## Agreement and Activities Rep ---

# U.S. Department Labor

Office of Labor-Managemer. undards



This report is mandatory under P.L. 86-257 as amended. Failure to comply may result in criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 439, 440.

OMB No. 1214-0001 12/31/86

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).

File No. C. 376

Under Section 203(b) of the Labor-Manage	ment reporting and disclosure	Act of 1959, as afferided (Livini	Ay.	370		
A. Person Filing						
1. Name and mailing address (include ZI	P code):	2. Any other address wher	e records necessary to verify this	report are kept:		
Berens & Tate, P.C.						
10050 Regency Circle, Suite 400		n/a				
Omaha, NE 68114		Society Street				
A 18						
3. Date fiscal year ends: 4. 1	Type of person:	v				
1/31/2002	a. 🗆 Individual b. 🗆 F	Partnership c. 🖄 Corporat	ion d.   Other (Specify):			
B. Nature of Agreement or Arrangem	ent .					
5. Full name and address of employer with		ode): 6. Date enter	ed into:			
Brainerd Medical Center		On or	about October 19, 20	001		
2024 S. Sixth Street			7. Names of persons through whom made:			
Brainerd, MN 56401		Cı	rt Nielsen			
Check the appropriate box to indicate	whether an object of the activ					
a. 🖾 To persuade employees to exe				anize and bargain		
collectively through representa			,			
<ul> <li>To supply an employer with info ing such employer, except info ceeding.</li> </ul>	ormation concerning the active rmation for use solely in conju	vities of employees or a labor orga unction with an administrative or a	nization in connection with a laboritral proceeding or a criminal or	or dispute involv- r civil judicial pro-		
9. Terms and conditions (Explain in detail	l; see Part B-9 of Instructions	):				
When performing	g general legal serv	ices for the employer,	a member of Berens	&		
Tate was involve	d in activities which	may be considered p	ersuader activities.			
C. Specific Activities to be Performed	1					
10. For each activity, separately list in de	etail the information required (	See Part C-10 of instructions):				
a. Nature of activity: Provid	e employees with a	eneral information on	unionization during			
			es and answer question	ons		
, ,	alf of the employer.					
011 5011	an or are employed.					
<ul> <li>b. Period during which performed:</li> </ul>	c. Extent p	erformed:				
During organizing activi	tv	n/a				
d. Names and addresses of persons						
1 · · · · · · · · · · · · · · · · · · ·	7	0 0 11 1005	O Daniero Cinala Cui	to 100		
Michaelle L. Behrns, Na	incy A. Wood and I	Jonna S. Colley, 1005	J Regency Circle, Sui	ite 400,		
Omaha, NE 68114						
<ol> <li>Identify (a) Subject employees, group</li> </ol>	os of employees, and (b) labor	rorganizations:	DEGEOV	[ [ ]		
Employees of Brainerd	Medical Center		110	2 11011		
			JUN 2 5 200	K L		
D. Verification and Signature. The per formation in its report, including all atta knowledge and elief, true, correct, and of	chments incorporated therei	h of his undersigned authorized on or referred to in this report, has	fficers declares, under penalty of been examined by him and is, the state of the st	of law, that all in- to the best of his		
Signed: Vo. CR		Signed:		Troopurs		
(If other title, cross jut and write in correct	President title above \		write in correct title above.)	Treasure		
(II other title, cross of and white in confec	A LING GOOTS./	( other true, those out and	mile and outlook title above.			
City	State Date	City	State	Date		

### Agreement and Activities Rep. -

## U.S. Departmen Labor

Office of Labor-Manageme, andards



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OMB No. 1214-0001 12/31/86

Required of Persons: including Labor Relations Consultants and Other Individuals and Organizations,

Under Section 203(b) of the Labor-Manager					
A. Person Filing					
Berens & Tate, P.C. 10050 Regency Circle, S Omaha, NE 68114		Any other address where records necessary to verify this report are kept:  n/a			
3. Date fiscal year ends: 4. T	ype of person:				
1/31/2002	. 🗆 Individual b. 🗆 P	artnership c. 🛣 Corporation d. 🗆 Other (Specify):			
B. Nature of Agreement or Arrangeme	ent				
5. Full name and address of employer with		de): 6. Date entered into:			
Lampert Yards, Inc.		On or about November 14, 2001			
1850 Como Ave., P.O. Box 6	4076	7. Names of persons through whom made:			
St. Paul, MN 55164		Barb Hojer			
8. Check the appropriate box to indicate	whether an object of the activ	itles undertaken, is directly or indirectly:			
<ul> <li>a. X To persuade employees to exercise collectively through representa</li> </ul>		suade employees as to the manner of exercising, the right to organize and bargain			
b.   To supply an employer with info	ermation concerning the activi	ities of employees or a labor organization in connection with a labor dispute involv- nction with an administrative or arbitral proceeding or a criminal or civil judicial pro-			
9. Terms and conditions (Explain in detail	; see Part B-9 of instructions):				
		ces for the employer, a member of Berens & may be considered persuader activities.			
C. Specific Activities to be Performed					
10. For each activity, separately list in de					
		eneral information on unionization during			
		tor employer speeches and answer questions			
on beha	alf of the employer.				
b. Period during which performed:	c. Extent pe	erformed:			
During organizing activit	v	n/a			
During organizing activity n/a  d. Names and addresses of persons through whom performed:					
	-	0: 1 0 1 100 0 1 NE 20444			
Mark McQueen & Jeryly	n R. Bridgeford,100	050 Regency Circle, Suite 400, Omaha, NE 68114			
11. Identify (a) Subject employees, group	s of employees, and (b) labor	organizations:			
Employees of Lampert \	∕ards, Inc.	JUN 2 5 2002			
Employees of Lampert \ D. Verification and Signature. The person	ards, Inc.				
Employees of Lampert \ D. Verification and Signature. The personnation in this report, including all attact	ards, Inc.	JUN 2 5 2002  JUN 2 5 2002  of his undersigned authorized officers declares, Under penalty of law, that all interested to in this report, has been examined by him and it, to the best of his Signed:			
D. Verification and Signature. The personnation in this report, including all attacknowledge and belief, true, correct, and c	Yards, Inc. son in Item 1 above and each chments incorporated therein omplete.  Presid	JUN 2 5 2002  JUN 2 5 2002  of his undersigned authorized officers declares, Under penalty of law, that all interest of his report, has been examined by him and so, to the best of his Signed:			

# Agreement and Activities Repre-

City Omaha

at:

### U.S. Department Labor

Office of Labor-Managemei. . . andards



This report is mandatory under P.L. 86-257 as amended. Failure to comply may result in criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 439, 440. OMB No. 1214-0001 12/31/86

Required of Persons, including Labor Relations Consultants and Other Individuals and Organizations,

Under Section 203(b) of the	Labor-Management Reporting and Disclos	sure Act of 1959, as	amended (LMRDA).	File No.   C. 376
A. Person Filing				
1. Name and mailing addr Berens & Tate 10050 Regend Omaha, NE 68	e, P.C. cy Circle, Suite 400	2. Any other	er address where records	necessary to verify this report are kept:
3. Date fiscal year ends: 1/31/2002	4. Type of person:  a. □ Individual b. □	Partnership o	c. 🛎 Corporation d.	□ Other (Specify):
B. Nature of Agreement	t or Arrangement			
	of employer with whom made (include ZIP	code):	6. Date entered into:	
L.S.I., Inc.			On or about	May 30, 2001
39210 221st Stree	et, P.O. Box 159		7. Names of persons th	
Alpena, SD 5731	2		Terry Sm	20/10 × - 40 Line 20 20 20 20 20 20 20 20 20 20 20 20 20
Check the appropriate I	box to indicate whether an object of the ac	ctivities undertaken.		
collectively thro	ployees to exercise or not to exercise, or ugh representatives of their own choosing ployer with information concerning the ac- rer, except information for use solely in co	). ctivities of employee	s or a labor organization ir	n connection with a labor dispute involv-
	Explain in detail; see Part B-9 of Instruction	ns):		
	performing general legal ser as involved in activities whic			
C. Specific Activities to				
	arately list in detail the information require			
a. Nature of activity:	Provide employees with employee meetings. Mo on behalf of the employe	nitor employe		
b. Period during which	performed: c. Exten	t performed:		
During organiz	ring activity	n/a		
	ses of persons through whom performed:			
	en & Shane M. Keith,10050	Regency Ci	rcle, Suite 400, C	)maha, NE 68114
11. Identify (a) Subject em	L.S.I., Inc.	oor organizations:		A STATE OF THE STA
	ature. The person in item 1 above and ex- cluding all attachments incorporated their correct, and complete.			
Signed:	= D	Signed:		
· Kuli C	- Brews Pre	esident		Treasure
(If other title, cross out and	write in correct title above.)	(If other title	, cross out and write in co	rrect title above.)

Date

City

on:

Date

## Agreement and Activities Rep

(If other title, cross out and write in correct title above.)

City Omaha

at:

## U.S. Department Labor

Office of Labor-Managemen. ...andards



This report is mandatory under P.L. 86-257 as amended. Failure to comply may result in criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 439, 440.

OMB No. 1214-0001 12/31/86

	Labor-Management Reporting		of 1959, as amended (LMRDA).	File No.   C. 376
A. Person Filing				
	Name and mailing address (include ZIP code):		Any other address where records ne	ecessary to verify this report are kept:
Berens & Tate, P.C.		n/a		
	y Circle, Suite 400		II/a	
Omaha, NE 68	)   14			
<ol><li>Date fiscal year ends:</li></ol>	4. Type of person:			
1/31/2002	a. 🗆 Individua	b. D Parti	ership c. 🔀 Corporation d. I	□ Other (Specify):
B. Nature of Agreement	or Arrangement			
	of employer with whom made (	include ZIP code)	6. Date entered into:	
Barilla America	In .			October 23, 2001
3311 E. Lincoln W	vay		<ol><li>Names of persons thro</li></ol>	ugh whom made:
Ames, IA 50010			Gretchen H	Houser
			undertaken, is directly or indirectly:	
	ployees to exercise or not to e ugh representatives of their ow		de employees as to the manner of exerci	sing, the right to organize and bargain
<ul> <li>b.     To supply an employed ing such employed ceeding.</li> </ul>	ployer with Information concer er, except information for use	rning the activities solely in conjuncti	of employees or a labor organization in con with an administrative or arbitral proce	connection with a labor dispute involv- seding or a criminal or civil judicial pro-
	explain in detail; see Part B-9 o	f instructions):		
o. Tomio and conditions (2	spian in dotain, ood rain o o	mondonone,.		
When p	erforming general le	egal service	for the employer, a memb	ber of Berens &
Tate wa	s involved in activiti	es which ma	ay be considered persuade	er activities.
C. Specific Activities to				
	rately list in detail the informat			
a. Nature of activity:			eral information on unionization	
employee meetings. Monito			employer speeches and a	inswer questions
	on behalf of the e	mployer.		
b. Period during which	performed:	c. Extent perfor	med:	
During organizing activity		n/a		
	ses of persons through whom p	nerformed:	11/4	
			0	
Joseph Dreese	en & Mark McQueen	1,10050 Reg	ency Circle, Suite 400, Or	naha, NE 68114
11. Identify (a) Subject emp	ployees, groups of employees,	, and (b) labor orga	nizations:	
				ST SON TOWN
Employees of I	Barilla America			TOO SEE OF
	luding all attachments incorp		nis undersigned authorized officers declar referred to in this report, has been exam	
Signed:			Signed:	
Kel -CBO	Dues )	President		Treasu

Date

(If other title, cross out and write in correct title above.)

Date