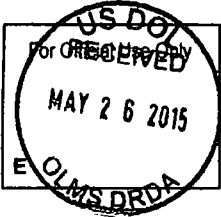


FORM LM-20

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 CAREFULLY BEFORE PREPARING THIS REPORT.

593215

1. File Number: C-736

Person Filing

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

Name DAVID N. STROM

Title CEO

Organization LABOR CONSULTING GROUP, INC

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

Street 535 BRISWOLD, Suite 111-237

City DETROIT

State Michigan ZIP Code + 48226

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:

1

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 DAVID L SMITH Vice Pres.

Organization CAMACO LORAIN MANUFACTURING

Trade Name, if any CAMACO

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

Street 3400 RIVER INDUSTRIAL PARK RD

City LORAIN

State OHIO ZIP Code + 44052

7. Date entered into:

10/24/14

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

Name DAVID L SMITH

Name ARJUN PRADHAN

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 CEO

Treasurer
(If other title, see
instructions)

On 5-14-15 877-890-8782
Date Telephone Number

On 5-14-15 877-890-8782
Date Telephone Number

Filer:

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.

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

- To perform Labor Relations services to persuade employees AT CAMACO, LORAIN, OH TO VOTE NO UNION

- \$190 hourly for Election campaign

Specific Activities to be Performed

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

a. Nature of activity:

- meet employees in small groups of 10-20 in 1 hour long meetings to show films and persuade employees to vote NO UNION

- meet employees on the facility, work "Floor" to persuade employees to vote NO UNION

11.b. Period during which performed:

(10-24-14) - (11-18-14)

11.c. Extent performed:

UAW Filed Blocking charges to stop election

11.d. Name and address through whom performed:

Additional Name and address through whom performed, if any:

Name

LCB

Name

Organization

LABOR CONSULTING GROUP, INC

Organization

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

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

Street

535 BRISWOLD, Suite 111-237

Street

City

DETROIT

City

State

Michigan

ZIP Code + 4 8228

State

ZIP Code + 4

12.a. Identify subject groups of employees:

hourly employees at
CAMACO, LORAIN, OH

12.b. Identify subject labor organizations:

UAW
"NO Local or Region Filed"