Agreement and Activities Report

U.S. Department of Labor **Employment Standards Administration** Office of Labor-Management Standards

Revised

This report is mandatory under P.L. 86-257 as amended. Failure to comply may result in criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 439, 440.

Form approved - OMB No. 1215-0188 Expires 11-30-2002

Tein No To

Inder Section 203(b) of the Labor-Manage						
A. Person Filing					-25 45- 2	
. Name and mailing address (include ZIP code):		2. Any other a	2. Any other address where records necessary to verity this report are kept:			
ahartatawakan Dawisa Ina			No	ne		
"abor Information Service, Inc. PO Box 6063						
Malibu, CA 90264						
3. Date fiscal year ends: 4. Typ	e of person:					
12/31/03	🗌 Individu al b. [Partnership	C. 🛛 Corporation	d. 🔲 Other	(Specify)	:
B. Nature of Agreement or Arrangem	ent				***************************************	
5. Full name and address of employer w		ie ZIP code):	6. Date entered into:	2/4/03		
Bon Secour & Canterbury Partnership for Ca						
Christ Hospital 176 Palisades Avenue		7. Names of persons	through whom	made:		
Jersey City, NJ 07308		Laura Ostroff				
8. Check the appropriate box to indicate	whether an object of t	he activities unde	rtaken, is directly or Inc	lirectly:		
A. XI To persuade employees to	exercise or not to ex	ercise, or emp	loyees as to the ma	nner of exe	rcising, 1	he right to
organize and bargain collec	tively through represe	entatives of their	own choosing.			
b. To supply an employer with i	nformation concerning	g the activities of	employees or a labor of	rganization in o	connection	with a labor
dispute involving such empl or a criminal or civil judicial		ion for use solel)	in conjunction with an	administrative	OFBIDIUS	i proceeding
				···	·	<u> </u>
Terms and conditions (Explain in detail	; see rait 5-9 of matri	uctions).				
C. Specific Activities to be Per 10. For each activity, separately list in de		quired (See Part C	:-10 of instructions):			
C. Specific Activities to be Per 10. For each activity, separately list in de a. Nature of activity: To inform employees in the voting unit to exbargaining.	tail the information req	, ,	·	ed for the purpos	es of collec	tive
10. For each activity, separately list in de a. Nature of activity: To inform employees in the voting unit to ex	tail the information req	, ,	·	ed for the purpos	es of collec	tive
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Agreement and Activities Report

U.S. Department of Labor **Employment Standards Administration** Office of Labor-Management Standards

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Required of Persons, including Lat Under Section 203(b) of the Labor-			•	File No.	C. 464	
A. Person Filing					· · · · · ·	
Name and mailing address (include ZIP code):		2. Any	2. Any other address where records necessary to verity this report are kept;			
Labor Information Service, Inc. PO Box 6063 Malibu, CA 90264 3. Date fiscal year ends: 4. Type of person:				Nane	Cif_\	
12/31/03	a. Individ	iuai þ. 🗀 rainie	ranip C. <u>M.</u> Corpon	mtion d. 🔲 Other (specity):	
B. Nature of Agreement or Arr	angement					
5. Full name and address of employer with whom made (include Bon Secour & Canterbury Partnership for Care Christ Hospital			e): 6. Date entered	into: 2/4/03		
			7. Names of pe	rsons through whom i	nade:	
176 Palisades Avenue Jersey City, NJ 07306			Laura Ostroff			
8. Check the appropriate box to i	ndicate whether a	object of the activitie	es undertaken, is directly	or Indirectly:		
organize and bargain b. To supply an employe	n collectively throu er with information th employer, exce	igh representatives on concerning the active pt information for use	employees as to the of their own choosing. Their own choosing. Their own choosing it is solely in conjunction with their own properties.	bor organization in c	onnection with a labor	
9. Terms and conditions (Explain	· ' '					
C. Specific Activities to b	done monthly. Then	e is no written agreeme	nt as to a maximum biliable	amount.	this work assignment.	
a. Nature of activity: To inform employees in the voting of bargaining.	unit to exercise their	right to choose whether	r or not they wish to be repr	esented for the purpose	s of collective	
b. Period during which per 2/4/03 until end date if			ed: up to 24 hours before the el o discuss NLRA basic guide			
d. Names and addresses M. Rizzo; J. Rodriguez Labor Information Services, Inc. PO Box 6063 - Maiibu, CA 90265	of persons throug	h whom performed:				
11. Identify (a) Subject employees All voting employees in bargaining		es, and (b) labor organia	zation:			
D. Verification and Signature. It that all information in this report to the best of his knowledge and	, including all attac	hments incorporated t				
Signed: Quiut	Suul@	President	Signed:		Treasurer	
(if other title, cross out and write	in correct title abo		(if other title, cross out a	and write in correct titl		
city	state	Date	city	state	Date	
at: Malibu	CA	on: 5/5/03	at:		on:	

Agreement and Activities Report

U.S. Department of Labor Employment Standards Administration Office of Labor-Management Standards

Form approved - OMB No. 1215-0188 This report is mandatory under P.L. 86-257 as amended. Failure to comply may Expires 11-30-2002 result in criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 439, 440. C. Required of Persons, including Labor Relations Consultants and Other Individuals and Organizations, File No. 464 Under Section 203(b) of the Labor-Management Reporting and Disclosure Act of 1959, as amended (LMRDA). A. Person Filing 2. Any other address where records necessary to verity this report are kept: 1. Name and mailing address (include ZIP code): None Labor Information Service, Inc. PO Box 6063 Malibu, CA 90264 4. Type of person: 3. Date fiscal year ends: 12/31/03 C. Corporation d. Other (Specify): Partnership a. 🔲 Individual B. Nature of Agreement or Arrangement 6. Date entered into: 5. Full name and address of employer with whom made (include ZIP code): 2/10/03 Pan O Gold 444 East Street Germain 7. Names of persons through whom made: PO Box 848 loward R. Alton III St. Cloud, MN 56302 8. Check the appropriate box to indicate whether an object of the activities undertaken, is directly or indirectly: To persuade employees to exercise or not to exercise, or employees as to the manner of exercising, the right to organize and bargain collectively through representatives of their own choosing. To supply an employer with information concerning the activities of employees or a labor organization in connection with a labor b. 🔲 dispute involving such employer, except information for use solely in conjunction with an administrative or arbitral proceeding or a criminal or civil judicial proceeding. Terms and conditions (Explain in detail: see Part B-9 of instructions): Starting 2/10/03 until the assignment ends (no end date has been determined), our firm will be conducting meetings with employees from the voting unit to discuss the realities of signing authorization cards and voting in the upcoming election. There is no maximum of hours allocated to this work assignment. Billing of time and expenses will be done monthly. There is no written agreement as to a maximum billable amount. C. Specific Activities to be Performed 10. For each activity, separately list in detail the information required (See Part C-10 of instructions): a. Nature of activity: To inform employees in the voting unit to exercise their right to choose whether or not they wish to be represented for the purposes of collective bargaining. c. Extent performed: b. Period during which performed: On-going meetings, up to 24 hours before the election will be performed. These will be group or 2/10/03 until end date if assignment individual meetings to discuss NLRA basic guidelines, review ACT and answer questions d. Names and addresses of persons through whom performed: A. Tovar Labor Information Services, Inc. PO Box 6063 - Malibu, CA 90265 11. Identify (a) Subject employees, groups of employees, and (b) labor organization: All voting employees in bargaining unit. D. Verification and Signature. The person in item I above and each of his undersigned authorized officers declares, under penalty of law, that all information in this report, including all attachments incorporated therein or referred to in this report, has been examined by him and is, to the best of his knowledge and belief, true, correct, and complete. Signed: Signed: Treasurer President (if other title, cross out and write in correct title above. (if other title, cross out and write in correct title above.) Date city Date state state CA Malibu 5/5/03 at: at: