

FORM LM-20

AGREEMENT AND ACTIVITIES REPORT

Form approved
Office of Management
and Budget
No. 1245-0003
Expires 10-31-2013



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.

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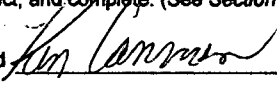
1. File Number: C- 662

Person Filing	
2. Name and mailing address (include ZIP Code):	
Name	Kenneth E Cannon
Title	Owner
Organization	Cannon Labor Relation Consulting
P.O. Box, Bldg., Room No., if any	
Street	2207 Ballantrae DR
City	Colleyville
State	Texas
ZIP Code + 4	76034
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:	5. Type of person:
Dec / 30	a. <input checked="" type="checkbox"/> Individual b. <input type="checkbox"/> Partnership c. <input type="checkbox"/> Corporation d. <input type="checkbox"/> Other (Specify):

Nature of Agreement or Arrangement	
6. Full name and address of employer with whom made (include ZIP Code):	
Name	Joe Farney
Organization	Vice President, Operations
Trade Name, if any	Fibermark
P.O. Box, Bldg., Room No., if any	
Street	101 Bridge St
City	Brownville
State	New York
ZIP Code + 4	13615
7. Date entered into: 7 / 30 / 2012	
8. Name of person(s) through whom made:	
Name	
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)	14. Signed _____	Treasurer (If other title, see instructions)
Title	Sole Proprietor	Title	Treasurer
On	8/4/2012	On	
Date	972-670-6159	Date	
	Telephone Number		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.):

Train management on what they can and cannot do during a union organizing campaign. Develop campaign material that will be used during employee meetings. Meet with employees and present the campaign material.

Specific Activities to be Performed

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

a. Nature of activity:

Train management, develop material, meet with employees in group settings and manage the election process at the plant.

11.b. Period during which performed:

7/30/2012 Through 8/24/2012

11.c. Extent performed:

11.d. Name and address through whom performed:

Name Joe Farney

Organization VP Plant Operations

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

Street 101 Bridge St.

City Brownville

State New York ZIP Code + 4 13615

Additional Name and address through whom performed, if any:

Name

Organization

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

Street

City

State ZIP Code + 4

12.a. Identify subject groups of employees:

All non exempt employees excluding, managers and guards.

12.b. Identify subject labor organizations:

International Brotherhood of Teamsters Local 687