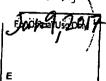
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U.S. Department of Labor Office of Labor-Management Standards Washington DC 20210

FORM LM-20 AGREEMENT AND ACTIVITIES REPORT

Form approved
Office of Management
and Budget
No. 1245-0003
Expires 03-31-2019



This report is mandatory under P L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines or civil penaltion 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)

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E	READ THE INSTRUCTIONS CARE	FULLY BEFORE PREPARING THIS REPORT.
1, File Number: c 6725	7	
Person Filing		
	770.0	
2 Name and mailing address (include ZIP Code):		Any other address where records necessary to verify this report are kept:
Name Byron J Clay		Name -
Td'2 Principal		Title -
Organization Reliant Labor Consultants		Organization
P.O. Box, Bldg., Room No., if any		P.O. Box, Bidg , Room No . if any
Street 10108 Fehlberg Court		Street
City Saint John		City
State Indiana	ZIP Code + 4 46373	State 7/P Code + 4
4. Dale fiscal year ends:	5. Type of person:	S. Las
Dec / 16		c. X Corporation d. Other (Specify).
Nature of Agreement or Arrangeme	nt	
6 Full name and address of employer v	with whom made (include ZIP Code):	7. Date enlered into
Name Lisa A Dubey		/ Date entered into,
Organization Quest Diagnostics, Inc		8 Name of person(s) through whom made.
Trade Name, if any		Name
P.O. Box, Bidg . Room No., if any		Name
Street 200 Forest St		Name —
City Marlborough	-	Name
State Massachusetts	ZIP Code + 4 01752	Name
	Signati	
Each of the undersigned declares, unde the information contained in any accome rue, correct, and complete. (See Section		penalties of law, that all of the information submitted in this report (Including by the signatory and is, to the best of the undersigned's knowledge and belief,
3. Signed	President (If other title see	14. Signed Treasurer
Tide President	instructions)	Title Treasurer (If other title, see instructions)
On		on 1/20/16 216 577 71/202
Date	elephone Number	Date Telephone Number 129
LM-20 (2003)		

	-		
Filer	Byron Clay	Reliant Labor Consultants	
	-,	Reflant Labor Consultants	File Number C。/ ブラムラ
			File Number C 67257

- 9 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 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 solety 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.)
- No written agreements. We were engaged by Quest Diagnostics, Inc. to educate employees on all aspects of unions so that they could make 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 informing employees on all aspects of unions so that they could make informed decisions on whether or not to support a union.

11 b. Period during which performed: Starting 11/28/2016	11.c. Extent performed: Ongoing
11 d Name and address through whom performed. Name Byron J Clay Organization BJC & Associates Inc P.O Box, Bidg, Room No., if any Street 10108 Fehlberg Court Cly Saint John Since Indiana ZIP Code +4 46323	Additional Name and address through whom performed, if any. Name Kirsten Moore Organization P.O. Box, Bidg., Room No., if any Street 139 Drexel Rd City Ardmore
Since Indiana ZIP Code + 4 46373 12.a. Identify subject groups of employees. Phlebotomists and clerks	State Pennsylvania ZIP Code + 4 19003 12.b. Identify subject labor organizations: United Pood and Commercial Workers