U.S. Department of Labor

Office of Labor

agement Standards



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.

OMB No. 1214-0001 02/29/93

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).

File No. C. 367

A. Person Filing	That lagoritorit rioporturing as	14 2100100010 7101 01				
Name and maling address (included)	de 7IP code):	2 Any other	address where records r	necessary to verify this repo	urt are kent	
The American Consu			acci 635 Wiloto 10001031	locossary to verify this page	illegio vebr	
170 Knowles Drive						
Los Gatos, CA 9503				1.000	000	
				\0. P-	16 -0/	
3. Date fiscal year ends:	4. Type of person:		WV -	MS/DC	DEISTA	
12/31/00	a. 🗆 Individual	b. Partnership	c. 🖾 Corporation	d. Other (Spedify):		
B. Nature of Agreement or Arra		1 1 718 - 1 1	C Data antored into			
5. Full name and address of employer with whom made (include ZIP code):			6. Date entered into:			
Fleetwood Homes of Arizona, Inc. 6112 N. 56th Avenue			April, 2000 7. Names of persons through whom made:			
Glendale, AZ 85311			Sid Harve			
8. 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 exe	ercise, or persuade er			organize	
	resentatives of their own				h - lahas	
 To supply and employed dispute involving such experience. 				inistrative or arbitral procee		
criminal or civil judicial			origonoment min an acom	modulito of arbidal process	oning on a	
9. Terms and conditions (Explain i	n detail; see Part B-9 of in	nstructions):				
Employed on a per	diem basis du	aring the fi	scal year by	the Employer		
listed in No. 5 ak	oove.					
There are no writt	ten formal agi	reements so	none are incl	Luded.		
C. Specific Activities to be Pe						
10. For each activity, separately list	at in detail the information	required (See Part C	-10 of instructions):		1 7	
a. Nature of activity:	ermine & addre	ess the issu	les; advise cl	lient on their	Tegal	
publications for				te the Act; res		
for client's appro						
management was una			to provide in	ITOTMACTON ONLY	WIICII	
b. Peroid during which perfor		xtent performed:				
500 5000		12				
April, 2000		on-going				
d. Nam,es and addresses of	persons through whom p	erformed:			U E man	
Edward Echanique	address same	as #1 above	.	10 8 6 8 1	U 13 In	
Edward Echanique, address same as #1 above.						
				1/11 MAY 2 5 20	no IIV	
 Identify (a) Subject employees. 	, groups of employees, a	nd (b) labor organiza	tions:	111 MAI 2 3 20	100	
Cross section of a	all employees			110001 (504		
International Unio	on of Opomatic	a Enginoer	Togal 420	USDOL/ESA OLMS/DOE/SR	RD	
international onic	on or operation	ig Engineers	LOCAL 420	OEMO/ DOS/ O		
D. Vorflostion and Street	The server is its at a be					
D. Verfication and Signature. that all information in this report, in	cluding all attachments in	ve and each of his un accreorated therein o	referred to in this repor	icers declares, under penal	ty of law,	
to the best of his knowledge and b			h/\)	- A	m and 10,	
Signed:		Signed		VI 00		
Gerth !		President	Tilllar	Surgner	Treasurer	
(If other title, cross out and write in	correct title above.)	(If other	r title, cross out and write	e in correct title above.)		
- ()		ate	City	State Date	8/ /	
at: Los Gatos, (CA on:	9/9/60 at:	Los Gatos,	CA on: 5/	9/00	
Public reporting burden for this collect searching existing data sources, gather regarding this burden estimate or any	ing and maintaining the da	ta needed, and complet	ing and reviewing the colle	ig the time for reviewing instruction of information. Send co	uctions mments	
Management Standards, Department of	Labor, Room N5625, 200 Co	on of information, inclu- institution Avenue, N.W.	ling suggestions for reducing Wash., D.C. 20210; and to	ng this burden, to the Office of the Office of Management and	f Labor Budget	
Paperwork Reduction Project (1214-000	1), wash., D.C. 20503.					

Los Gatos

Paperwork Reduction Project (1214-0001), Wash., D.C. 20503.

U.S. Department of Labor

Los Gatos,

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Required of Persons, including Labor Relations Consultants and Other Individuals and Organizations, File No. 361 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: The American Consulting Group, Ind. 170 Knowles Drive, Ste. 210 Los Gatos, CA 95032 3. Date fiscal year ends: Type of person: 12/31/00 c. \(\bigcirc \) Corporation d. \(\supercolon \) Other (Spedify): a. Individual b.
Partnership B. Nature of Agreement or Arrangement 5. Full name and address of employer with whom made (include ZIP code): Date entered into: Dallas Delivery Service, Inc. March, 2000 26062 Merit Circle, Suite 102 7. Names of persons through whom made: Laguna Hills, CA 92653-7013 Dallas von Pohlmann 8. 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 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): Employed on a per diem basis during the fiscal year by the Employer listed in No. 5 above. There are no written formal agreements so none are included. C. Specific Activities to be Performed 10. For each activity, separately list in detail the information required (See Part C-10 of instructions): Determine & address the issues; advise client on their legal a. Nature of activity: rights & obligations so they don't violate the Act; research publications for information regarding the union; draft campaign literature for client's approval; met with employees to provide information only when management was unable to do so. b. Peroid during which performed: c. Extent performed: March, 2000 on-going d. Nam, es and addresses of persons through whom performed: MAR 2 8 2000 Clifton E. Smith, address same as #1 above. USDOL/ESA OLMS/DOE/SRD 11. Identify (a) Subject employees, groups of employees, and (b) labor organizations: Cross section of all employees Package & General Utility Drivers, Teamsters Local 396 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.) Date City State City State Date

on:

Agreement and Activities

port

U.S. Department of Labor

Office of Labor-

agement Standards

File No.



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

OMB No. 1214-0001 02/29/93

367

onder Section 203(b) of the Labor-	wanagement neport	and Disclosure Act of	1555, as arriorided (EWITE	26):	
A. Person Filing					
1. Name and maling address (include	de ZIP code):	2. Any othe	address where records	necessary to verify this report are k	ep
The American Consu	alting Grou	ip, Inc.			
170 Knowles Drive	, Ste. 210	25 /			
Los Gatos, CA 9503	32				
3. Date fiscal year ends:	4. Type of person:				_
3. Date fiscal year erios.			a WV Compandion	d C Other (Spedify)	
12/21/00	a. 🗆 Individu	al b. 🗆 Partnership	C. AA Corporation	d. Other (Spedify):	
B. Nature of Agreement or Arra	angement				
5. Full name and address of emplo		de (include ZIP code):	6. Date entered into:		
H.D.C. (Gene Fay Trucking)			February	, 2000	
22924 Canyon Lake Drive North			7. Names of persons	through whom made:	
Canyon Lake, CA 92587			Jim Fay		
8. Check the appropriate box to in	dicate whether an	object of the activities und	ertaken, is directly or inc	firectly:	_
a. 🖾 To persuade employees	s to exercise or not t	to exercise, or persuade e	mployees as to the mann	ner or exercising, the right to organi	ze
collectively through rep					
b. To supply and employe	r with information co	oncerning the activities of	employees or a labor org	ganization in connection with a labo)r
criminal or civil judicial		formation for use solety if	conjunction with an adm	ninistrative or arbitral proceeding or	a
9. Terms and conditions (Explain		9 of instructions):			
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Employed on a per		during the i	iscal year by	the Embroyer	
listed in No. 5 al	oove.				
_,				3 3 3	
There are no write	ten formal	agreements so	none are inc	Tuded.	
C. Specific Activities to be Pe	rformed				-
10. For each activity, separately list		mation required (See Part	C-10 of instructions):		
Dete	ermine & ac	dress the iss	ues; advise c	lient on their lega	al
				te the Act; research	
				t campaign literatu	
for client's appro	oval: met v	ith employees	to provide i	nformation only whe	en
management was una			co broarde a		
b. Peroid during which perfo		c. Extent performed:			
b. Feroid during writer perior	illed.	c. Extern performed.			
February, 200	00	On-going			
d. Nam,es and addresses of		nom performed:			_
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Clifton E. Smith,	address sa	ame as #1 abov	e.		
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11. Identify (a) Subject employees	groups of employe	es, and (b) labor organiz	ations:	MAR 2 8 2000	-
5 30.50 5 6 150					
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Package & General	Utility Dr	rivers. Teamst	ers Local 396	OLMS/DOE/SRD	
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				fficers declares, under penalty of la rt, has been examined by him and	
to the best of his knowledge and b			Di Teletred to ili triis repo	nt, has been examined by him and	5,
Signed:		Signe	1. 11	1	_
Signed. Liota Della			- (Value)>	Alougness -	
(If other title, cross out and write in	correct title above	President	er title, cross out and wri	ta in correct title above	er
	State	Date			
Tag Cabas	CA	3/3/-	City Los Gatos	State Date CA	7
		on://3/60 at:			_
Public reporting burden for this collect searching existing data sources, gather	ring and maintaining	the data needed, and compl	eting and reviewing the coll	ection of information. Send comments	í
Management Standards, Department of	Labor, Room N5625, 2	200 Constitution Avenue, N.V	uding suggestions for reduc ., Wash., D.C. 20210; and to	ing this burden, to the Office of Labor the Office of Management and Budget	
Paperwork Reduction Project (1214-000	1), Wash., D.C. 20503	J			

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Office of Labor-M.

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

CA

on:

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,

Los

Gatos

Paperwork Reduction Project (1214-0001), Wash., D.C. 20503.

OMB No. 1214-0001 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: The American Consulting Group, Inc. 170 Knowles Drive, Ste. 210 Los Gatos, CA 95032 3. Date fiscal year ends: 4. Type of person: b. Partnership c. (Corporation d. (Cother (Spedify): a. Individual 12/31/00 B. Nature of Agreement or Arrangement 5. Full name and address of employer with whom made (include ZIP code): 6. Date entered into: Cameron Ashley Building Products 2000 January, 1420 Port of Tacoma Road 7. Names of persons through whom made: Tacoma, WA 98421 Chip Beatty 8. Check the appropriate box to indicate whether an object of the activities undertaken, is directly or indirectly: a. XXX 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 8-9 of instructions): Employed on a per diem basis during the fiscal year by the Employer listed in No. 5 above. There are no written formal agreements so none are included. 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: Determine & address the issues; advise client on their legal rights & obligations so they don't violate the Act; research publications for information regarding the union; draft campaign literature for client's approval; met with employees to provide information only when management was unable to do so. c. Extent performed: b. Peroid during which performed: January, 2000 On-going d. Nam, es and addresses of persons through whom performed: Erick J. Becker, address same as #1 above. FFR 4 2000 11. Identify (a) Subject employees, groups of employees, and (b) labor organizations: USDOL/ESA OLMS/DOE/SRD Cross section of all employees. International Brotherhood of Teamsters, Local 313 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: President Treasurer (If other title, cross out and write in correct title above.) (If other title, cross out and write in correct title above.) State Date City State 1/27/00 at: Los Gatos,

on:

7/60

CA