Agreement and Activities Report

U.S. Department of Labor

Office of Labor-Mana

nt Standards

File No.



This report is mandatory under P.L. 86-257 as amended. Failure to comply may result in criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 439, 440.

Required of Persons, including Labor Relations Consultants and Other Individuals and Organizations,

OMB No. 1214-000 02/29/93

Under Section 203(b) of the Labor-Management Reporting and Disclosure Act of 1959, as amended (LMRDA). A. Person Filing 1. Name and maling address (include ZIP code): 2. Any other address where records necessary to verify this report are kept: Matt Perovic/LRI Consulting Services, Inc. 7850 South Elm Place Broken Arrow, OK 74013 3. Date fiscal year ends: 4. Type of person: a.
Individual b.
Partnership c.
☐ Corporation d. ☐ Other (Spedify): 12-31-02 B. Nature of Agreement or Arrangement 6. Date entered into: Full name and address of employer with whom made (include ZIP code): 4/30/02 Tweeter Home Entertainment 320 South Henderson Road 7. Names of persons through whom made: King of Prussia, PA 19403 Beth Goetz 8. Check the appropriate box to indicate whether an object of the activities undertaken, is directly or indirectly: a. It persuade employees to exercise or not to exercise, or persuade employees as to the manner or exercising, the right to organize collectively through representatives of their own choosing. To supply and 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. 9. Terms and conditions (Explain in detail; see Part 8-9 of instructions): Oral agreement to provide consultant to give speeches to employees to persuade them to not join a union. Duration of 3 days C. Specific Activities to be Performed 10. For each activity, separately list in detail the information required (See Part C-10 of instructions): a. Nature of activity: Employed to give speeches to employees to persuade them to not join a union. c. Extent performed: b. Peroid during which performed: April 30, May 1 and 2, 2002 Fully performed d. Nam, es and addresses of persons through whom performed: Matt Perovic/Quantum Consulting 10917 Kilpatrick Oak Lawn, IL 60453 11. Identify (a) Subject employees, groups of employees, and (b) labor organizations: International Brotherhood of Teamsters Drivers D. Verfication and Signature. The person in item 1 above and each of his undersigned authorized officers declares, under penalty of law, that all information in this report, including all attachments incorporated therein or referred to in this report, has been examined by him and is. to the best of his knowledge and belief, true, correct, and complete. Signed: Signed: President Treasurer (If other title, cross out and write in correct title above.) (If other title, cross out and write in correct title above.) City Date State City State Broken Arrow OK OK <u>on:</u> ≤ 13/02 Broken Arrow 02 at:

on:

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Under Section 203(b) of the Labor-Management Reporting and Disclosure Act of 1959, as amended (LMRDA). A. Person Filing 1. Name and maling address (include ZIP code): 2. Any other address where records necessary to verify this report are kept: Matt Perovic/LRI Consulting Services, Inc. 7850 South Elm Place Broken Arrow, OK 74013 Type of person: 3. Date fiscal year ends: a. Individual c. \(\subseteq \text{ Corporation d.} \subseteq \text{ Other (Spedify):} b.
Partnership 12-31-02 B. Nature of Agreement or Arrangement 6. Date entered into: 5. Full name and address of employer with whom made (include ZIP code): Tweeter Home Entertainment 320 South Henderson Road 7. Names of persons through whom made: King of Prussia, PA 19403 Beth Goetz Check the appropriate box to indicate whether an object of the activities undertaken, is directly or indirectly: a.
 \subseteq To persuade employees to exercise or not to exercise, or persuade employees as to the manner or exercising, the right to organize collectively through representatives of their own choosing. b.

To supply and 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. 9. Terms and conditions (Explain in detail; see Part B-9 of instructions): Oral agreement to provide consultant to give speeches to employees to persuade them to not join a union. Duration of 2 days C. Specific Activities to be Performed 10. For each activity, separately list in detail the information required (See Part C-10 of instructions): a. Nature of activity: Employed to give speeches to employees to persuade them to not join a union. 7,5005 c. Extent performed: b. Peroid during which performed: May 7 and 8, 2002 Fully performed d. Nam, es and addresses of persons through whom performed: Matt Perovic/Quantum Consulting 10917 Kilpatrick Oak Lawn, IL 60453 11. Identify (a) Subject employees, groups of employees, and (b) labor organizations: International Brotherhood of Teamsters Drivers D. Verfication and Signature. The person in item 1 above and each of his undersigned authorized officers declares, under penalty of law, that all information in this report, including all attachments incorporated therein or referred to in this report, has been examined by him and is, to the best of his ct, and complete. Signed: Signed: President Treasurer (If other title, cross out and write in correct title above.) (If other title, cross out and write in correct title above.) City State Date City State Date 13/02 Broken Arrow OK

Broken Arrow

at:

Public reporting burden for this collection of information is estimated to average 20 minutes per response, including the time for reviewing instructions searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Labor Management Standards, Department of Labor, Room N5625, 200 Constitution Avenue, N.W., Wash., D.C. 20210; and to the Office of Management and Budget, Paperwork Reduction Project (1214-0001), Wash., D.C. 20503.

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OMB No. 1214-0001 02/29/93

A. Person Filing							
. Name and maling address (in Brad White/LRI Consulting 9 7850 South Elm Place Broken Arrow, OK 74013		2. Ai	ny other a	address where record	ds necessary to ver	rify this report are kep	
3. Date fiscal year ends:	4. Type of perso	n:					
12-31-02	a. 🗆 Indivi	dual b. 🗆 Partr	nership	c. 💢 Corporation	on d. 🗆 Other (Spedify):	
B. Nature of Agreement or	Arrangement						
5. Full name and address of employer with whom made (include ZIP coo							
Capitol Dodge of Springfield			4/30/02				
1600 South Dirksen Parkway			7. Names of persons through whom made:				
Springfield, IL 62703		Gary Matern vities undertaken, is directly or indirectly:					
 To supply and empl 	representatives of the oyer with information ch employer, except	eir own choosing. I concerning the acti	vities of e	imployees or a labor	organization in cor		
9. Terms and conditions (Expl		B-9 of instructions):				94.1	
Oral agreement to provid	e consultant to give	speeches to employ	ees to p	ersuade them to not	ioin a union		
,	5	ep	осо то р	ordado triom to not	join a amon.		
D				Section 5			
Duration of 1 days							
C. Specific Activities to be	Parformed					-	
b. Peroid during which po		c. Extent perform		a union.		ARL WEST	
Way 2, 2002		Fully performed					
d. Nam,es and addresse: Brad White Interlate Systems, in 145 A. South Lincoln 11. Identify (a) Subject employ	c. vay, North Aurora, II	L 60542	organizat	ions:			
Technicians		, , , , , , , , , , , , , , , , , , , ,	o gamea				
Machinists and Aero	space Workers						
D. Verfication and Signature that all information in this report to the best of his knowledge are	t, including all attach	iments incorporated:	of his und	dersigned authorized referred to in this re	l officers declares, port, has been exa	under penalty of law mined by him and is,	
Signed:	MA		Signed:	6//	1011		
If other title, cross out and	e in correct title at	President		The said	MA	Treasurer	
(If other title, cross out and write City	State	Date	(If other	title, cross out and v			
at: Broken Arrow	OK	00:5/13/02	at:	City Broken Arrow	State OK	Date on: 5/13/0	
ublic reporting burden for this co earching existing data sources, ga egarding this burden estimate or a kanagement Standards, Departmen aperwork Reduction Project (1214	Hection of information thering and maintaining and maintaining my other aspect of this tof Labor. Room N5625	is estimated to average the data needed, and collection of information of the collection of the collec	completion, includ	utes per response, incluing and reviewing the colling suggestions for red	uding the time for re ollection of informati lucing this burden, to	viewing instructions	