

U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

AMENDED

FORM LM-20 AGREEMENT AND ACTIVITIES REPORT

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

For Official Use Only: In penalties as provided by 29 U.S.C. 439 or 440. Required of pand Organizations, Under Section 203(b) of the Labor-Manager 29 20/16	432559			
READ THE INSTRUCTIONS CAREFUL	LLY BEFORE PREPARING THIS REPORT.			
MS DROP				
1. File Number: C- 7/0				
Person Filing				
2. Name and mailing address (include ZIP Code):	Any other address where records necessary to verify this report are kept:			
Name Scott Michel	Name			
Title	Title VII			
Organization	Organization			
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any			
Street 819 Herman Rd	Street			
City Horsham	City			
State Pennsylvania ZIP Code + 4 19044	State ZIP Code + 4			
Date fiscal year ends: 5. Type of person:				
Dec 31 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): 7. Date entered into:				
Name	8. Name of person(s) through whom made:			
Organization Advanced Disposal				
Trade Name, if any	Name Megan Ouzts			
P.O. Box, Bldg., Room No., if any	Name			
Street 1477 E.North Territorial Rd	Name			
City Whitmore Lake	Name			
State Michigan ZIP Code + 4 48189	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 complete. (See Section VII on penalties in the instructions.) 13. Signed President (If other title, see	e penalties of law, that all of the information submitted in this report (including d by the signatory and is, to the best of the undersigned's knowledge and belief, 14. Signed			
Table (instructions)	Title d instructions)			
On 12/20/2016 215 359 7155	On			
Date Telephone Number	Date Telephone Number			

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Agreement and activities report

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File Number C- 7/0

9. Ch	eck the appropriate box to	indicate whether an o	bject of the activities u	ındertaken, is d	irectly or indirectly:
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- 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.):
 Verbal agreement to provide consultation and give speeches to employees about exercising their right to organize and bargain collectively. Terms are \$187.50 per hour plus expenses.

Specific Activities to be Performed				
11. For each activity, separately list in detail the information required (See instructions): a. Nature of activity: To provide consultation and give speeches to employees regarding their right to organize and bargain collectively.				
11.b. Period during which performed: Various days beginning 10/31/2016	11.c. Extent performed: Fully			
11.d. Name and address through whom performed: Name Organization LRI Consulting Services Inc. P.O. Box, Bldg., Room No., if any Street 7850 S. Elm Place, Suite E. City Broken Arrow State Oklahoma ZIP Code + 4 74011	Additional Name and address through whom performed, if any: Name Organization P.O. Box, Bldg., Room No., if any Street City State , ZIP Code + 4			
12.a. Identify subject groups of employees: Residential drivers and loaders	12.b. Identify subject labor organizations: Teamsters			