

# FORM LM-20

## AGREEMENT AND ACTIVITIES REPORT

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

For Official Use Only



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.

439769

1. File Number: C- 00367

### Person Filing

2. Name and mailing address (include ZIP Code):

Name Erick Becker

Title CEO

Organization The American Consulting Group, Inc.

P.O. Box, Bldg., Room No., if any

Street 23361 Madero, Suite 220

City Mission Viejo

State California

ZIP Code + 4 92691

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

Name

Title

Organization

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

4. Date fiscal year ends:

Dec / 10

5. Type of person:

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):

Name James Johnson

Organization Lowe's

Trade Name, if any

P.O. Box, Bldg., Room No., if any Mail Code: 2WHR

Street 1000 Lowe's Drive

City Mooresville

State North Carolina

ZIP Code + 4 28117

7. Date entered into:

6 / 1 / 2007

8. Name of person(s) through whom made:

Name James Johnson

Name

Name

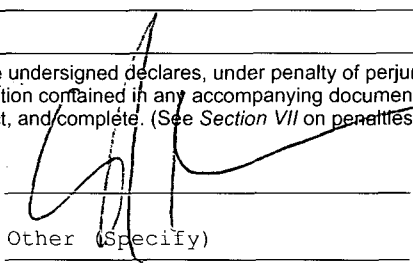
Name

Name

### Signatures

Each of the undersigned declares, under penalty of perjury and other applicable penalties of law, that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See Section VII on penalties in the instructions.)

13. Signed

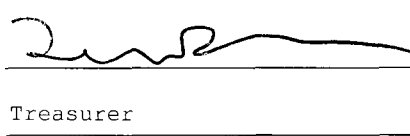


President  
(If other title, see  
instructions)

Title Other (Specify)

CEO

14. Signed



Treasurer  
(If other title, see  
instructions)

Title Treasurer

On 9/7/2010

Date

949-452-1840

Telephone Number

On 9/7/2010

Date

949-452-1840

Telephone Number

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.

10. Terms and conditions (Explain in detail; see instructions. Written agreements must be attached.):

Employed on a per diem basis by Employer listed in No. 5 above. No written agreement was entered into.

#### Specific Activities to be Performed

11. For each activity, separately list in detail the information required (See instructions):

a. Nature of activity:

Met with employees to provide information on the legal process of organizing, unions, and collective bargaining. Answer employee questions and review documentation with them regarding Teamsters Local 166.

11.b. Period during which performed:

June 2007

11.c. Extent performed:

Completed

11.d. Name and address through whom performed:

Name Robert Long  
Organization The American Consulting Group, Inc.  
P.O. Box, Bldg., Room No., if any  
Street 23361 Madero, Suite 220  
City Mission Viejo  
State California ZIP Code + 4 92691

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:

Production and Warehouse employees

12.b. Identify subject labor organizations:

Teamsters Local 166