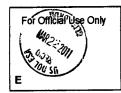


FORM LM-20 AGREEMENT AND ACTIVITIES REPORT

Form approved
Office of Management
and Budget
No. 1245-0003
Expires 10-31-2013

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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.

c 72 1. File Number: Person Filing 3. Any other address where records necessary to verify this report are kept: 2. Name and mailing address (include ZIP Code): Name COX DAVID Name Title Title Organization Organization P.O. Box, Bldg., Room No., if any P.O. Box, Bldg., Room No., if any 10021 LEGEND DRIVE Street ROCKLIN City Citv ⊘ ZIP Code + 4 State 5. Type of person: 4. Date fiscal year ends: a. X Individual b. Partnership c. Corporation d. Other (Specify): Dec 0 / 31 **Nature of Agreement or Arrangement** 7. Date entered into: 6. Full name and address of employer with whom made (include ZIP Code): 8. Name of person(s) through whom made: Name CALPINE - THE GEYSERS Organization The GOOT Name Josh Trade Name, if any Name P.O. Box, Bldg., Room No., if any So West Sin fermedo ST Name SAN JUSS CA DIZIP Code +4 95113 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.) President Treasurer (If other title, see (If other title, see instructions) instructions) On Telephone Number Date

Piler DAVID COX		File Number C-
9. Check the appropriate box to indicate whether an object of the activities undertaken, is directly or indirectly: Output		
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.):		
OPAL Agreneut for Services Revoleted on project completion:		
Specific Activities to be Performed		
11. For each activity, separately list in detail the information required (See instructions): a. Nature of activity: HET WITH ENPLOYEES AT THE GUSSERS to PROCEEDING PEPPERSON IN THE CONFECTION OF PEPPERSON IN THE CONFECTION OF		
11.b. Period during which performed: OCT 14 - NOV 12, 2008	11.c. Extent performed:	vdecl
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:	
Name DAVIA COX	Name	
Organization	Organization	
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any	
Street 40021 LEGEOR RY	Street	
City ROCKIN	City	
State CA	State	Ø ZIP Code + 4
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:	
EMPloyees in NLRB CASE 20-RC-18202		