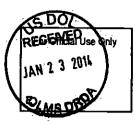
U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-20 AGREEMENT AND ACTIVITIES REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 09-30-2011



This report is mandatory under P.L. 88-257, 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.

539715	
1. File Number: C-U7D	
Person Filing	
2. Name and mailing address (include ZIP Code):	3. Any other address where records necessary to verify this report are kept:
Name Patrick OMara	Name
Title President	Title
Organization OMara & Associates, LLC	Organization
P.O. Box, Bldg., Room No., if any p.O. Box 2624	P.O. Box, Bldg., Room No., if any A97
Street	Street 130 Landing Court
City Novato	City Novato
State California	State California
4. Date fiscal year ends: 5. Type of person:	
Dec	c. Corporation d. Other (Specify): LLC
Nature of Agreement or Arrangement	
6. Full name and address of employer with whom made (include ZIP Code):	7. Date entered into:
Name Jennifer Martin	10 / 29 / 2013
Organization Doss Aviation	8. Name of person(s) through whom made:
Trade Name, if any	Name Jennifer Martin
P.O. Box, Bldg., Room No., if any	Name
Street 3670 Rebecca Lane	Name -
City Colorado Springs	Name
State Colorado ZIP Code + 4 80917	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 Treasurer (If other title, see
Title ( New Court ons)	Title instructions)
on 1/13/14 10120455	On
Date Telephone Number	Date Telephone Number

Files & Street	File Number C-	
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 to provide consultation and give speeches to employees about exercising their right to organize and bargain collectively.		
Specific Activities to be Performed,		
11. For each activity, separately list in detail the information required (See instruct	tions):	
a Nature of activity: To provide consultation and to give speeches to employees regarding their rights to organize and bargain collectively		
11.b. Period during which performed:	11.c. Extent performed:	
various days beginning 11/6/2013	Fully performed	
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:	
Name	Name	
	·	
Organization LRI Consulting Services, Inc.	Organization	
P.O. Box, Bldg., Room No., If any	P.O. Bòx Bidg., Room No.; if any	
Street 7850 S. Elm Place	Street	
City Broken Arrow	City	
State Oklahoma ZIP Code + 4 74011	State ZIP Code + 4	
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:	
Maintenance employees	Association of Machinists	
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