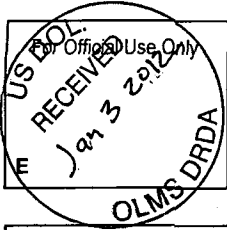


# FORM LM-20

## 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.

471256

1. File Number: C-736

### Person Filing

2. Name and mailing address (include ZIP Code):

Name DAVID M NYSTROM

Title CEO

Organization LABOR CONSULTING GROUP, LLC

P.O. Box, Bldg., Room No., if any 535 BRISWALD

Street SUITE 111-237

City DETROIT

State MI ZIP Code + 4 48226

3. Any other address where records necessary to verify this report are kept:

Name SHADE H ZEBIG

Title PRESIDENT

Organization LABOR CONSULTING GROUP, LLC

P.O. Box, Bldg., Room No., if any 535 BRISWALD

Street SUITE 111-237

City DETROIT

State MI ZIP Code + 4 48226

4. Date fiscal year ends:

12/31

5. Type of person:

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):

Name DAN STRONG - CEO

Organization SUPER SERVICE, LLC

Trade Name, if any

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

Street 6000 CLAY AVE SW

City GRAND RAPIDS

State MI ZIP Code + 4 49548

7. Date entered into:

11/16/2011

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

President  
(If other title, see instructions)

Title President

14. Signed

Treasurer  
(If other title, see instructions)

Title CEO

On 12/16/11

877-890-8782  
Telephone Number

On 12/16/11

877-890-8782  
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.):

persuade employees - 14 Mechanics  
To VOTE No Union on Election Day  
Set For 11/16/11

Specific Activities to be Performed

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

a. Nature of activity:

Meet employees in small groups  
and supply LAWFUL INFORMATION TO  
persuade employees To VOTE No Union

11.b. Period during which performed:

11-16-11 - 12-16-11

11.c. Extent performed:

11.d. Name and address through whom performed:

Name DAVID M NYSTROM  
Organization LABOR CONSULTING GROUP INC  
P.O. Box, Bldg., Room No., if any  
Street 535 BRISWOLD, Suite  
City DETROIT 14237  
State MI ZIP Code + 4 48226

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:

14 Mechanics

12.b. Identify subject labor organizations:

Teamsters Local  
406  
GRAND RAPIDS, MI  
(IBT WITHDREW PETITION)