

# FORM LM-20

## AGREEMENT AND ACTIVITIES REPORT

Form approved  
Office of Management  
and Budget  
No. 1245-0003  
Expires 07-31-2019

For Official-Use-Only

US DOJ  
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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.

721090

1. File Number C- 703

### Person Filing

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

Name Byron Clay  
Title President  
Organization BJC & Associates  
P.O. Box, Bldg., Room No., if any  
Street 10108 Fehlberg Drive  
City St. John  
State Indiana ZIP Code + 4 46373

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 18

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 Genny Findlay  
Organization Meggitt Control Systems  
Trade Name, if any  
P.O. Box, Bldg., Room No., if any  
Street 1785 Voyager Ave  
City Simi Valley  
State California ZIP Code + 4 93063


7. Date entered into: 11 / 1 / 2018


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

Name  
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   
Title President  
President  
(If other title, see instructions)

14. Signed   
Title Treasurer  
Treasurer  
(If other title, see instructions)

On 3/10/20 577-7420  
Date Telephone Number

On 3/10/20 214-577-7420  
Date 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.):

Written agreement attached. Engaged by Meggitt Control System to educate employees on all aspects of unions so that they could make an informed decisions on whether or not to support a union.

#### Specific Activities to be Performed

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

a. Nature of activity:

Held meetings to educate employees on all aspects of unions so that they could make an informed decisions on whether or not to support a union.

11.b. Period during which performed:

9/18-18 to 9/20/18

11.c. Extent performed:

~~Complete~~ Complete

11.d. Name and address through whom performed:

Name ~~Byron Clay~~ BJC & Associates

Organization Reliant Labor Consultants

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

Street 10108 Fehlberg Court

City St John

State Indiana ZIP Code + 4 46373

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 Maintenance workers

12.b. Identify subject labor organizations:

International Association of Machinists