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 11-30-2006



C- 00322

1. File Number:

Person Filing

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.

2. Name and mailing address (include ZIP Code):	3. Any other address where records necessary to verify this report are kept:
Name Peter A List	Name
Title Founder & CEO	Title
Organization Kulture Consulting, LLC	Organization
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any
Street 759 Bloomfield Avenue, No. 301	Street
City West Caldwell	City
State New Jersey ZIP Code + 4 07006	State ZIP Code + 4
4. Date fiscal year ends: 5. Type of person:	
Dec / 9 a. Individual b. Partnership	c. Corporation d. Other (Specify): LLC
Nature of Agreement or Arrangement	
6. Full name and address of employer with whom made (include ZIP Code):	7. Date entered into: 10 / 27 / 2009
Name	
Organization Electrical Wholesalers, LLC	8. Name of person(s) through whom made:
Trade Name, if any	Name John Reznick
P.O. Box, Bldg., Room No., if any	Name
Street 151 Walnut Street	Name
City Hartford	Name
State Connecticut ZIP Code + 4 06120	Name
Signa	atures
Each of the undersigned declares, under penalty of perjury and other applicable the information contained in any accompanying documents) has been examined true, correct, and complete. (See Section VII on penalties in the instructions.)	by the signatory and is, to the best of the undersigned's knowledge and belief,
13. Signed President (If other title, see instructions)	14. Signed ////////////////////////////////////
Title Other (Specify) Founder & CEO	Title Other (Specify) Secretary & Treasurer
,	
On 11232019 973-403-9901	On $11/33/2009$ 973-403-9901
¹ D å te Telephone Number	Date Telephone Number
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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.	ng.

10. Terms and conditions (Explain in detail; see instructions. Written agreements must be attached.):		
Company was employed on a per hour basis with no formal written agreement relationation amount of hours to be performed. Fee schedule based on a per hour rate.	tive to duration o	

Specific Activities to be Performed

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

Presented informational meetings to company employees relative to the process of unionization, the role of the NLRB, and collective bargaining.

11.b. Period during which performed:	11.c. Extent performed:	
10/09 - 11/09	11/09	
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:	
Name Peter List	Name Juan Negroni	
Organization Kulture Consulting, LLC	Organization Kulture Consulting, LLC	
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any	
Street 759 Bloomfield Avenue, No. 301	Street 759 Bloomfield Avenue, No. 301	
City West Caldwell	City West Caldwell	
State New Jersey ZIP Code + 4 07006	State New Jersey ZIP Code + 4 07006	
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:	
All full and regular part-time drivers and warehouse employees employed by the Employer at its Middletown, Connecticut facility.	International Brotherhood of Teamsters, Local 671	