U.S. D artment 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 11-30-2006



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- 00322 **Person Filing** 2. Name and mailing address (include ZIP Code): 3. Any other address where records necessary to verify this report are kept: Name Name A List Peter Title Title Founder & CEO Organization Organization Kulture Consulting, LLC P.O. Box, Bldg., Room No., if any P.O. Box, Bldg., Room No., if any Street Street 759 Bloomfield Avenue, No. 301 City City West Caldwell ZIP Code + 4 State New Jersey ZIP Code + 4 07006 State 5. Type of person: 4. Date fiscal year ends: Corporation d. Other (Specify): LLC Dec 10 Individual b. Partnership Nature of Agreement or Arrangement 6. Full name and address of employer with whom made (include ZIP Code): 7. Date entered into: 20 2010 Name 8. Name of person(s) through whom made: Organization Penn National Gaming, Inc. Name Gene Clark Trade Name, if any Charles Town Races & Slots Name P.O. Box, Bldg., Room No., if any Street P.O. Box 551 Name City Charles Town Name ZIP Code + 4 State West Virginia 25414 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	M. Ulya	nder	Treasurer (If other title, see		
Title Other (Specify)	instructions)	Title	Other (Specify)		instructions)		
Founder & CEO			Manager of Administration				
On 1.19. 2011 973-403-9901		On	1-19-2011	973-403-9901			
Date Telephone Numl	рег		Date	Telephone Numbe	er		
					:		

	,					
Filer: Peter List Kulture Consulting, LLC		File Number C- 00322				
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.):  Company was employed on a per hour basis with no formal written agreement relative to duration or amount of hours to be performed. Fee schedule based on a per hour rate.						
Specific Activities to be Performed						
11. For each activity, separately list in detail the information required (See instructions):						
a. Nature of activity:						
Conducted meetings with employees to discuss unions and labor relations.						
11 h. Doriod during which porformed:	11 a Extent performed:					
11.b. Period during which performed:  9/10 - 10/10	11.c. Extent performed: 9/10					
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:					
Name Joanne Gitto Davis	Name					
Organization Kulture Consulting, LLC						
	Organization					
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any					
Street 759 Bloomfield Avenue, No. 301	Street					
City West Caldwell	City					
State New Jersey ZIP Code + 4 07006	State	ZIP Code + 4				
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:					
NO PETITION	NO PETITION					