U.S. Department of Labor Office of Labor-Management Standards

FORM LM-20 AGREEMENT AND ACTIVITIES REPORT

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

Washington, DC 20210

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

AUG 5 2010

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.	
CMS DROP 433304	
1. File Number: C- 435	
Person Filing	
Name and mailing address (include ZIP Code):	Any other address where records necessary to verify this report are kept:
Name Russ Brown	Name
Title CEO	Title
Organization Russ Brown Associates	Organization
P.O. Box, Bldg., Room No., if any 233	P.O. Box, Bldg., Room No., if any
Street 5753G Santa Ana Cyn Rd.	Street
City Anaheim	City
State California ZIP Code + 4 92807	State ZIP Code + 4
4. Date fiscal year ends: 5. Type of person:	
Dec / 31 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):	7. Date entered into: 6 / 18 / 2007
Name Werner Beermann	
Organization Goertz & Schiele	8. Name of person(s) through whom made:
Trade Name, if any	Name Werner Beermann
P.O. Box, Bldg., Room No., if any	Name
Street 1750 Summit Drive	Name
City Auburn Hills	Name
State California ZIP Code + 4 48326-1780	Name
Signatures	
Each of the undersigned declares, under penalty of periory and other applicable penalties of law, that all of the information submitted in this report (including the information contained in any accompanying occurrents) has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See Section VIVon penalties in the instructions.)	
13. Signed President (If other title, see	14. Signed Treasurer (If other title, see
Title Executive Director instructions)	Title Treasurer Instructions)
On 7/14/2010 714 281-4428	On
Date Telephone Number	Date Telephone Number

Filer: Russ Brown Russ Brown Associates	File Number C-	
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.): The oral agreement is that Russ Brown Associates will conduct information meetings with employees to		
inform them of their rights under the National Labor Relations Act in an NLRB conducted election.		
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Specific Activities to be Performed		
11. For each activity, separately list in detail the information required (See instructions):		
a. Nature of activity:		
To inform employees of their rights to either accept or reject union representation in a free and fair NLRB conducted election.		
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11.b. Period during which performed:	11.c. Extent performed:	
6/18/07 to 12/3/07	Completed	
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:	
Name Marty Nystrom	Name Shade Zebib	
Organization Russ Brown Associates	Organization Russ Brown Associates	
P.O. Box, Bldg., Room No., if any Suite 509	P.O. Box, Bldg., Room No., if any Suite 509	
Street 18530 Mack Ave.	Street 18530 Mack Ave	
City Grosse Pointe Farms	City Grosse Pointe Farms	
State Michigan ZIP Code + 4 48236	State Michigan ZIP Code + 4 48236	
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:	
Production and Maintenance employees.	United Autoworkers Union	
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