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

FORM LM-20 **AGREEMENT AND ACTIVITIES REPORT**

Form approved Office of Management and Budget No. 1215-0188 Expires 12-31-2010



C- 00568

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.

Person Filing			
2. Name and mailing address (include ZIP Code):	3. Any other address where records necessary to verify this report are kept:		
Name Raymond Rosenbach	Name		
Title Treasurer	Title		
Organization Govt Resources Consultants of America	Organization		
P.O. Box, Bldg., Room No., if any 106	P.O. Box, Bldg., Room No., if any		
Street 253 Commerce Drive	Street		
City Grayslake	City		
State Illinois ZIP Code + 4 60030	State ZIP Code + 4		
4. Date fiscal year ends: 5. Type of person:			
Dec / 15 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: 1 / 8 / 2015		
Name Greg Delancy	, , , , , , , , , , , , , , , , , , , ,		
Organization Taylor Motors	8. Name of person(s) through whom made:		
Trade Name, if any	Name Greg Delancy		
P.O. Box, Bldg., Room No., if any	Name		
Street 5440 Airborne St	Name		
City Fort Cambell	Name		
State Kentucky ZIP Code + 4 42071	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 vit of penalties in the instructions.)			
13. Signed President (If other title, see	14. Signed Treasurer (If other title, see		
Title President U instructions)	Title Treasurer instructions)		
,	01/00/0015		
On 01/28/2015 847-337-3480	On 01/28/2015 847-337-3480		
Date Telephone Number	Date Telephone Number		
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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.):			
To provide professional consulting services as described in Section 11.			
Specific Activities to be Performed			
11. For each activity, separately list in detail the information required (See instructions):			
a. Nature of activity:			
Conduct employee and supervisory group meetings to inform and educate participants about their rights, duties, and responsibilities as they pertain to the National Labor Relations Act and National Labor Relations Board procedures such as secret ballot elections, collective bargaining representation, collective bargaining procedures, unfair labor practices, and union rules and finances.			
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11.b. Period during which performed:	11.c. Extent performed:		
January 8 - 15, 2015	Complete Janua	ry 15, 2015	
11.d. Name and address through whom performed:	Additional Name and addre	ss through whom performed, if any:	
Name Edward D Young	Name		
Organization Govt Resources Consultants of America	Organization		
P.O. Box, Bldg., Room No., if any 106	P.O. Box, Bldg., Room No., if any		
Street 253 Commerce Drive	Street		
City Grayslake	City		
State Illinois ZIP Code + 4 60030	State	ZIP Code + 4	
12.a. Identify subject groups of employees:	12.b. Identify subject labor	organizations:	
Service Unit	American Federation of Government Employees Local 2022		