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. 1245-0003
Expires 10-31-2013



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)

| READ THE INSTRUCTIONS CAREFUL  | LLY BEFORE PREPARING THIS REPORT. 705 445   |  |
|--|---|--|
| 1. File Number: <b>C-</b> 00525  |   |  |
| Person Filing  |   |  |
| Name and mailing address (include ZIP Code):   | 3. Any other address where records necessary to verify this report are kept:  |  |
| Name Phillip B Wilson  | Name  |  |
| Title  | Title   |  |
| Organization LRI Consulting Services, Inc.   | Organization  |  |
| P.O. Box, Bldg., Room No., if any  | P.O. Box, Bldg., Room No., if any   |  |
| Street 7850 South Elm Place, Suite E   | Street  |  |
| City Broken Arrow  | City  |  |
| State Oklahoma ZIP Code + 4 74011  | 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   | T-1   |  |
| Full name and address of employer with whom made (include ZIP Code):  Name   | 7. Date entered into:  1  |  |
| Organization Goodwill Center for Work and Training   | 8. Name of person(s) through whom made:   |  |
| Trade Name, if any   | Name Kent Walters   |  |
| P.O. Box, Bldg., Room No., if any  | Name  |  |
| Street 5400 South 60th Street  | Name  |  |
| City Greendale   | Name  |  |
| State 53139 ZIP Code + 4   | Name  |  |
| Signa  | tures   |  |
| Each of the undersigned declares, under penalty of perjury and other applicable the informa true, correc ies in the instructions.) | penalties of law, that all of the information submitted in this report (including 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 Treasurer (If other title, see instructions)   |  |
| Title CEO  | Title Fresident   |  |
| On 5/29/2019 918-455-9995  | On 5/29/2019 918-455-9995   |  |
| Date Telephone Number  | Date Telephone Number   |  |

| Filer IDI Consulting Coveriges Inc  | File Number C- 00525  |  |  |  |  |
|---|---|--|--|--|--|
| Filer: LRI Consulting Services, Inc.  | File Nulliber C- 00525                                      |  |  |  |  |
| 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. |   |  |  |  |  |
| 40. Towns and anaditions (Forelain in datable and instructions Whither appropriate must be attached ):  |   |  |  |  |  |
| 10. Terms and conditions (Explain in detail; see instructions. Written agreements must be attached.):  See Attached   |   |  |  |  |  |
| bee included  |   |  |  |  |  |
|   |   |  |  |  |  |
|   |   |  |  |  |  |
|   |   |  |  |  |  |
|   |   |  |  |  |  |
| Specific Activities to be Performed   |   |  |  |  |  |
| Specific Activities to be Performed  11. For each activity, separately list in detail the information required (See instructions):  |   |  |  |  |  |
| a. Nature of activity:  |   |  |  |  |  |
| Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.   |   |  |  |  |  |
|   |   |  |  |  |  |
|   |   |  |  |  |  |
|   |   |  |  |  |  |
| 11.b. Period during which performed:  | 11.c. Extent performed:                                     |  |  |  |  |
| various days beginning 1/7/19   | Fully Performed   |  |  |  |  |
| 11.d. Name and address through whom performed:  | Additional Name and address through whom performed, if any: |  |  |  |  |
| Name William Herrera  | Name Patrick O'Mara   |  |  |  |  |
| Organization People Solutions Consulting Group  | Organization OMara & Associates LLC                         |  |  |  |  |
| P.O. Box, Bldg., Room No., if any   | P.O. Box, Bldg., Room No., if any                           |  |  |  |  |
| Street 9427 Reston Grove Lane   | Street PO Box 2624  |  |  |  |  |
| City Houston  | City Novato   |  |  |  |  |
| <b>State</b> TX <b>ZIP Code + 4</b> 77095   | State CA  |  |  |  |  |
| 12.a. Identify subject groups of employees:   | 12.b. Identify subject labor organizations:                 |  |  |  |  |
| various employees   | pre-petition  |  |  |  |  |
|   |   |  |  |  |  |
|   |   |  |  |  |  |
|   |   |  |  |  |  |
|   |   |  |  |  |  |

## Specific Activities to be Performed (Continuation Page)

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

Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.

| 11.b. Period during which perf   | ormed:                         | 11.c. Extent performed:        | 11.c. Extent performed:                                     |  |  |
|----------------------------------|--------------------------------|--------------------------------|---|--|--|
| 11.d. Name and address thro      | ugh whom performed:            | Additional Name and address    | Additional Name and address through whom performed, if any: |  |  |
| Name Byron                       | Clay                           | Name                           | Name  |  |  |
| Organization BJC and As          | sociates Inc                   | Organization                   |   |  |  |
| P.O. Box, Bldg., Room No., if    | any                            | P.O. Box, Bldg., Room No., i   | P.O. Box, Bldg., Room No., if any                           |  |  |
| Street 10108 Fehlberg            | Court                          | Street                         | Street  |  |  |
| City St John                     |                                | City                           | City  |  |  |
| State IN                         | <b>ZIP Code + 4</b> 46379      | State                          | ZIP Code + 4  |  |  |
| Additional Name and address      | hrough whom performed, if any: | Additional Name and address    | Additional Name and address through whom performed, if any: |  |  |
| Name                             |                                | Name                           | Name  |  |  |
| Organization                     |                                | Organization                   |   |  |  |
| P.O. Box, Bldg., Room No., if a  | iny                            | P.O. Box, Bldg., Room No., i   | P.O. Box, Bldg., Room No., if any                           |  |  |
| Street                           |                                | Street                         | Street  |  |  |
| City                             |                                | City                           | City  |  |  |
| State                            | ZIP Code + 4                   | State                          | ZIP Code + 4  |  |  |
| 12.a. Identify subject groups of | employees:                     | 12.b. Identify subject labor o | 12.b. Identify subject labor organizations:                 |  |  |
| various employees                |                                | pre-petition                   |   |  |  |
|                                  |                                |                                |   |  |  |
|                                  |                                |                                |   |  |  |
|                                  |                                |                                |   |  |  |
|                                  |                                |                                |   |  |  |
|                                  |                                |                                |   |  |  |

Form LM-20 (2003) Page 3 of 3



Kent A. Walters Senior Vice President, Operations Goodwill Center for Work and Training 5400 South 60th Street Greendale, WI 53139



# **RE: Pre-Petition Campaign Consulting**

#### **Situation Assessment**

You have requested a proposal to provide materials and consulting services to help you win a potential NLRB election. You have a few short weeks to educate your employees on the disadvantages of unions and convince them to put their trust in a direct relationship with you rather than the union. You want to make sure that your consulting is persuasive, does not interfere with employees' protected rights and provides the best opportunity to build trust with your employees.

## **Proposed Intervention(s)**

Campaign Consulting: For this option we will provide expert campaign consulting with an on-site facilitator to communicate your message directly to employees in employee meetings and one-on-one. Our consultant will work with managers and supervisors at your location to increase your own internal capacity for handling employee relations issues after the campaign is over. Based on our joint assessment of the need, we will assign appropriate consulting resources to your campaign for a pre-approved schedule of meetings.

#### **Objectives**

- Win the NLRB election by as wide a margin as possible or achieve a withdrawal of the petition, without meritorious election objections or unfair labor practice charges.
- Increase trust and credibility of the current leadership team by improving communication and developing their ability to create a positive employee relations environment.
- Retain your direct relationship with employees and preserve the operational flexibility needed to remain productive and profitable. The dead weight cost of unionization is estimated at 25% for most organizations.

#### Value to Organization

 You avoid a steep and slippery learning curve and are free to do the most important trust-building work.

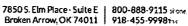
















- You can talk to employees without engaging in mudslinging. You are free to spend your time on a positive message about the company.
- Your communication strategy is legally proven and sound. Our communication tools have never been found to be objectionable by the NLRB in thousands of elections.
- You receive a proven program, with over 10,000 successful client engagements.

### **Terms and Conditions**

The fee for consulting is \$3,000 per consultant per day (plus reasonable travel expenses). There will be two consultants. For purposes of this proposal a consulting day means each calendar day worked by each consultant. If more than one consultant is working on your case the parties understand and agree that multiple consulting days may be worked on each calendar day. Consultants shall be available during shifts when employees are working which are not within normal workings hours.

## **Payment Terms**

All fees are due upon the delivery of the consulting services and are nonrefundable. Consulting fees and expenses incurred by consultant will be billed to you and you agree to pay those invoices upon receipt and to settle those statements within 45 days. You agree and acknowledge that failure to pay fees or expenses associated with this project under these terms will result in reassignment of consultant(s), a penalty of the maximum allowable interest rate per month plus any costs we incur to collect an outstanding balance, until all outstanding invoices are paid in full.

It is further understood that all materials included in or with the above referenced items or programs are fully covered and protected by federal copyright laws. Federal law provides civil and criminal penalties for the unauthorized reproduction, distribution or exhibition of protected products.

You further acknowledge that no representation by LRI or its representatives were relied on by you or any member of your company in entering this agreement, and that this document represents the full understanding of the parties. You also acknowledge and agree that we have informed you of the obligation to report any direct persuader activity performed on your behalf to the United States Department of Labor by both our firm and your firm and that failure to timely file these reports can subject your company to criminal penalties. Further, you agree to make LRI aware of and share copies of any unfair labor practice charges and or objections and challenges to the conduct of an election alleging anything regarding speech or behavior, in any form, on the part of any LRI consultant. LRI agrees to act as a witness in any relevant hearings or defense of such claims.

Your payment, in the absence of your signature below, indicates your acceptance of this



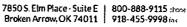






**Forbes** 









project and the terms and conditions as stated herein. The terms and conditions on this proposal are good for 90 days from the date on this proposal unless specified otherwise. The parties agree that Wisconsin law governs any dispute between them and to resolve any disputes by arbitration in Milwaukee, Wisconsin under the American Arbitration Association rules.

# **Acceptance**

We accept the Proposal above:

For LRI Consulting Services, Inc.

For Goodwill Center for Work and Training

Phillip B. Wilson, President/General Counsel

Date: January 2, 2019

Kent A. Walters, Senior Vice President, **Operations** 

Date: 1/8/19









**Forbes**