U.S. Decartment 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

For Official Use Only 1 B 2013

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)

EJUL 1 0 2010 READ THE INSTRUCTIONS CAREFU	LLY BEFORE PREPARING THIS REPORT.
53209)	·
1. File Namber c- 00680	
Person Filing	
Name and mailing address (include ZIP Code):	3. Any other address where records necessary to verify this report are kept:
Name Ronald L Mason	Name Ronald L Mason
Title President	Title President
Organization Midwest Management Consultants, Inc.	Organization Midwest Management Consultants, inc.
P.O. Box, Bldg., Room No., if any	P.O. Box, Bidg., Room No., if any
Street 425 Metro Place N., Suite 620	Street 425 Metro Place N., Suite 620
City Dublin	City Dublin
State Ohio ZIP Code + 4 43017	State Ohio ZiP Code +4 43017
Date fiscal year ends: 5. Type of person:	
12 / 31 a. Individual b. Partnership	c. Corporation d. Other (Specify):
Nature of Agreement or Arrangement	30 3 4 4 5 T
6. Full name and address of employer with whom made (include ZIP Code):	7. Date entered into: 07 / 01 / 13
Name Ms. Sherri R. Simpson, CEO	
Organization Blue Diamond Industries, LLC	Name of person(s) through whom made:
Frade Name, if any	Name Ms. Sherri R. Simpson, CEO
P.O. Box, Bldg., Room No., if any Suite 110	Name
Street 3399 Tates Creek	Name
City Lexington	Name
tate KY ZIP Code + 4 40502	Name ·
Signatures	
ach of the undersigned declares, under penalty of perjury and other applicable p e information contained in any accompanying documents) has been examined bue, correct, and complete. (See Section VII on penalties in the instructions.)	enalties of law, that all of the information submitted in this report (including
3. Signed President (If other title, see instructions)	14. Signed Treasurer (If other title, see instructions)
On <u>7-10-13</u> <u>614-734-945</u> 5. Date Telephone Number	On 7-10-13 614-1734-9455 Date Telephone Number

Roc Mason Midwest Management Consult	tants, Inc. C-00680	
*S. Check the appropriate box to indicate whether an object of the activities undertaken, is directly or indirectly:		
a. X 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.):		
Verbal agreement to represent Blue Diamond Industries at their manufacturing facility in Middlesboro (KY) in campaign to remain union-free. Agreement has never been reduced to writing, is for no specific time, and may be terminated by either party at any time. All consultations billed at \$175.00 per hour, including travel time and expenses.		
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Specific Activities to be Performed		
a Nature of activity: Giving speeches, preparing written materials for distribution, and conducting meetings with employees and management for purposes of addressing questions and rights afforded under the NLRA.		
11.b. Period during which performed: 07/01/13 to present	11.c. Extent performed: Continuing	
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:	
Name Ms. Sherri R. Simpson, CEO	Name	
Organization Blue Diamond Industries, LLC	Organization	
P.O. Box, Bldg., Room No., if any Suite 110	P.O. Box, Bldg., Room No., if any	
Street 3399 Tates Creek	Street	
c _{ity} Lexington	City	
State KY ZIP Code + 4 40502	State ZiP Code + 4	
2.a. Identify subject groups of employees: a. All production and maintenance employees at facility in Middlesboro	12.b. Identify subject labor organizations: b. United Steelworkers in Frankfort (KY.)	