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 07-31-2019



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. 684661	
1. File Number: C- 68057	
Person Filing	
2. Name and mailing address (include ZIP Code):	3. Any other address where records necessary to verify this report are kept:
Name Katherine G Lev	Name N/A
Title President	Title
Organization Lev Labor, LLC	Organization
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any
Street 21 Pleasant Street	Street
City Hudson	City
State Massachusetts ZIP Code + 4 01749	State ZIP Code + 4
4. Date fiscal year ends: 5. Type of person:	
Dec / 18 a. Individual b. Partnership c. Corporation d. Other (Specify): Indivual LLC	
Nature of Agreement or Arrangement	
6. Full name and address of employer with whom made (include ZIP Code):	7. Date entered into: 9 / 10 / 2018
Name Tanja Guerra	
Organization Engility	8. Name of person(s) through whom made:
Trade Name, if any	Name Tanja Guerra
P.O. Box, Bldg., Room No., if any	Name
Street 4803 Stonecroft Blvd.	Name
City Chantilly	Name
State Virginia ZIP Code + 4 20151	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	14. Signed Treasurer (If other title, see
Title President instructions)	Title Treasurer instructions)
·	
On 10/4/2018 617-686-5775	On
Date Telephone Number	Date Telephone Number

Filer Katherine Lev Lev Labor, LLC	File Number C- 68057	
9. Check the appropriate box to indicate whether an object of the activities undertaken, is directly or indirectly:		
educate rather than persuade 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.):		
Verbal. Ongoing as needed. Daily rate.		
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Specific Activities to be Performed		
11. For each activity, separately list in detail the information required (See instructions):		
a. Nature of activity:		
To educate employees regarding their rights under the NLRA. To ensure that accurate information is provided to employees. To respond to questions employees have about unions and provide an opportunity for open dialog about the pros and cons of unionization.		
11.b. Period during which performed:	11.c. Extent performed:	
Beginning 9/18/18	Completed 9/19/2018	
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:	
Name N/A	Name N/A	
Organization	Organization	
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any	
Street	Street	
City	City	
State ZIP Code + 4	State ZIP Code + 4	
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:	
Technicians	IAM	