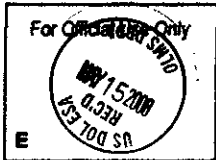


# FORM LM-20

## AGREEMENT AND ACTIVITIES REPORT

Form approved  
Office of Management  
and Budget  
No. 1215-0188  
Expires 11-30-2006



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- 568 361867

### Person Filing

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

Name Raymond Rosenbach

Title Treasurer

Organization Government Resources Consultants  
OF AMERICA INC.

P.O. Box, Bldg., Room No., if any 106

Street 253 Commerce Dr

City GRAYS LAKE

State IL

ZIP Code + 4 60030

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:

12/08

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 MANDALAY BAY RESORT & CASINO

Organization Debbie White, V.P. NR

Trade Name, if any

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

Street 3950 LAS VEGAS BLVD SOUTH

City LAS VEGAS

State NV

ZIP Code + 4 89114

7. Date entered into:

04/23/00

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

Name Debbie White

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

Edward D. Yancy Jr.  
President  
(If other title, see instructions)

Title President

14. Signed

[Signature]  
Treasurer  
(If other title, see instructions)

Title Treasurer

On

05-07-00 847-337-3480

Date

Telephone Number

On

5/7/08 847-337-3480

Date

Telephone Number

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.):

TO PROVIDE PROFESSIONAL CONSULTING SERVICES AS DESCRIBED IN SECTION 11

**Specific Activities to be Performed**

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

a. Nature of activity:

CONDUCT EMPLOYEE AND SUPERVISORY GROUP MEETINGS TO INFORM & EDUCATE PARTICIPANTS ABOUT THEIR RIGHTS, DUTIES & RESPONSIBILITIES AS THEY PERTAIN TO THE NATIONAL LABOR RELATIONS BOARD PROCEDURES & NATIONAL LABOR RELATIONS ACT AND COLLECTIVE BARGAINING PROCEDURES ON FAIR LABOR PRACTICES AND UNION RULES & FINANCES.

11.b. Period during which performed:

11.c. Extent performed:

11.d. Name and address through whom performed:

Additional Name and address through whom performed, if any:

Name ED YOUNG

Name NOBLE MILLER

Organization GOVERNMENT RESOURCES CONSULTANTS OF AMERICA INC

Organization SAME

P.O. Box, Bldg., Room No., if any 106

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

Street 253 COMMERCIAL DR

Street SAME

City GRAYSHAKE

City

State IL

ZIP Code + 60030

State

ZIP Code + 4

12.a. Identify subject groups of employees:

SECURITY OFFICERS

12.b. Identify subject labor organizations:

SECURITY, POLICE FIRE PROFESSIONALS OF AMERICA (SPFPA)