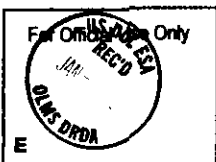


# FORM LM-20

## 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.

1. File Number: C- 00556

325242

### Person Filing

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

Name Jaiver Rojas

Title Treasure

Organization Permanent Solutions

P.O. Box, Bldg., Room No., if any #104

Street 19186 Fort Street

City Riverview

State Michigan

ZIP Code + 4 48192

#### 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 / 31

#### 5. Type of person:

a. ☐ Individual b. ☐ Partnership c. ☒ Corporation d. ☐ Other (Specify):

### Nature of Agreement or Arrangement

#### 6. Full name and address of employer with whom made (include ZIP Code):

Name Linda Wyatt

Organization EDW. C. Levy Company Inc.

Trade Name, if any

P.O. Box, Bldg., Room No., if any 540

Street 900 George Nelson Dr.

City Portage

State Indiana

ZIP Code + 4 46368

#### 7. Date entered into:

10 / 16 / 2006

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

Name Linda Wyatt

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 Treasurer

On 11/12/2006

Date

3132180371

Telephone Number

On 11/12/2006

Date

7349154570

Telephone Number

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.):

. Conduct regular informational meetings with employees.

**Specific Activities to be Performed**

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

a. Nature of activity:

Meet employees at shift change meetings to discuss election answer questions.

11.b. Period during which performed:

10/18/2006 to 10/23/2006

11.c. Extent performed  
completed

11.d. Name and address through whom performed:

Name **Jaiver** **Rojas**

Organization **Permanent Solutions**

P.O. Box, Bldg., Room No., if any **#104**

Street **19186 Fort Street**

City **Riverview**

State **Michigan** ZIP Code + 4 **48192**

Additional Name and address through whom performed, if any:

Name **Richard** **Torres**

Organization **Permanent Solutions**

P.O. Box, Bldg., Room No., if any **#104**

Street **19186 Fort Street**

City **Riverview**

State **Michigan** ZIP Code + 4 **48192**

12.a. Identify subject groups of employees:

All production and Maintenance employees,  
employed by the employer.

12.b. Identify subject labor organizations: