U.S. Department of Labor Office of Labor-Management

FORM LM-20 AGREEMENT AND ACTIVITIES REPORT

Form approved Office of Management and Budget No. 1245-0003 Expires 03-31-2019

Jundards DC 20210 RECEIVED

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)

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READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.	
OLMS DE	
1. File Number: C- 65668	
Person Filing	
2. Name and mailing address (include ZIP Code):	Any other address where records necessary to verify this report are kept:
Name Kirk O Cummings	Name /
Title President	Title
Organization Cummings Group, LLC	Organization
P.O. Box, Bldg., Room No., if any 761	P.O. Box, Bldg., Room No., if any
Street	Street
City Lapeer	City
State Michigan ZIP Code + 4 48446	State ZIP Code + 4
Date fiscal year ends: 5. Type of person:	
Dec / 16 a. Individual b. Partnership c. Corporation d. Other (Specify): LLC	
Nature of Agreement or Arrangement	
Full name and address of employer with whom made (include ZIP Code):	7. Date entered into: 6 / 14 / 2016
Name Daniel Seward	Name of person(s) through whom made:
Organization Penn Stainless products, Inc.	Name
Trade Name, if any	
P.O. Box, Bldg., Room No., if any	Name
Street 190 Kelly Rd.	Name
City Quakertown	Name
State Pennsylvania ZIP Code + 4 19841	Name
Signatures	
Each of the undersigned declares, under penalty of perjury and other applicable the information contained in any accompanying documents) has been examined true, correct, and daylipleter (See Section VII on penalties in the instructions.)	penalties of law, that all of the information submitted in this report (including I by the signatory and is, to the best of the undersigned's knowledge and belief,
13. Signed President (If other title, see	14. Signed Treasurer (If other title, see
Title President instructions)	Title Treasurer instructions)
On July 9, 2016 248-210-1162	On
Date Telephone Number	Date Telephone Number

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9. Check the appropriate box to indicate whether an object of the activities to	
a. Sheek the appropriate box to indicate whether an object of the activities (undertaken in directly er indirectly:
	Jndertaken, is directly or indirectly:
a. To persuade employees to exercise or not to exercise, or persuad collectively through representatives of their own choosing.	de employees as to the manner of exercising, the right to organize and bargain
b. To supply an employer with information concerning the activities such employer, except information for use solely in conjunction v	of employees or a labor organization in connection with a labor dispute involving with an administrative or arbitral proceeding or a criminal or civil judicial proceeding.
10. Terms and conditions (Explain in detail; see instructions. Written agreem	nents must be attached):
Oral	
Specific Activities to be Performed	
11. For each activity, separately list in detail the information required (See in	
a. Nature of activity:	
Meet with employees to explain the NLRB election	n process and educate them about unions.
11.b. Period during which performed:	11.c. Extent performed:
06/14/2016-06/23/2016	100%
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:
Name Kirk O Cummings	Name Joseph Brock
Organization Cummings Group, LLC	Organization
P.O. Box, Bldg., Room No., if any 761	P.O. Box, Bldg., Room No., if any
	Street 151 Forge Rd.
Street	
Street City Lapeer	City Delran

12.b. Identify subject labor organizations:

Teamsters Local 773

12.a. Identify subject groups of employees:

Penn Stainless production employees