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

## FORM LM-20 AGREEMENT AND ACTIVITIES REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006



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.

541409		
1. File Number: <b>C-</b> 00633		
Person Filing		
Name and mailing address (include ZIP Code):	3. Any other address where records necessary to verify this report are kept:	
Name Steven A Beyer	Name	
Title Partner	Title	
Organization The Crossroads Group	Organization	
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any	
Street 63 Via Pico Plaza, Suite 505	Street	
City San Clemente	City	
State California ZIP Code + 4 92672	State ZIP Code + 4	
4. Date fiscal year ends: 5. Type of person:		
Dec / 31 a. Individual b. Partnership	c. Corporation d. Other (Specify):	
Nature of Agreement or Arrangement		
6. Full name and address of employer with whorn made (include ZIP Code):	7. Date entered into: 1 / 17 / 2014	
Name David C Goldberg	8. Name of person(s) through whom made:	
Organization Serco Inc.	Name	
Trade Name, if any		
P.O. Box, Bldg., Room No., if any	Name	
Street 1818 Library Street, Suite 1000	Name	
City Reston	Name	
State Virginia ZIP Code + 4 20190	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 penalties in the instructions.)		
13. Signed President (If other title, see	14. Signed Michael Dans Penson Treasurer (If other title, see	
Title Other (Specify) instructions)	Title Other (Specify) instructions)	
Partner	Partner	
On 02/09/2014 818-999-5632	On 02/09/2014 949-248-0884	
Date Telephone Number	Date Telephone Number	

Filer: Steven Beyer The Crossroads Group		File Number C- 00633	
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.):			
Payment on a fee-for-service basis at the hourly rate of \$350.00 and \$250.00, respectively, plus			
reasonable and customary expenses			
·			
Specific Activities to be Performed			
11. For each activity, separately list in detail the information required (See instructions):			
a. Nature of activity:  To advise employees of their Section 7 rights and assist the employer's efforts to communicate			
information about third party representation	adiac che employer	a efforts to communicate	
11.b. Period during which performed:	11.c. Extent performed:		
01/28 - Present	Continuing		
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:		
Name Steven A Beyer	Name Michael	D Penn	
Organization The Crossroads Group	Organization The Crossroads Group		
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any		
Street 63 Via Pico Plaza, Suite 505	Street 63 Via Pico P	laza, Suite 505	
City San Clemente	City San Clemente		
State California ZIP Code + 4 92672	State California	ZIP Code + 4 92672	
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:		
All full-time and regular part-time General Clerks I, General Clerks II and General Clerks III, Tutors, Computer Operators, Laborers and Truck Drivers employed at the employer's facilities located at 850 NW Chipman Road, Lee's Summit, MO and 7600 West 119th Street, Overland Park, KS	OPEIU		

Filer: Steven Beyer The Crossroads Group File Number: C-00633

11.d. Name and address through whom performed:

Name: Miko A. Penn

Organization: The Crossroads Group

Street: 63 Via Pico Plaza, Suite 505

City: San Clemente

State: California Zip Code: 92672

Attachment to:

Form LM-20 (2003)

Page 3 of 3