Agreement and Activities Peport

U.S. Department of Labor

Office of Labor-

agement 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.

02/29/93

. Person Filing						
Name and maling address (include	de ZIP code):	2 A	ny other address	where records nece	ssary to vari	v this report are ke
Labor Information Services, Inc.			ny outer accuracy			, and topolit and the
P 0 Box 6063				NONE		
Malibu, CA 90264						
Date fiscal year ends:	4. Type of person:				- 15	
	a. 🗆 Individu		nership c. KX	Corporation d.	□ Other (S	pedify):
12/31/00	-	<u> </u>				
Nature of Agreement or Arra		de (include 719 or	de). 6 Da	ite entered into:		
5. Full name and address of employer with whom made (include a			,40).	7/26/00		
Kmart Corporation			7. N	ames of persons thro	ugh whom n	nade:
3100 West Big Beaver Road Troy, MI 48084-3163			S. Jan Squitieri			
I. Check the appropriate box to indicate whether an object of the ac						
b. To supply and employed dispute involving such criminal or civil judicial. Terms and conditions (Explain	r with information c employer, except in proceeding.	concerning the acti formation for use	solely in conjunc			
_	-			ng meetings with		
nit to discuss the realit						
28 hours will be allo			of time and e	xpenses will be o	ione monthi	y. There is
no written agreement as to	a maximum bill	able amount.				
. Specific Activities to be Pe	erformed					
they wish to be represente	d for the purpo	ses of collect	ive bargainin	g.		
b. Peroid during which perfo	rmed:	c. Extent perform	med: On-going	meetings, up to	24 hours b	ofore the elect
	lection date	will be perf	ormed. These	will be group or	individua	1 meetings to
.,,20,00		discuss NLRA	hasic guidel	ines, review act	and answer	questions.
d. Nam,es and addresses of R. Warren - Labor Informa	-		ddress)	ID E		W E
. Identify (a) Subject employees	s, groups of employe	ees, and (b) labor	organizations:	1001	WY 78 2	900 191
All voting employees in bargaining unit.				129	USDOL/ESA OLMS/DOE/SI	RD
. Verfication and Signature. at all information in this report, in the best of his knowledge and to igned:	ncluding all attachm	nents incorporated	Signed:	ned authorized office ed to in this report, h	rs declares, as been exar	under penalty of law nined by him and is Treasure
other title, cross out and write in	n correct title above			cross out and write in	correct title	
City	State	Date	Ci		tate	Date
,	Julio			.,	late	Date

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REVISED

OMB No. 1214-0001

as provided by 29 U.S.C. 439, 440.		OE) 23/30		
Other Individuals and Organizations.	File No.	C 464		

Required of Persons, including Labor Relations Consultants and Other Individual Under Section 203(b) of the Labor-Management Reporting and Disclosure Act of 1959, as amended (LMRDA). A. Person Filling 1. Name and maling address (include ZIP code): 2. Any other address where records necessary to verify this report are kept Labor Information Services, Inc. NONE P 0 Box 6063 Malibu, CA 90264 4. Type of person: 3. Date fiscal year ends: a.

Individual b. □ Partnership c. ☑ Corporation d. □ Other (Spedify): 12/31/00 8. Nature of Agreement or Arrangement 6. Date entered into: 5. Full name and address of employer with whom made (include ZIP code): 7/26/00 Kmart Corporation 7. Names of persons through whom made: 3100 West Big Beaver Road Trov. MI 48084-3163 S. Jan Squitieri 8. Check the appropriate box to indicate whether an object of the activities undertaken, is directly or indirectly: a. M To persuade employees to exercise or not to exercise, or persuade employees as to the manner or exercising, the right to organize collectively through representatives of their own choosing. b. To supply and 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. 9. Terms and conditions (Explain in detail; see Part B-9 of instructions): Starting 7/26/00 through 12/21/00, our firm will be conducting meetings with employees from the voting unit to discuss the realities of signing authorization cards and voting in the upcoming election. A maximum of hours will be allocated to this work. Billing of time and expenses will be done monthly. There is no written agreement as to a maximum billable amount. C. Specific Activities to be Performed 10. For each activity, separately list in detail the information required (See Part C-10 of instructions): a. Nature of activity: To inform employees in the voting unit to exercise their right to choose whether or not they wish to be represented for the purposes of collective bargaining. c. Extent performed: On-going meetings, up to 24 hours before the election, b. Peroid during which performed: will be performed. These will be group or individual meetings to 7/26/00 through election date discuss NLRA basic guidelines, review act and answer questions. d. Nam, es and addresses of persons through whom performed: P. Familusi M. Roan R, Mulita Labor Information Services, Inc. PO Box 6063 - Malibu, CA 90264 G. Palma 11. Identify (a) Subject employees, groups of employees, and (b) labor organizations: MAR 3 0 2001 All voting employees in bargaining unit. USDOL/ESA D. Verfication and Signature. The person in item 1 above and each of his undersigned authorized officers declares, under penalty of law, that all information in this report, including all attachments incorporated therein or referred to in this report, has been examined by him and is. to the best of his knowledge and belief, true, correct, and complete.

Signed:

Other title, cross out and write in correct title above.)

City

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Date

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Date

On: 1/21/01

at:

on:

Public reporting burden for this collection of information is estimated to average 20 minutes per response, including the time for reviewing instructions searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Labor Management Standards, Department of Labor, Room N5625, 200 Constitution Avenue, N.W., Wash., D.C. 20210; and to the Office of Management and Budget, Paperwork Reduction Project (1214-0001), Wash., D.C. 20503.

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OMB No. 1214-0001 02/29/93

C. 464 Required of Persons, including Labor Relations Consultants and Other Individuals and Organizations. File No. Under Section 203(b) of the Labor-Management Reporting and Disclosure Act of 1959, as amended (LMRDA). A. Person Filing 2. Any other address where records necessary to verify this report are kept 1. Name and maling address (include ZIP code): Labor Information Services, Inc. NONE P 0 Box 6063 Malibu, CA 90264 3. Date fiscal year ends: 4. Type of person: b. □ Partnership c. ☑ Corporation d. □ Other (Spedify): a. Individual 12/31/2000 B. Nature of Agreement or Arrangement 6. Date entered into: 5. Full name and address of employer with whom made (include ZIP code): 8/1/2000 Arden Hill Hospital 4 Harrison Drive 7. Names of persons through whom made: Kathy Celutano Goshen, NY 8. 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 or exercising, the right to organize collectively through representatives of their own choosing. b. To supply and 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. 9. Terms and conditions (Explain in detail; see Part B-9 of instructions): through 8/30/2000, our firm will be conducting meetings with employees from the voting Starting 8/1/2000 unit to discuss the realities of signing authorization cards and voting in the upcoming election. A maximum of 425 hours will be allocated to this work. Billing of time and expenses will be done monthly. There is no written agreement as to a maximum billable amount. C. Specific Activities to be Performed 10. For each activity, separately list in detail the information required (See Part C-10 of instructions): a. Nature of activity: To inform employees in the voting unit to exercise their right to choose whether or not they wish to be represented for the purposes of collective bargaining. c. Extent performed: b. Peroid during which performed: On-going meetings, up to 24 hours before the election, will be performed. These will be group or individual meetings to through election date 8/1/2000 basic guidelines, review act and answer questions d. Nam, es and addresses of persons through whom performed: Jeanne Schmid Kathy Wilson Labor Information Services, Inc. Labor Information Services, Inc (above address) (above address) 11. Identify (a) Subject employees, groups of employees, and (b) labor organizations: All voting employees in bargaining unit. NOV 2 8 2000 USDOL/FSA D. Verfication and Signature. The person in item 1 above and each of his undersigned authorized officers declares, under penalty of law, that all information in this report, including all attachments incorporated therein or referred to in this report, has been examined by him and is. to the best of his knowledge and belief, true, correct, and complete. Signed: Signed: President Treasurer (If other title, cross out and write in correct title above.) (If other title, cross out and write in correct title above.) City Date State Date City State Malibu 8/30/00 at on: Public reporting burden for this collection of information is estimated to average 20 minutes per response, including the time for reviewing instructions searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Labor Management Standards, Department of Labor, Room N5625, 200 Constitution Avenue, N.W., Wash., D.C. 20210; and to the Office of Management and Budget,