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

FORM LM-20 **AGREEMENT AND ACTIVITIES REPORT**

Form approved Office of Management and Budget No. 1215-0188 Expires 09-30-2011



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.

1. File Numbe	er: C- 00525	429.153	- 20.4241				
Person Fill	ing					,	
2. Name and mailing address (include ZIP Code):				3. Any other address where records necessary to verify this report are kept:			
Name			Name				
Title				Title			
Organization LRI Consulting Services, Inc.				Organization			
P.O. Box, Bldg., Room No., if any				P.O. Box, Bldg., Room No., if any			
Street 7850 S Elm Place, Suite E				Street			
City Broken Arrow				City			
State Okla	e Oklahoma ZIP Code + 4 74011			tate ZIP Code + 4			
4. Date fisca	al year ends:	5. Type of person:				-	
Dec	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: 1 / 21 / 2010			
Name				•			
Organization Archer Daniels Midland				8. Name of person(s) through whom made:			
Trade Name, if any ADM				Name Terry White			
P.O. Box, Bldg., Room No., if any				Name			
Street 1001 North Brush College Road				Name			
City Decatur				Name			
State Ill	inois	ZIP Code + 4 62521	Name				
Signatures							
the informat true, correct	undersigned declares, tion contained in any ac t, and complete. See S	under penalty of perjury and other applicable companying documents) has been examined of the companying documents in the instructions.) President (If other title, see instructions)	penalties of la d by the signate 14. Signed Title	w, that all of the impry and is, to the be	ormation submitted in this rest of the undersigned know	port (including vledge and belief, Treasurer (If other title, see instructions)	
On	4/28/2010	918-455-9995	On	4/28/2010	918-455-9995		
	Date	Telephone Number		Date	Telephone Number		
Form LM-20 (2	003)					Page 1 of 2	

Filer: T LRI Consulting Services, Inc.	File Number C- 00525					
9. Check the appropriate box to indicate whether an object of the activities under	taken, is directly or indirectly:					
a. To persuade employees to exercise or not to exercise, or persuade en collectively through representatives of their own choosing.	nployees as to the manner of exercising, the right to organize and bargain					
b. To supply an employer with information concerning the activities of em such employer, except information for use solely in conjunction with a	ployees or a labor organization in connection with a labor dispute involving n 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.):					
Agreement to provide consultation, to give speeches to employees about exercising their right to organize and bargain collectively.						
•						
Specific Activities to be Performed						
11. For each activity, separately list in detail the information required (See instructions):						
a. Nature of activity: Employed to give speeches to employees regarding their rights to organize and bargain collectively.						
11.b. Period during which performed: 2/10, 2/11, 2/15/2010	11.c. Extent performed: Fully Performed					
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:					
Name Joe Brock	Name					
Organization East Coast Labor Relations LLC	Organization					
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any					
Street 151 Forge Road	Street					
City Delran	City					
State New Jersey ZIP Code + 4 08075	State ZIP Code + 4					
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:					
production and maintenance	Bakery, Confectionery, Tobacco					

AGREEMENT FOR CONSULTING SERVICES

Terry White TO:

Archer Daniels Midland 1001 North Brush College Road

Decatur, IL 62521

DATE:

January 21, 2010

PROPOSED INTERVENTION:

LRI Consulting Services, Inc. will provide consulting services to assist ADM in communicating factual and legally accurate information to eligible voters in NLRB-conducted election to enable voters to make fully informed choices in voting.

TIMING:

The project will begin on or about 2/10/2010 and conclude on or about 2/15/2010.

TERMS AND CONDITIONS:

Fees: The fee for this project is \$375 per hour plus travel expenses.

Payment Terms: You agree to pay consulting invoices upon receipt. You agree and acknowledge that failure to pay fees or expenses associated with this project under these terms will result in reassignment of the consultant(s) and a penalty of 2% per month until all outstanding invoices are paid in full.

Expenses: Expenses will be billed as actually incurred and are due on presentation of the invoice. Reasonable business expenses include, but are not limited to, transportation (air, rental car, taxi, etc.), lodging, food, and costs for campaign communication materials.

You further acknowledge that no representation by LRICS or its representatives were relied on by you or any member of your company in entering this agreement, and that this document represents the full understanding of the parties. Your deposit, in the absence of your signature below, indicates your acceptance of this project and the terms and conditions as stated herein.

ACCEPTANCE:

We accept the Agreement and terms described above:

For LRI Consulting Services, Inc.

For ADM

Phillip B. Wilson

President - General Counsel

DATE: January 21, 2010

Suite E

DATE:

7850 South Elm Place

Name: Terry White

Title: Manager of Employee Benefits Strategy