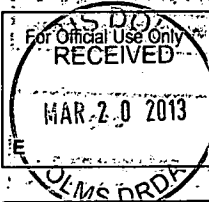


# FORM LM-20

## 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

516-797

1. File Number: C- 00575

### Person Filing

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

Name Steven E Jones

Title President

Organization Labor Management Solutions

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

Street 167 Willow Oak Avenue

City Ocean View

State Delaware

ZIP Code + 4 19970-3240

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

Organization General Sheet Metal & Mechanical, LLC

Trade Name, if any

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

Street 8100 Cryden Way

City Forestville

State Maryland

ZIP Code + 4 20747

7. Date entered into:

2 / 14 / 2013

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

Name Sean

Keehn

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

Treasurer  
(If other title, see  
instructions)

On

3/15/13

Date

302-541-4845

Telephone Number

On

Date

Telephone Number

Filer:	File Number C-
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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, \$250/hr

<b>Specific Activities to be Performed</b>	
<p>11. For each activity, separately list in detail the information required (See instructions):</p> <p>a. Nature of activity:</p> <p>Conduct training of employees on representation election requirements and various other aspects of the National Labor Relations Act. Also, answer employee questions regarding collective bargaining and related topics in small group meetings and individual discussions.</p>	
<p>11.b. Period during which performed:</p> <p>2/21/2013 - present</p>	<p>11.c. Extent performed:</p> <p>On-going</p>
<p>11.d. Name and address through whom performed:</p> <p>Name</p> <p>Organization Axiomatix, L.L.C.</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street 6 Riverside St.</p> <p>City Amityville</p> <p>State New York ZIP Code + 4 11701</p>	<p>Additional Name and address through whom performed, if any:</p> <p>Name</p> <p>Organization</p> <p>P.O. Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>
<p>12.a. Identify subject groups of employees:</p> <p>Fabrication Shop and Field Installation employees</p>	<p>12.b. Identify subject labor organizations:</p> <p>Sheet Metal, Rail, Air, &amp; Transportation Workers Local 100</p>