

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



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, #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 / 14 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: 11 / 3 / 2014	
Name	,	
Organization G2K Logistics, LLC	8. Name of person(s) through whom made:	
Trade Name, if any	Name Thomas Valnoha	
P.O. Box, Bldg., Room No., if any	Name	
Street 5353 W. 73rd Street	Name	
City Bedford	Name	
State Illinois ZIP Code + 4 60638	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 fany 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 McAlle Alexander Treasurer (If other title, see	
Title Other (Specify) instructions)	Title Other (Specify) instructions)	
Founder & CEO	Manager of Administration	
On 11/29/14 973-403-9901	On ///25/2014 973-403-9901	
Date/ 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.		
40. Towns and conditions (Fundain in details and instructions, Written approximants	must be attached \:	
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 relative to duration or amount of hours to be performed. Fee schedule based on a per hour rate.		
Specific Activities to be Performed		
11. For each activity, separately list in detail the information required (See instruct a. Nature of activity: Presented informational meetings to company employer role of the NLRB, and collective bargaining.		
11.b. Period during which performed:	11.c. Extent performed:	
11/14	Completed	
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:	
Name Ronn English	Name	
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, #301	Street 759 Bloomfield Avenue, #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-time route drivers andd swing route drivers employed by the Employers at its facility currently located at 5353 W 73rd Street, Bedford Park, IL 60638.	International Brotherhood of Teamsters, Local 734	