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,10-31-2013



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: Person Filing 3. Any other address where records necessary to verify this report are kept: 2. Name and mailing address (Include ZIP Code): NO Name SANFORD RUDNICK LABOR CONSULTANT Title H. SANFORD RUDNICK & ASSOC Organization P.O. Box, Bldg., Room No., if any P.O. Box, Bldg., Room No., if any 1200 MT. DIABLO BLVD. S105 Street WALNUT CREEK, CA 94596 City 94596 ZIP Code + 4 ZIP Code + 4 CA. State State 4. Date fiscal year ends: 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); 7. Date entered Into: 10/08/13 POISINE !! Organization ATLAS Roll-OFF CORP. 8. Name of person(s) through whom made: PolsiNElli Trade Name, If any ATLAS Roll-OFF CORP. Roll-OFF CORP. P.O. Box, Bidg., Room No., if any Street 95-11 147 Place Name JAMAICA NY Name ZIP Code +4 1/435 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 updersigned's knowledge and belief, true, correct, and complete (See Section Vison penalties in the instructions.) 13. Signed President 14. Signed Treasurer (If other title, see (If other title, see President Instructions) instructions)

Form LM-20 (2003)

| FILER SANFORD RUDNICK   | File Number C- 37/  |
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| 9. Check the appropriate box to indicate whether an object of the activities  | undertaken, ls directly or Indirectly:  |
| a. To persuade employees to exercise or not to exercise, or persua collectively through representatives of their own choosing.      | de employees as to the manner of exercising, the right to organize and bargain  |
| b. To supply an employer with information concerning the activities such employer, except information for use solely in conjunction | of employees or a labor organization in connection with a labor dispute involving with an administrative or arbitral proceeding or a criminal or civil judicial proceeding: |
| 10. Terms and conditions (Explain in detail; see instructions. Written agreer   | ments must be attached.):   |
| SEE ATTACHED RETAINER   |   |
| SEG WITHOUGH VERWINGN   |   |
|   |   |
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|   |   |
| Specific Activities to be Performed   |   |
| 11. For each activity, separately list in detail the information required (See In   | istructions):   |
| a. Nature of activity:  |   |
| Discussion of NLRB rules and re<br>vote for or against a Union dur  | gulations concerning how employees can<br>ing an election.  |
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|   |   |
|   |   |
| 1.1.b. Period during which performed: 12/13/13  | 11.c. Extent performed: COMPLETED   |
| 11.d. Name and address through whom performed:  | Additional Name and address through whom performed, if any:   |
| Name TOM POSINEUI   | Name  |

| Completed   |
|---|
| Additional Name and address through whom performed, if any: |
| Name  |
| Organization  |
| P.O. Box, Bidg., Room No., If any                           |
| Street  |
| City:   |
| State ZIP Code + 4  |
| 12.b. Identify subject labor organizations:                 |
| United Plan<br>Production Workers<br>175                    |
|   |