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. 1245-0003 Expires 08-31-2016



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- 00633	
Person Filing	
2. Name and mailing address (include ZIP Code):	Any other address where records necessary to verify this report are kept:
Name Steven A Beyer	Name
Title Partner	Title
Organization The Crossroads Group Labor Relations Cons	Organization
P.O. Box, Bldg., Room No., if any 505	P.O. Box, Bldg., Room No., if any
Street 63 Via Pico Plaza	Street
City San Clemente	City
State California ▼ ZIP Code + 4 92672	State ZIP Code + 4
Date fiscal year ends:     5. Type of person:	
Dec	c. Corporation d. Other (Specify):
Nature of Agreement or Arrangement	
Full name and address of employer with whom made (include ZIP Code):	7. Date entered into:
Name Sandra Fusman	11 / 6 / 2015
Organization IKO, Pacific, Inc.	8. Name of person(s) through whom made:
Trade Name, if any	Name
P.O. Box, Bldg., Room No., if any	Name
Street 850 W. Front Street	Name
City Sumas	Name
State Washington ZIP Code + 4 98295	Name
	Name
Signatures	
Each of the undersigned declares, under penalty of perjury and other applicable the information contained in any accompanying documents) has been examined true, correct, any complete. (See Section VII on penalties in the instructions.)  13. Signed  President (If other title, see instructions)  Partner	
On [2-0[-2015] (949) 248-0884	On 01/02/16 (818) 999-5632
Date Telephone Number	Date Telephone Number

Filer. Steven Beyer The Crossroads Group Labor Rela	tions Consu 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 an hourly rate of \$350.00, plus reasonable and customary		
expenses (Frefessional Secutors Agreement actached).		
Specific Activities to be Performed		
11. For each activity, separately list in detail the information required (See instruct	ions):	
a. Nature of activity:  To assist the Employer's communication efforts to a		
furnish them with information related to third-part	y representation.	
11.b. Period during which performed:	11.c. Extent performed:	
11/16-11/19/2015	Complete ON GOING	
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:	
Name Steven A Beyer	Name	
Organization The Crossroads Group Labor Relations Consu	Organization	
P.O. Box, Bldg., Room No., if any 505	P.O. Box, Bldg., Room No., if any	
Street 63 Via Pico Plaza	Street	
City San Clemente	City	
State California ZIP Code + 4 92672	State ZIP Code + 4	
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:	
All production, maintenance and shipping employees of the Employer's Sumas, WA manufacturing plant.	N/A	