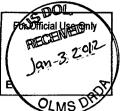
U.S.) Department of Labor Office of Labor-Management Standards Washington, DC 20210

## 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.

471253

1. File Number:	
Person Filing	
Name and mailing address (include ZIP Code):	Any other address where records necessary to verify this report are kept:
Name Joseph Brock	Name
Title President	Title
Organization Rast coast Labor Relations	Organization
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any
Street 151 Forge rd	Street
City Delran	City
State New Jersey	State ZIP Code + 4
Date fiscal year ends:     5. Type of person:	
Dec 7 / 31 a. Individual b. Partnership	c. Corporation d. X Other (Specify):
Nature of Agreement or Arrangement	
6. Full name and address of employer with whom made (include ZIP Code):	7. Date entered into: 11 / 29 / 2011
Name	8. Name of person(s) through whom made:
Organization Ipsco Tubular	Name Thomas Kellner
Trade Name, if any	Name
P.O. Box, Bldg., Room No., if any	
Street 6403 sixth avenue	Name
City Koppel	Name
State Pennsylvania	Name
Signatures	
Each of the undersigned declares, under penalty of perjury and other applicable the information contained in any accompanying documents) has been examined true, correct, and complete. (See Section VII on penalties in the instructions.)	
13. Signed President (If other title, see	14. Signed Treasurer (If other title, see
Title President (instructions)	Title d instructions)
On 12/17/2011 215-840-2088  Date Telephone Number	On



Liet And Andrew	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.	
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.):  Verbal agreement to provide consultation and give speeches to employees regarding their right to organize and collectively bargain. Terms are 187.50 plus expenses	
Specific Activities to be Performed	
11. For each activity, separately list in detail the information required (See instructions):	
a. Nature of activity: Give speeches to employees regarding their rights to organize and collectively bargain	
11.b. Period during which performed: various days since 11/29	11.c. Extent performed: fully performed
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:
Name	Name
Organization Labor Relations Institute	Organization
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any
Street 7850 South Blm Place	Street
City Broken Arrow	City
State Oklahoma C ZIP Code + 4 74013	State ZIP Code + 4
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:
Various employees	pre-petition