

FORM LM-20  
AGREEMENT AND ACTIVITIES REPORT

Fort Gordon  
Form approved  
Office of Management  
and Budget  
No. 1215-0188  
Expires 09-30-2011



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.

443807

1. File Number: C- 675

Person Filing

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

Name Jason Rodriguez  
Title Senior Vice President  
Organization Prestige Consulting Solutions LLC.  
P.O. Box, Bldg., Room No., if any  
Street 5500 Florence Harbor Dr.  
City Orlando  
State Florida ZIP Code + 4 32829

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:

Dec / 31

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  
Organization Balfour Beatty Communities LLC  
Trade Name, if any  
P.O. Box, Bldg., Room No., if any  
Street 155 3rd Avenue  
City Fort Gordon  
State Georgia ZIP Code + 4 30905

7. Date entered into:

6 / 16 / 2010

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

Name Rosemary Phillips  
Name  
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 Jason Rodriguez President  
(If other title, see instructions)  
Title Other (Specify)  
Senior Vice President

On 7/01/2010 407-373-3800  
Date Telephone Number

14. Signed \_\_\_\_\_ Treasurer  
(If other title, see instructions)  
Title Treasurer

On \_\_\_\_\_  
Date Telephone Number

Filer: Jason Rodriguez Prestige Consulting Solutions LLC.

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.):

Verbal agreement to provide consultation and to give speeches to employees about exercising their rights to organize and bargain collectively. Terms are \$200.00 per hour with all expenses included.

**Specific Activities to be Performed**

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

a. Nature of activity:

To provide consultation and to give speeches to employees regarding their rights to organize and bargain collectively.

11.b. Period during which performed:

June 2010 - July 2010

11.c. Extent performed:

near completion

11.d. Name and address through whom performed:

Name Jason Rodriguez  
Organization Prestige Consulting Solutions LLC.  
P.O. Box, Bldg., Room No., if any -  
Street 5500 Florence Harbor Dr.  
City Orlando  
State Florida ZIP Code + 4 32829

Additional Name and address through whom performed, if any:

Name  
Organization  
P.O. Box, Bldg., Room No., if any  
Street  
City  
State ZIP Code + 4

12.a. Identify subject groups of employees:

Maintenance Technicians and porter employees,

12.b. Identify subject labor organizations:

Transport Workers of America  
Local Union 527