

19-800  
  
**Labor Information Services**

PO Box 6063  
Malibu, CA 90264  
800-721-4547  
310-589-5229 (FAX)

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**FAX TRANSMISSION COVER SHEET**

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Date: 10/26/01  
To: Susan Browdy  
Fax: 412-395-5409  
Subject: JLG, Inc. - LM-20  
Sender: Marta De los Rios

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YOU SHOULD RECEIVE 2 PAGE(S), INCLUDING THIS COVER SHEET. IF YOU DO NOT  
RECEIVE ALL THE PAGES, PLEASE CALL (310) 589-5225

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**Per your request.**

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OLMS PITTSBURGH		
SB		

Form approved - OMB No. 1215-0188  
Expires 11-30-2002

This report is mandatory under P.L. 86-257 as amended. Failure to comply may result in criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 439, 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).

File No. C. 464

## A. Person Filing

1. Name and mailing address (include ZIP code):

Labor Information Service, Inc.  
PO Box 6063  
Malibu, CA 90264

2. Any other address where records necessary to verify this report are kept:

None

3. Date fiscal year ends:

12/31/01

4. Type of person:

a. ☐ Individual b. ☐ Partnership c. ☒ Corporation d. ☐ Other (Specify):

## B. Nature of Agreement or Arrangement

5. Full name and address of employer with whom made (include ZIP code):

Agar Supply  
225 John Hancock Road  
Taunton, MA 02780

6. Date entered into:

10/12/01

7. Names of persons through whom made:

Alan Bressler

8. 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 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.

9. Terms and conditions (Explain in detail; see Part B-9 of instructions):

Starting 10/13/01 through 10/17/01, our firm will be conducting meetings with employees from the voting unit to discuss the realities of signing authorization cards and voting in the upcoming election. A maximum of 20 hours will be allocated to this work. Billing of time and expenses will be done monthly. There is no written agreement as to a maximum billable amount.

## C. Specific Activities to be Performed

10. For each activity, separately list in detail the information required (See Part C-10 of instructions):

a. Nature of activity:

To inform employees in the voting unit to exercise their right to choose whether or not they wish to be represented for the purposes of collective bargaining.

b. Period during which performed:

10/13/01 through 10/17/01

c. Extent performed:

On-going meetings, up to 24 hours before the election will be performed. These will be group or individual meetings to discuss NLRA basic guidelines, review ACT and answer questions.

d. Names and addresses of persons through whom performed:

Henry Desch  
PO Box 6063  
Malibu, CA 900264

11. Identify (a) Subject employees, groups of employees, and (b) labor organization:

All voting employees in bargaining unit.

D. Verification and Signature. The person in item 1 above and each of his undersigned authorized officers declares, under penalty of law, that all information in this report, including all attachments incorporated therein or referred to in this report, has been examined by him and is, to the best of his knowledge and belief, true, correct, and complete.

Signed:

President

Signed:

Treasurer

(if other title, cross out and write in correct title above.)

(if other title, cross out and write in correct title above.)

city

Malibu

state

CA

Date

on: 11-30-01

city

state

Date

on: 11/30/01

Form LM-20  
(Feb. 1990)

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File No. C. 464

## A. Person Filing

1. Name and mailing address (include ZIP code):  Labor Information Service, Inc. PO Box 6063 Malibu, CA 90264		2. Any other address where records necessary to verify this report are kept:  None
3. Date fiscal year ends: 12/31/01	4. Type of person: a. <input type="checkbox"/> Individual b. <input type="checkbox"/> Partnership c. <input checked="" type="checkbox"/> Corporation d. <input type="checkbox"/> Other (Specify):	

## B. Nature of Agreement or Arrangement

5. Full name and address of employer with whom made (include ZIP code): Lubricating Specialties 8015 Paramount Blvd Pico, Rivera, CA 90660	6. Date entered into: 10/8/01
7. Names of persons through whom made: Steve Miller	

8. 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 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.

9. Terms and conditions (Explain in detail; see Part B-9 of instructions):  
Starting 10/8/01 through 10/10/01, our firm will be conducting meetings with employees from the voting unit to discuss the realities of signing authorization cards and voting in the upcoming election. A maximum of 25 hours will be allocated to this work. Billing of time and expenses will be done monthly. There is no written agreement as to a maximum billable amount.

## C. Specific Activities to be Performed

10. For each activity, separately list in detail the information required (See Part C-10 of instructions):

## a. Nature of activity:

To inform employees in the voting unit to exercise their right to choose whether or not they wish to be represented for the purposes of collective bargaining.

## b. Period during which performed:

10/8/01 through 10/10/01

## c. Extent performed:

On-going meetings, up to 24 hours before the election will be performed. These will be group or individual meetings to discuss NLRA basic guidelines, review ACT and answer questions.

## d. Names and addresses of persons through whom performed:

A. Tovar - Labor Information Services, Inc. - PO Box 6063 - Malibu, CA 90264



11. Identify (a) Subject employees, groups of employees, and (b) labor organization:

All voting employees in bargaining unit.

D. Verification and Signature. The person in item I above and each of his undersigned authorized officers declares, under penalty of law, that all information in this report, including all attachments incorporated therein or referred to in this report, has been examined by him and is, to the best of his knowledge and belief, true, correct, and complete.

Signed: (if other title, cross out and write in correct title above.) city Malibu state CA Date on: 12/31/01 at:	President	Signed: _____ (if other title, cross out and write in correct title above.) city state Date on: 12/31/01 at:	Treasurer
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Form LM-20  
(Feb. 1990)



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File No. C. 464

**A. Person Filing**

1. Name and mailing address (include ZIP code):  Labor Information Service, Inc. PO Box 6063 Malibu, CA 90264		2. Any other address where records necessary to verify this report are kept:  None	
3. Date fiscal year ends: 12/31/01	4. Type of person: a. <input type="checkbox"/> Individual b. <input type="checkbox"/> Partnership c. <input checked="" type="checkbox"/> Corporation d. <input type="checkbox"/> Other (Specify):		

**B. Nature of Agreement or Arrangement**

5. Full name and address of employer with whom made (include ZIP code):  Gallup Organization, Inc. 301 South 68th Street Place Lincoln, NE 68510		6. Date entered into: 9/3/01
		7. Names of persons through whom made: Ken Anderson
8. Check the appropriate box to indicate whether an object of the activities undertaken, is directly or indirectly: A. <input checked="" type="checkbox"/> To persuade employees to exercise or not to exercise, or employees as to the manner of exercising, the right to organize and bargain collectively through representatives of their own choosing. B. <input type="checkbox"/> 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.		

**9. Terms and conditions (Explain in detail; see Part B-9 of instructions):**

Starting 9/4/01 through the election date, our firm will be conducting meetings with employees from the voting unit to discuss the realities of signing authorization cards and voting in the upcoming election. A maximum of 50 hours will be allocated to this work. Billing of time and expenses will be done monthly. There is no written agreement as to a maximum billable amount.

**C. Specific Activities to be Performed**

10. For each activity, separately list in detail the information required (See Part C-10 of instructions):

**a. Nature of activity:**

To inform employees in the voting unit to exercise their right to choose whether or not they wish to be represented for the purposes of collective bargaining.

**b. Period during which performed:**  
9/4/01 through election date

**c. Extent performed:**

On-going meetings, up to 24 hours before the election will be performed. These will be group or individual meetings to discuss NLRA basic guidelines, review ACT and answer questions.

**d. Names and addresses of persons through whom performed:**

T. Corley  
Labor Information Services, Inc. - PO Box 6063 - Malibu, CA 90264

11. Identify (a) Subject employees, groups of employees, and (b) labor organization:  
All voting employees in bargaining unit.



**D. Verification and Signature.** The person in item 1 above and each of his undersigned authorized officers declares, under penalty of law, that all information in this report, including all attachments incorporated therein or referred to in this report, has been examined by him and is, to the best of his knowledge and belief, true, correct, and complete.

Signed: President		Signed: _____ Treasurer	
(if other title, cross out and write in correct title above.)		(if other title, cross out and write in correct title above.)	
city Malibu state CA	Date on: 10/11/01	city _____ state _____	Date on: _____