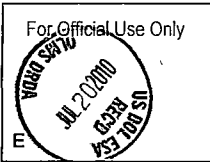


FORM LM-20

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- 644

432405

Person Filing

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

Name Lloyd Peterson

Title Senior Labor Law Consultant

Organization Employers Association, Inc.

P.O. Box, Bldg., Room No., if any

Street 9805 45th Avenue North

City Plymouth

State Minnesota

ZIP Code + 4 55442

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 / 31

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 Michael Baker

Organization Minnesota Chemical Co.

Trade Name, if any

P.O. Box, Bldg., Room No., if any

Street 2285 Hampten Avenue

City St. Paul

State Minnesota

ZIP Code + 4 55114

7. Date entered into:

2 / 1 / 2010

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

Name Michael Baker

Name

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, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See Section VII on penalties in the instructions.)

13. Signed

Joe Stark

President
(If other title, see
instructions)

Title President

14. Signed

Geri Erickson

Treasurer
(If other title, see
instructions)

Title Treasurer

On

6/3/10

Date

763-253-9139

Telephone Number

On

6/7/10

Date

763 253 9120

Telephone Number

Filer: Lloyd Peterson Employers Association, Inc.

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.):

Explain to company employees what their rights are and what the monetary costs to employees could be for employees who may want to be involved with a labor organization.

Specific Activities to be Performed

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

a. Nature of activity:

Conduct one (1) meeting with employees to explain the nature of what a labor union is and the costs involved.

11.b. Period during which performed:

One (1) meeting

11.c. Extent performed:

Conducted one (1) meeting.

11.d. Name and address through whom performed:

Name Lloyd Peterson
Organization Employers Association, Inc.
P.O. Box, Bldg., Room No., if any
Street 9805 45th Avenue North
City Plymouth
State Minnesota ZIP Code + 4 55442

Additional Name and address through whom performed, if any:

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

12.a. Identify subject groups of employees:

Warehouse/Service Employees

12.b. Identify subject labor organizations:

Teamsters Union