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 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: C. X Corporation d. Other (Specify): b. Partnership 12/31/01 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): 8/19/01 Reeb Millworks 7. Names of persons through whom made: Maloney & Davis 901 W Lehi Street Thomas J. Maloney Bethlehem, PA 18018 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 A. 🔀 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. 9. Terms and conditions (Explain in detail; see Part B-9 of instructions): Starting 8/20-8/21/2001, 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. A maximum of 30 hours will be allocated to this work. 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 8/20/01 through 8/21/01 individual meetings to discuss NLRA basic guidelines, review ACT and answer questions. d. Names and addresses of persons through whom performed: H. Desch Labor Information Services, Inc. PO Box 6063 - Malibu. CA 90264 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

10/11/01

at

state

CA

city

Malibu

city

Date

on

state

city

Malibu

state

CA

Employment Standards Administration Office of Labor-Management Standards



This report is mandatory under P.L. 86-257 as amended. Failure to comply may

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

result in criminal prosecution, fines and civil penalties as						
Required of Persons, including Labor Relations Cons Under Section 203(b) of the Labor-Management Rep	sultants and Other Indiv orting and Disclosure A	riduals and Organizations, File No. C. 464 ct of 1959, as amended (LMRDA).				
A. Person Filing						
Name and mailing address (include ZIP code):	2. Any	other address where records necessary to verity this report are kept:				
Labor Information Service, Inc. PO Box 6063 Malibu, CA 90264		None				
Date fiscal year ends: 4. Type of perso	n:					
12/31/01 a.	dual b. 🗌 Partne	rship C. X Corporation d. Other (Specify):				
B. Nature of Agreement or Arrangement						
5. Full name and address of employer with whom r	made (include ZIP code	0,5,7,7				
CFI 7450 Sandlake Common Blvd	7. Names of persons through whom made:					
Orlando, FL 32819 8. Check the appropriate box to indicate whether a	David Siegal					
organize and bargain collectively thro	ugh representatives on concerning the active pt information for use	employees as to the manner of exercising, the right to of their own choosing. ities of employees or a labor organization in connection with a labor esolely in conjunction with an administrative or arbitral proceeding				
9. Terms and conditions (Explain in detail; see Part Starting 8/6/01 through 8/24/01, our firm will be conduct cards and voting in the upcoming election. A maximum There is no written agreement as to a maximum billable	ting meetings with emplo of 150 hours will be allo	oyees from the voting unit to discuss the realities of signing authorization ocated to this work. Billing of time and expenses will be done monthly.				
C. Specific Activities to be Performed 10. For each activity, separately list in detail the inf a. Nature of activity: To inform employees in the voting unit to exercise thei bargaining.		e Part C-10 of instructions): r or not they wish to be represented for the purposes of collective				
	c. Extent performe	tent performed:				
b. Period during which performed: 8/6/01 through 8/24/01	On-going meetings, up to 24 hours before the election will be performed. These will be group or individual meetings to discuss NLRA basic guidelines, review ACT and answer questions.					
d. Names and addresses of persons through J. Rodriguez Labor Information Services, Inc.	gh whom performed:	We have a superior of the supe				
PO Box 6063 - Malibu, CA 90264 11. Identify (a) Subject employees, groups of employee All voting employees in bargaining unit.	ees, and (b) labor organiz	eation:				
D. Verification and Signature. The person in iten that all information in this report, including all attato the best of his knowledge and belief, true, corre	chments incorporated t	his undersigned authorized officers declares, under penalty of law, therein or referred to in this report, has been examined by him and is,				
Signed:		Signed:				
(if other title, cross out and write in correct title ab	President	(if other title, cross out and write in correct title above.)				
th other title, cross out allu write in correct title an	U 1 U .]	(the other title, cross out and write in confect title above.)				

Date

on: 10/11/01

at:

city

Date

state



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

Required of Persons, including Lab Under Section 203(b) of the Labor-l	or Relations Consultants and Ot Management Reporting and Disc	her Individuals a closure Act of 19	and Organizations, 59, as amended (LMF	File No.	C. 464	
A. Person Filing						
Name and mailing address (include ZIP code):		2. Any other address where records necessary to verity this report are kept:				
Labor Information Service, Inc. PO Box 6063 Malibu, CA 90264		None				
Date fiscal year ends:	4. Type of person:					
12/31/01	a. 🗌 Individual 🛮 b. 🔲	Partnership	C. 🛛 Corporation	on d. 🗌 Other (Specify):	
B. Nature of Agreement or Arra						
5. Full name and address of empl	oyer with whom made (include)	ZIP code):	6. Date entered into	7/30/01		
Jefferson Health System Magee Rehabilitation Six Franklin Plaza			7. Names of persor	ns through whom r	made:	
Philadelphia, PA 19102-1177 8. Check the appropriate box to in	dicate whether an object of the	activities unde		ndirectly:		
organize and bargain	ees to exercise or not to exer collectively through represent in with information concerning to memployer, except information adicial proceeding.	atives of their	own choosing. emplovees or a labor	r organization in co	onnection with a labor	
9. Terms and conditions (Explain i	n detail; see Part B-9 of instruct	ions):				
Starting 7/30/01 through the election authorization cards and voting in the done monthly. There is no written ago. C. Specific Activities to be	upcoming election. A maximum o preement as to a maximum billable e Performed	f 500 hours will amount.	be allocated to this wor	k. Billing of time an	id expenses will be	
10. For each activity, separately list	st in detail the information requi	red (See Part C	-10 of instructions):			
a. Nature of activity:						
To inform employees in the voting u bargaining.	nit to exercise their right to choose	whether or not t	hey wish to be represer	nted for the purpose	es of collective	
b. Period during which perf 7/30/01 through electi	on date On-going me		hours before the elections NLRA basic guidelines		These will be group or answer questions.	
d. Names and addresses of	of persons through whom perfo	ormed:				
H. Desch-Labor Information Services, Inc PO M. Roan - Labor Information Services, Inc PO	Box 6063 - Malibu, CA 90264					
11. Identify (a) Subject employees, All voting employees in bargaining u		r organization:			SE 172001 OLMS DEDT	
D. Verification and Signature. That all information in this report, to the best of his knowledge and	including all attachments incorp	orated therein				
Signed:	Dr.	Signed			Treasurer	
(if other title, cross out and write			er title, cross out and v	write in correct title		
city Malibu	state Date		city	state	Date	

8/29/01

