## ้องลักชื่อrds เฟลรhington, DC 20210

## AGREEMENT AND ACTIVITIES REPORT

and Budget No. 1245-0003 Expires 08-31-2016



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.

C- 776 1. File Number: Person Filing 3. Any other address where records necessary to verify this report are kept: 2. Name and mailing address (include ZIP Code): Name Jara Simon Name Title Title Organization Pinnacle Labor Solutions Organization P.O. Box, Bldg., Room No., if any P.O. Box 710 159 P.O. Box, Bldg., Room No., if any Street Street SANTER City ZIP Code + 4 47 () 14 ZIP Code + 4 State State California 4. Date fiscal year ends: 5. Type of person: Other (Specify): 31 Partnership c. 🗸 Corporation d. Dec Individual b. **Nature of Agreement or Arrangement** 6. Full name and address of employer with whom made (include ZIP Code): 7. Date entered into: Name 8. Name of person(s) through whom made: Organization International Paper Company Drake Name Al Trade Name, if any Name P.O. Box, Bldg., Room No., if any Name Street 6400 Poplar Avenue City Memphis Name 38197 ZIP Code + 4 State Tennessee 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.) President 14. Signed Treasurer 13. Signed (If other title, see (If other title, see instructions) instructions) President Treasurer Title Title on 10.28-14 619.509.6841 Date 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.): \$3000 per day per consultants plus reasonable travel expense.

## **Specific Activities to be Performed**

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

Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.

11.b. Period during which performed: various days beginning 8/1/12	11.c. Extent performed: Fully Performed
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:
Name Simon Jara	Name
Organization Pinnacle Labor Solutions	Organization
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any
Street	Street
City	City
State California ZIP Code + 4	State ZIP Code + 4
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:
Production, Maintenance, Shipping, & Receiving	Teamsters