ម៉ះS. 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 10-31-2013



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 CARE	FULLY BEFORE PREPARING THIS REPORT.	
1. File Number: C- 00322		
Person Filing		
Name and mailing address (include ZIP Code):	Any other address where records necessary to verify this report are kept:	
Name Peter A List	Name	
Title Founder & CEO	Title	
Organization Kulture Consulting, LLC	Organization	
P.O. Box, Bldg., Room No., if any P.O. Box 2877	P.O. Box, Bldg., Room No., if any	
Street	Street	
City Pawleys Island	City	
State South Carolina ZIP Code + 4 29585	State ZIP Code + 4	
4. Date fiscal year ends: 5. Type of person:		
Dec / 19 a. Individual b. Partners	hip c. Corporation d. Other (Specify): LLC	
Nature of Agreement or Arrangement		
6. Full name and address of employer with whom made (include ZIP Code):	7. Date entered into: 10 / 9 / 2019	
Name	8. Name of person(s) through whom made:	
Organization GF Hotels		
Trade Name, if any Marriott Hotel Hartford	Name Vineet Nayyar	
P.O. Box, Bldg., Room No., if any	Name	
Street 230 North College Street	Name	
City Charlotte	Name	
State North Carolina ZIP Code + 4 28202	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 14. Signed Treasurer		
(If other title, see	(If other title, see	
Title Other (Specify) instructions)	Title Other (Specify) instructions)	
Founder & CEO	Manager of Administration	
On 11/1/2019 843-314-0383	On 11/1/2019 843-314-0383	
Date Telephone Number	Date Telephone Number	

Filer: Peter List Kulture Consulting, LLC	File Number C- 00322	
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.):		
Oral agreement made through Kulture Consulting, LLC \$3,500 per day, per consultant, plus actual and reasonable expenses. No formal agreement relative to duration or amount of hours to be performed.		
Specific Activities to be Performed		
11. For each activity, separately list in detail the information required (See instructions):		
a. Nature of activity:		
Traveled to employer; met with management personnel; provided information to management and employees relative to the National Labor Relations Act, employees' Section Seven Rights, as well as information regarding the NLRB election process and collective bargaining; answered questions.		
11.b. Period during which performed: Various Dates Beginning 10/9/2019	11.c. Extent performed: Completed	
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:	
Name Carlos Ortiz	Name John A Negroni	
Organization Solutions Labor Relations Consultants	Organization The Tally Consultantcy, LLC	
P.O. Box, Bldg., Room No., if any Suite 210-106	P.O. Box, Bldg., Room No., if any PO BOX 494	
Street 7426 Cherry Avenue	Street	
City Fontana	City Norwalk .	
State California ZIP Code + 4 92336	State Connecticut ZIP Code + 4 06852	
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:	
All full time and regular part-time employees employed by the employer at its Marriott Hotel Hartford location Farmington, Connecticut 06032.	Union Unknown	
	-NO PETITION .	