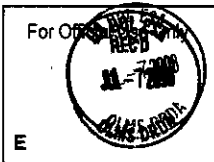


# FORM LM-20

## AGREEMENT AND ACTIVITIES REPORT

Form approved  
Office of Management  
and Budget  
No. 1215-0188  
Expires 11-30-2009



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.

1. File Number: c- 644

363964

### Person Filing

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

Name Lloyd Peterson

Title Consultant

Organization Employers Association Inc.

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

Street 9805 45th Avenue North

City Plymouth

State Minnesota

ZIP Code + 4 55442

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

Name

Title

Organization

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

Street

City

State

ZIP Code + 4

4. Date fiscal year ends:

Dec / 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 Steven Benz

Organization Northland Fire & Security

Trade Name, if any

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

Street 4445 West 77th Street

City Edina

State Minnesota

ZIP Code + 4 55439

7. Date entered into:

12 / 31 / 07

8. Name of person(s) through whom made:

Name Steven Benz

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

*Thomas G. Benz*

President  
(If other title, see  
instructions)

Title President

14. Signed

*Jeri Erickson*

Treasurer  
(If other title, see  
instructions)

Title Treasurer

On

June 31, 2008

Date

763-253-9100

Telephone Number

On

6/30/08

Date

763-253-9120

Telephone Number

Filer: Lloyd Peterson

File Number C-

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.):

Represent Employer during Organizing Campaign

**Specific Activities to be Performed**

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

a. Nature of activity:

Talk to employees and advise them of their rights.

11.b. Period during which performed:

May 2008

11.c. Extent performed:

11.d. Name and address through whom performed:

Name Lloyd Peterson

Organization Employers Association

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

Street 9805 45th Avenue North

City Plymouth

State Minnesota

ZIP Code + 4 55442

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:

Electrical Technicians

12.b. Identify subject labor organizations: