Office of Labor-Management Standars Washington, DC 20210

## AGREEMENT AND ACTIVITIES REPORT

Office of Management and Budget No. 1245-0003 Expires 08-31-2016

3. Any other address where records necessary to verify this report are kept:

Name



1. File Number:

Person Filino

Name

c 683

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

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.

539 718

Joseph Brock

Title President		Title				
Organization Bast Coast Labor Relations, LIC		Organization ( )				
P.O. Box, Bidg., Room No., if any		P.O. Box, Bldg., Room No., if any				
Street 151 Forge Rd		Street St				
City Delran		City City Company				
State New Jersey	ZIP Code + 4 08075	State ZIP Code + 4 - 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2				
Date fiscal year ends:	5. Type of person:					
Dec / 31	a. Individual b. Partnership	Corporation d. Other (Specify):				
Nature of Agreement or Arrangemen	t	-				
6. Full name and address of employer w	ith whom made (include ZIP Code):	7. Date entered into:  11 / 26 / 2013  8. Name of person(s) through whom made:				
Name	and have a share the same of the same					
Organization The Fountains Op	erating Co					
Trade Name, if any The Fountains at Rivervue		Name David Barnes				
P.O. Box, Bldg., Room No., if any		Name				
Street 1 Rivervue Place		Name (1) The state of the state				
City Tuckahoe	the Market To the Market	Name Control of the C				
State New York	ZIP Code + 4 10707	Name · · · · · · · · · · · · · · · · · · ·				
	Signa	atures				
	panying documents) has been examined	penalties of law, that all of the information submitted in this report (including a by the signatory and is, to the best of the undersigned's knowledge and belief,				
13. Signed M	President (If other title, see	14. Signed Treasurer				
Title President	instructions)	Title (If other title, see instructions)				
On 1/12/2014 21	5-840-2088	On				
Date	Telephone Number	Date Telephone Number				



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151 FORGE RD DELRAN, NJ 08075 P (215)840-2088 WWW.ECLR.ORG Specific Activities to be Performed

a. Nature of activity:

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

9. C	Reck the appropriate b	ox to indicate whether	r 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.

1	<ol><li>Terms and conditions (Expla</li></ol>	ain in detail; see i	nstructions. Writt	ten agreements n	nust be attached.):		
	Verbal agreement to	. advise emp	loyees of t	their rights	:to organize	and bargain	collectively: 187.750 per
	hour plus expenses						
				100 A		Or state state	
		[最高等]之				Šv. – Granda S	
		<b>有用的成品的作</b>					
							。」「「CONTENT AND

Give speeches to employees regarding their rights	to organize and collectively bargain a second second
11.b. Period during which performed: various days beginning 12/4/2013	11.c. Extent performed:
	fully performed
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:
Name Control of the C	Name Name
Organization Labor Relations Institute, Inc.	Organization
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any
Street 7850 S. Elm Place	Street
City Broken Arrow	City
State Oklahoma ZIP Code + 4 74013	State ZIP Code + 4
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:
Waitstaff, kitchen, drivers, medtech,	Retail, wholesale and dept. store workers union
housekeepers, direct care worker employees	
그렇다 나는 경우는 나왔습니다. 해졌습니다. 하는데 다	



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