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. 1215-0188
Expires 09-30-2011



C- 00525

1. File Number:

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.

| Person Filing | | | | |
|---|------------------------------------|--|--|--|
| Name and mailing address (include ZIP Code): | | 3. Any other address where records necessary to verify this report are kept: | | |
| Name | | Name | | |
| Title | | Title | | |
| Organization LRI Consulting Services, Inc. | | Organization | | |
| P.O. Box, Bldg., Room No., if any | | P.O. Box, Bldg., Room No., if any | | |
| Street 7850 S Elm Place, Sui | te E | Street | | |
| City Broken Arrow | | City | | |
| State Oklahoma | ZIP Code + 4 74011 | 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 Arrangemen | t | | | |
| 6. Full name and address of employer w | rith whom made (include ZIP Code): | 7. Date entered into: 10 / 5 / 2009 | | |
| Name | | 8. Name of person(s) through whom made: | | |
| Organization York Linings International | | | | |
| Trade Name, if any | | Name Lisa Todd | | |
| P.O. Box, Bldg., Room No., if any | | Name | | |
| Street 18600 Media Drive | | Name | | |
| City Robertsdale | | Name | | |
| State Alabama | ZIP Code + 4 36567 | Name | | |
| Signatures | | | | |
| Each of the undersigned deplaces, 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 doorgents) has been examined by the signatory and is, to the boot of the undersigned's knowledge and belief, true, correct, and complete. (See Section VII on penalties in the instructions.) | | | | |
| 13. Signed Jacob 1 | President (If other title, see | 14. Signed III Treasurer (If other title, see | | |
| Title President | instructions) | Title Treasurer instructions) | | |
| | | | | |
| On 11/06/2009 91 | 8-455-9995 | On 11/06/2009 918-455-9995 | | |
| Date | Telephone Number | Date Telephone Number | | |

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| Filer: | LRI Consulting Services, Inc. | File Number C - 00525 |
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| 9. Check th | ne appropriate box to indicate whether an object of the activities undertaken, | is directly or indirectly: |
| | To persuade employees to exercise or not to exercise, or persuade employe collectively through representatives of their own choosing. To supply an employer with information concerning the activities of employee such employer, except information for use solely in conjunction with an adm | |
| | | |
| 10. Terms | and conditions (Explain in detail; see instructions. Written agreements must be | pe attached.): |
| | nent to provide consultation, to give speechesto e se and bargain collectively. | employees about exercising their right to |

| Specific | Activities | to be | Performed |
|----------|------------|-------|-----------|

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

Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

| 11.b. Period during which performed: | 11.c. Extent performed: | | |
|--|---|--|--|
| 10/5/09 - 10/6/09 | fully performed | | |
| 11.d. Name and address through whom performed: | Additional Name and address through whom performed, if any: | | |
| Name Mike Rosado | Name | | |
| Organization M. Rosado Management Consultants, LLC | Organization | | |
| P.O. Box, Bldg., Room No., if any | P.O. Box, Bldg., Room No., if any | | |
| Street 96 Linwood Plaza, Suite 103 | Street | | |
| City Fort Lee | City | | |
| State New Jersey ZIP Code + 4 07024 | State ZIP Code + 4 | | |
| 12.a. Identify subject groups of employees: | 12.b. Identify subject labor organizations: | | |
| General Laborers | Laborers | | |
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AGREEMENT FOR CONSULTING SERVICES

TO:

Lisa Todd

York Linings International 18600 Media Drive Robertsdale, AL 36567

DATE:

November 6, 2009

PROPOSED INTERVENTION:

LRI Consulting Services, Inc. will provide consulting services to assist York Linings in communicating factual and legally accurate information to eligible voters in NLRB-conducted election to enable voters to make fully informed choices in voting.

TIMING:

The project will begin on or about 10/5/09 and conclude on or about 10/6/09.

TERMS AND CONDITIONS:

Fees: The fee for this project is \$375.00 per hour plus travel expenses.

Payment Terms: A \$5000 deposit is required upon acceptance of this proposal with the balance due within 30 days or prior to the date of your election, whichever is first. You agree and acknowledge that failure to pay fees or expenses associated with this project under these terms will result in reassignment of the consultant(s) and a penalty of 2% per month until all outstanding invoices are paid in full.

Expenses: Expenses will be billed as actually incurred and are due on presentation of the invoice. Reasonable business expenses include, but are not limited to, transportation (air, rental car, taxi, etc.), lodging, food, and costs for campaign communication materials.

You further acknowledge that no representation by LRICS or its representatives were relied on by you or any member of your company in entering this agreement, and that this document represents the full understanding of the parties. Your deposit, in the absence of your signature below, indicates your acceptance of this project and the terms and conditions as stated herein.

ACCEPTANCE:

We accept the Agreement and terms described above:

For LRI Consulting Services, Inc.

AOINI

For Company Name

Phillip B. Wilson

President - General Counsel

DATE: November 6, 2009

Name: Lisa Todd

Title: Secretary - Treasurer

DATE: October 5, 2009

Suite E