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 03-31-2019

For Official Use Only Ε

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.

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1. File Number: C- 672-57				
Person Filing  2. Name and mailing address (include ZIP Code):	Any other address where records necessary to verify this report are kept:			
-	Name			
Name Joseph Brock				
Title President	Titie			
Organization Reliant Labor Consultants	Organization			
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any			
Street 10108 Fehlberg Court	Street			
City St John	City			
State Indiana ZIP Code + 4 46373	State ZIP Code + 4			
4. Date fiscal year ends: 5. Type of person:				
Dec 🔽 / 17 a. Individual b. Partnership	c. X 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: 9 / 20 / 2017			
Name Eric Pifer				
Organization Save Mart	8. Name of person(s) through whom made:			
Trade Name, if any	Name			
P.O. Box, Bldg., Room No., if any	Name			
Street 1800 Standiford Ave	Name			
City Modesto	Name			
State California ZIP Code + 4 95352	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 instructions)	penalties of law, that all of the information submitted in this report (including			
On 12-3-17 215-840-2088  Date Telephone Number	On Telephone Number			
Form I M 20 (2003)	Page 1 of 2			

Filer: Joseph	Brock	Reliant Labor Consultants	File Number C-	67257

9. Check the appropriate box to indicate whether an o	bject of the activities undertaken,	is directly or indirectly
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10. Terms and conditions (Explain in detail; see instructions. Written agreements must be attached.):

- 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.

No written agreements. We were engaged by Save Mar that they could make an informed decision on whethe	t to educate employees on all aspects of unions so or not to support a union.
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Specific Activities to be Performed	
11. For each activity, separately list in detail the information required (See instruct	ions):
a. Nature of activity:	and the commence of the commen
Held meetings informing employees on all aspects of decision on whether or not to support a union	unions so that they could make an informed
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11.b. Period during which performed:	11.c. Extent performed:
starting 9/20/17	ongoing
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:
Name Byron J Clay	Name Rebecca Smith
Organization BJC & Associates	Organization Rock Creek Consulting
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any
Street 10108 Fehlberg Court	Street 554 Mahard Dr
City St John	City Twin Falls
State Indiana ZIP Code + 4 46373	State Idaho ZIP Code + 4 83301
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:
Truck Drivers	Teamsters

Filer: Joseph Brock Reliant Labor Consultants	File Number C- 6 / 2 7			
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Name Jason Greer	Name			
Organization Greer Consulting Inc	Organization			
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P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any			
Street 4301 Hawkins Ridge Dr	Street			
City St Louis	City			
State Missouri ZIP Code + 4 63129	State ZIP Code + 4			
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