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. 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)

E CARDEOL	READ THE INSTRUCTIONS CAREFUL	LLY BEFORE	PREPARING THIS RI	EPORT.		
1. File Number: C- 5/09						
Person Filing		1				
Name and mailing address (include ZIP Code):		Any other address where records necessary to verify this report are kept:				
Name Bradley E White		Name n/a				
Title President		Title				
Organization Interlate Systems, Inc.		Organization				
P.O. Box, Bldg., Room No., if any		P.O. Box, Bldg., Room No., if any				
Street 145 S. Lincolnway		Street				
City North Aurora		City				
State Illinois	ZIP Code + 4 60542	State		ZIP Code + 4		
4. Date fiscal year ends:	5. Type of person:					
Dec / 31	a. Individual b. Partnership	c. Corpor	ation d. Other (S	Specify):		
Nature of Agreement or Arrangement						
6. Full name and address of employer with whom made (include ZIP Code):		7. Date entered into: 6 / 9 / 2015				
Name Joseph Wieczorek		8. Name of person(s) through whom made:				
Organization United Steel & Fasteners Inc.						
Trade Name, if any			Name			
P.O. Box, Bldg., Room No., if any		Name				
Street 1500 Industrial Dr.		Name				
City Itasca	Name					
State Illinois	ZIP Code + 4 60143	Name				
Signatures.						
the information contained in any accord	ber penalty of perjury and other applicable in panying documents) has been examined ion VII on penalties in the instructions.)	e penalties of la d by the signate	w, that all of the informory and is, to the best	mation submitted in this re of the undersigned's know	eport (including vledge and belief,	
13. Signed	President (If other title, see	14. Signed			Treasurer (If other title, see	
Title President (instructions)	Title	Treasurer	<u></u>	instructions)	
00/05/2015	0.000.0014			630-966-0214		
On 08/05/2015 63 Date	0-966-0214 Telephone Number	On	Date	Telephone Number		
	•					

Filer: Bradley White Interlate Systems, Inc.		File Number C-				
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.						
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10. Terms and conditions (Explain in detail; see instructions. Written agreements must be attached.):						
No Written agreement was executed. Work performed on an hourly basis, as needed. \$180 to \$360,						
depending on activity						
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Specific Activities to be Performed						
11. For each activity, separately list in detail the information required (See instructions):						
a. Nature of activity: Provide voting unit employees with information concerning collective bargaining and work stoppages.						
Editing of written documents posted at times for unit perusal.						
11.b. Period during which performed:	11.c. Extent performed:	<u> </u>				
mid to late June 2015	The Extent performed.					
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:					
Name Bradley E White	Name Viviana	Marin				
-	Totowlate	Customs Ins				
Organization Interlate Systems, Inc.	Organization Interlate Systems Inc.					
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any					
Street 145 S. Lincolnway	Street 145 S, Lincolnway					
City North Aurora	City North Aurora					
State Illinois ZIP Code + 4 60542	State Illinois	ZIP Code + 4 60542				
12.a. Identify subject groups of employees:	12.b. Identify subject labor o	rganizations:				
25 Warehouse Employees	IBEW local 134					