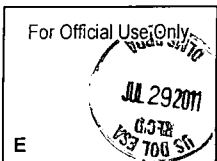


# FORM LM-20

## 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.

464131

1. File Number: C- 00714

### Person Filing

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

Name

Title

Organization SEO Solutions Co, LLC

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

Street 4613 E. 13th Street

City Tulsa

State Oklahoma

ZIP Code + 4 74112

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): LLC

### Nature of Agreement or Arrangement

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

Name John

Witte

Organization Donjon Shipbuilding & Repair LLC

Trade Name, if any

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

Street 220 East Bayfront Parkway

City Erie

State Pennsylvania

ZIP Code + 4 16507

7. Date entered into:

6 / 24 / 2011

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 for penalties in the instructions.)

13. Signed

Title President

President  
(If other title, see  
instructions)

14. Signed

Title

Treasurer  
(If other title, see  
instructions)

On 7/21/2011

Date

918-836-5111

Telephone Number

On

Date

Telephone Number

|                              |                      |
|------------------------------|----------------------|
| Filer: SEO Solutions Co, LLC | File Number C- 00714 |
|------------------------------|----------------------|

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.):

Oral agreement to bill for services rendered on complication of project.

|   |   |
|---|---|
| <b>Specific Activities to be Performed</b>  |   |
| 11. For each activity, separately list in detail the information required (See instructions):                             |   |
| a. Nature of activity:  |   |
| To provide consultation and to give speeches to employees regarding their rights to organize and to bargain collectively. |   |
| 11.b. Period during which performed:  | 11.c. Extent performed:                                     |
| Various Days 6/28/11 thru 6/13/11   | Fully Performed   |
| 11.d. Name and address through whom performed:  | Additional Name and address through whom performed, if any: |
| Name  | Name  |
| Organization LRI Consulting Services Inc.   | Organization  |
| P.O. Box, Bldg., Room No., if any   | P.O. Box, Bldg., Room No., if any                           |
| Street 7850 South Elm Place   | Street  |
| City Broken Arrow   | City  |
| State Oklahoma ZIP Code + 4 74011   | State ZIP Code + 4  |
| 12.a. Identify subject groups of employees:   | 12.b. Identify subject labor organizations:                 |
| Production and Maintenance Employees  | Boilermakers  |