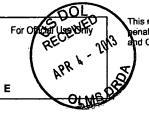
U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

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): Joe Mieluchowski Name LABOI Relations Consultant Title Organization Organization P.O. Box, Bldg., Room No., if any P.O. Box, Bldg., Room No., if any Street 47 E. Jongthan Ct. Street City Kennett Square
State DA ZIP Code + 4 19348 City State ZIP Code + 4 4. Date fiscal year ends: 5. Type of person: a. Individual b. Partnership c. Corporation d. Other (Specify): 12/3/ **Nature of Agreement or Arrangement** 7. Date entered into: 6. Full name and address of employer with whom made (include ZIP Code): 2/14/13 8. Name of person(s) through whom made: Name C. I. Fraser Trade Name, if any Name P.O. Box, Bldg., Room No., if any Street 65 Court St. Name ! Newton Name | ZIP Code + 4 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 socuments) 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 of penalties in the instructions.) 14. Signed 13. Signed President Treasurer (If other title, see (If other title, see CONSULTANT instructions) instructions) Title

Telephone Number

Date

Filer:	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	
ON-site CAMPAIGN MANAgement For A daily consultant Fee plus expenses	
Specific Activities to be Performed	
11. For each activity, separately list in detail the information required (See instructions): a. Nature of activity:	
Persuade employees of Fraser Engineering to make an educated decision on voting yes vor no to	
union representation.	
11.b. Period during which performed:	11.c. Extent performed:
February 2013 - March 2013	Additional Name and address through whom performed, if any:
11.d. Name and address through whom performed:	Name
Name Jue Mielychoushi	principles of the second secon
Organization	Organization
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any
Street 47 E. JONATHAN CT.	Street
City Kennett Square	City :
State PA ZIP Code + 4 /93 48	State ZIP Code + 4
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:
Mechanical pipe Fitters	UA. LOCA/537
The state of the s	