U.S. Department of Labor Office of Labor-Management

FORM LM-20 AGREEMENT AND ACTIVITIES REPORT

Form approved
Office of Management
and Budget
No. 1245-0003
Expires 08-31-2016

Washington, DC 2010 RECEIVED
For Official Use Only 711s To

his report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil enalties as provided by 29 U.S.C. 439 or 440. Required of persons, including Labor Relations Consultants and Other Individuals nd Organizations, Under Section 203(b) of the Labor-Management Reporting and Disclosure Act of 1959, as amended. (LMRDA)

625489

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number: C- 66578		
Person Filling		
Name and mailing address (include ZIP Code):	Any other address where records necessary to verify this report are kept:	
Name	Name	
Title	Title	
Organization Sparta, Inc	Organization	
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any	
Street 8086 South Yale Ave suite 225	Street	
City Tulsa	City	
State Oklahoma ZIP Code + 4 74136	State ZIP Code + 4	
4. Date fiscal year ends: 5. Type of person:		
Dec / 31 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: 6 / 8 / 2016	
Name		
Organization Great Dane Trailer	8. Name of person(s) through whom made:	
Trade Name, if any	Name Tom Sieniawski	
P.O. Box, Bldg., Room No., if any	Name	
Street 207 Progress Rd	Name	
City Elysburg	Name	
State Pennsylvania ZIP Code + 4 17824	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 instructions) Treasurer (If other title, see instructions)		
On 06/30/2016 800-555-7509 Date Telephone Number	On 06/30/2016 800-555-7509 Telephone Number (

~	*.
6 -	D.
-	

Filer: Sparta, Inc	File Number C- 66578
Check the appropriate box to indicate whether an object of the activities undertaken, is directly or indirectly.	y:
a. To persuade employees to exercise or not to exercise, or persuade employees as to the manner of collectively through representatives of their own choosing.	of exercising, the right to organize and bargain
b. To supply an employer with information concerning the activities of employees or a labor organizat such employer, except information for use solely in conjunction with an administrative or arbitral process.	
10. Terms and conditions (Explain in detail; see instructions. Written agreements must be attached.):	

Specific Activities to be Performed

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

Engaged to communicate with employees so they can make an informed decision reguarding exercising their rights to organize and bargin collectively.

11.b. Period during which performed:	11.c. Extent performed:	
Beginning on or about 6/24/2016	Ongoing	
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:	
Name Christian B Teague	Name Zak Langren	
Organization	Organization	
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any	
Street 416 E. B. Street Apt B	Street 14520 W. Mockingbird	
City Jenks	City Sand Springs	
State Oklahoma ZIP Code + 4 74037	State Oklahoma ZIP Code + 4 74063	
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:	
All employees eligible to vote in the bargaining unit		
1		