

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



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.

| 431831 | |
|---|---|
| 1. File Number: C- 00606 | |
| | |
| Person Filing | |
| Name and mailing address (include ZIP Code): | Any other address where records necessary to verify this report are kept: |
| Name Christopher T Borruso | Name |
| Title President | Title |
| Organization Axiomatix, LLC | Organization |
| P.O. Box, Bldg., Room No., if any | P.O. Box, Bldg., Room No., if any |
| Street 323 Mariners Way | Street |
| City Copiague | City |
| State New York ZIP Code + 4 11726 | State ZIP Code + 4 |
| 4. Date fiscal year ends: 5. Type of person: | |
| Dec / 31 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: 3 / 4 / 2008 |
| Name | |
| Organization Birnie Bus Service | 8. Name of person(s) through whom made: |
| Trade Name, if any | Name Tim Birnie |
| P.O. Box, Bldg., Room No., if any | Name |
| Street 2486 State Route 12-B | Name |
| City Hamilton | Name |
| State New York ZIP Code + 4 13345 | 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 President (If other title, see | 14. Signed Treasurer (If other title, see |
| Title President instructions) | Title Treasurer instructions) |
| | |
| On 7-6-10 | On |
| Date Telephone Number | Date Telephone Number |

| Christopher Borruso Axiomatix, LLC | Lile (Adulbei C- 00000 | |
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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. | | |
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| 10. Terms and conditions (Explain in detail; see instructions. Written agreements must be attached.): | | |
| Oral agreement for daily fee. | | |
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| Specific Activities to be Performed | | |
| 11. For each activity, separately list in detail the information required (See instructions): | | |
| a. Nature of activity: | | |
| Conduct group meetings with employees and answer questions regarding section 7 rights, collective bargaining process and voting procedures. | | |
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| 11.b. Period during which performed: | 11.c. Extent performed: | |
| March 2008 | Completed | |
| 11.d. Name and address through whom performed: | Additional Name and address through whom performed, if any: | |
| Name Christopher T Borruso | Name | |
| Organization Axiomatix, LLC | Organization | |
| | | |
| P.O. Box, Bldg., Room No., if any | P.O. Box, Bldg., Room No., if any | |
| Street 323 Mariners Way | Street | |
| City Copiague | City | |
| State New York ZIP Code + 4 11726 | State ZIP Code + 4 | |
| 12.a. Identify subject groups of employees: | 12.b. Identify subject labor organizations: | |
| Bus drivers | Teamsters | |
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