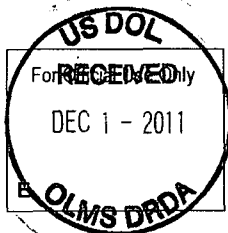


FORM LM-20

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.

470195

1. File Number: C- 00691

Person Filing	
2. Name and mailing address (include ZIP Code): Name Carina Hunt Title President Organization C. Hunt Management Consulting Inc P.O. Box, Bldg., Room No., if any Street 701 love henry court City southlake State Texas ZIP Code + 4 76092	3. Any other address where records necessary to verify this report are kept: Name Phillip Wilson Title President Organization Labor Relations Institute P.O. Box, Bldg., Room No., if any Street 7850 South Elm Place Suite E City Broken Arrow State Oklahoma ZIP Code + 4 74011
4. Date fiscal year ends: Dec / 11	5. Type of person: a. <input type="checkbox"/> Individual b. <input type="checkbox"/> Partnership c. <input checked="" type="checkbox"/> Corporation d. <input type="checkbox"/> Other (Specify):

Nature of Agreement or Arrangement	
6. Full name and address of employer with whom made (include ZIP Code): Name Bob Dawley Organization Bob's Discount Furniture Trade Name, if any P.O. Box, Bldg., Room No., if any 428 Tolland Street Turnpike City Manchester State Connecticut ZIP Code + 4 06040	7. Date entered into: 10 / 31 / 2011 8. Name of person(s) through whom made: Name 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 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 [Signature] President
(If other title, see instructions)
Title President

14. Signed _____ Treasurer
(If other title, see instructions)
Title Treasurer

On 11/22/2011 714-310-4080
Date Telephone Number

On _____
Date Telephone Number

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.):

To provide direct employee education regarding employee rights under the Act.
The procedures for union elections and the process of collective bargaining.

Specific Activities to be Performed

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

a. Nature of activity:

Education of employees regarding their section 7 rights under the national labor relations act

11.b. Period during which performed:

Various days beginning 11/01/2011

11.c. Extent performed:

11.d. Name and address through whom performed:

Name Phillip Wilson

Organization Labor Realtions Institute

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

Street 7850 South Elm Place Suite E

City Broken Arrow

State Oklahoma ZIP Code + 4 74011

Additional Name and address through whom performed, if any:

Name

Organization

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

Street

City

State ZIP Code + 4

12.a. Identify subject groups of employees:

Commission Sales Associates

12.b. Identify subject labor organizations:

United Food and Commercial Workers