fiscal year ends: 5. Type of person: Dec Individual b. Partnership c. Corporation Other (Specify): Nature of Agreement or Arrangement 6. Full name and address of employer with whom made (include ZIP Code): 7. Date entered into: Name 8. Name of person(s) through whom made: Organization FedEx Freight Corporation Name Trade Name, if any Ivan Rich P.O. Box, Bldg., Room No., if any Name Street 1715 Aaron Brenner Drive - Suite 600 Name City Memphis Name ZIP Code + 4 58/20 Name 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 Section VII on senatties in the instructions.) 13. Signed President 14. Signed Treasurer (If other title, see (If other title, see instructions) instructions) Title President Title On 12/16/2016 918-455-9995 On 12/16/2016 918-455-9995 Date Telephone Number Date Telephone Number

Filer. LRI Consulting Services, Inc.	File Number C- 00525
9. Check the generalists have to indicate whether a bit of the state o	
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.):	
Verbal agreement. \$3,000 per day per consultant plus reasonable travel expenses.	
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Specific Activities to be Performed	
11. For each activity, separately list in detail the information required (See instru	rations):
a. Nature of activity:	
Engaged to communicate to employees regarding exercisi	ng their rights to organize and bargain collectively.
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11.b. Period during which performed:	11.c. Extent performed:
various days beginning 10/11/16	Fully Performed
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:
Name Joseph Brock	Name
Organization East Coast Labor Relations LLC	Organization
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any
Street 151 Forge Road	Street
City Delran	City
State NJ ZIP Code + 4 08975	State ZIP Code + 4
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:
various employees Mesquite, TX location	pre-petition