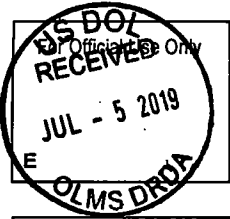


# FORM LM-20

## AGREEMENT AND ACTIVITIES REPORT



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.

706567

1. File Number: C- 65668

### Person Filing

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

Name Kirk Cummings

Title

Organization Cummings Group, LLC

P.O. Box, Bldg., Room No., if any P.O. Box 882

Street

City Lapeer

State Michigan

ZIP Code + 4 48446

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:

Dec / 19

5. Type of person:

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):

Name Jason Brandt

Organization Calumet Packaging

Trade Name, if any

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

Street 10411 Hwy 1

City Shreveport

State Louisiana

ZIP Code + 4 71115

7. Date entered into:

1 / 16 / 2019

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

Name Peter List

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

President  
(If other title, see  
instructions)

Title President

14. Signed

Treasurer  
(If other title, see  
instructions)

Title

On 6/25/2019

Date

248-210-1162

Telephone Number

On

Date

Telephone Number

Filer: Kirk Cummings      Cummings Group, LLC	File Number C- 65668
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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.

10. Terms and conditions (Explain in detail; see instructions. Written agreements must be attached.):

Oral agreement made with Kulture Consulting, LLC \$300.00 per hour, plus actual and reasonable expenses.

<b>Specific Activities to be Performed</b>	
<p>11. For each activity, separately list in detail the information required (See instructions):</p> <p>a. Nature of activity:</p> <p>Traveled to Employer and met with management; Presented informational meetings to company employees relative to the process of unionization, the role of the NLRB, and collective bargaining. Answered related questions.</p>	
<p>11.b. Period during which performed:</p> <p>January-February</p>	<p>11.c. Extent performed:</p> <p>Completed</p>
<p>11.d. Name and address through whom performed:</p> <p>Name    Peter                      List</p> <p>Organization    Kulture Consulting, LLC</p> <p>P.O. Box, Bldg., Room No., if any    P.O.    Box    2877</p> <p>Street</p> <p>City    Pawleys Island</p> <p>State    South Carolina                      ZIP Code + 4    29585</p>	<p>Additional Name and address through whom performed, if any:</p> <p>Name</p> <p>Organization</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State    ZIP Code + 4</p>
<p>12.a. Identify subject groups of employees:</p> <p>All full-time and part-time production and maintenance employees, including crew leaders, blending, dock, inventory and QC employed by Calumet at its Shreveport, LA facility.</p>	<p>12.b. Identify subject labor organizations:</p> <p>United Steel, Paper and Forestry, Rubber, Manufacturing, Energy, Allied Industry Service Workers International Union, AFL-CIO</p>