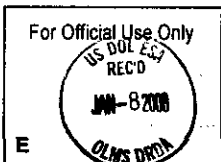


FORM LM-20 AGREEMENT AND ACTIVITIES REPORT



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.

1. File Number: c-630 340924

Person Filing

2. Name and mailing address (include ZIP Code):

Name Olivia Bell
Title Office Manager
Organization Oliver J. Bell & Associates, Inc.
P.O. Box, Bldg., Room No., if any Suite 350, Box 344
Street 12400 Hwy 71 West
City Austin
State Texas ZIP Code + 4 78738

3. Any other address where records necessary to verify this report are kept:

Name
Title
Organization
P.O. Box, Bldg., Room No., if any
Street
City
State ZIP Code + 4

4. Date fiscal year ends:

Dec / 7

5. Type of person:

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):

Name Lous R Franzese
Organization Hertz Corporation
Trade Name, if any
P.O. Box, Bldg., Room No., if any
Street 225 Brae Blvd
City Park Ridge
State New Jersey ZIP Code + 4 07656

7. Date entered into:

11 / 29 / 2007

8. Name of person(s) through whom made:

Name Scott Carroll
Name
Name
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

Title President

President
(If other title, see
instructions)

14. Signed

Title Vice President Finance

Treasurer
(If other title, see
instructions)

On 12/28/2007 512-306-1231

Date

Telephone Number

On 12/28/2007 512-306-1231

Date

Telephone Number

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 meet with employees up to 8 hours per week to discuss their right to choose to to be represented by a union or to not be represented by a union.

Specific Activities to be Performed

11. For each activity, separately list in detail the information required (See instructions):

a. Nature of activity:

Meetings with employees to describe the general workings of the NLRA and their rights under this law as explained in the Basic Guide to the NLRA.

11.b. Period during which performed:

11/29/2007 - 12/19/2007

11.c. Extent performed:

Complete

11.d. Name and address through whom performed:

Name Robert Alberico
 Organization Oliver J. Bell & Associates, Inc.
 P.O. Box, Bldg., Room No., if any
 Street 12400 Hwy 71 West
 City Austin
 State Texas ZIP Code + 4 78738

Additional Name and address through whom performed, if any:

Name
 Organization
 P.O. Box, Bldg., Room No., if any
 Street
 City
 State ZIP Code + 4

12.a. Identify subject groups of employees:

All maintenance employees at the employers facility in Charlotte, North Carolina.

12.b. Identify subject labor organizations: