Agreement and Activities Report

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U.S. Department of Labor

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 result in criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 439, 440. Expires 11-30-2002 272 FILE NO. 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). A. Person Filing Any other address where records recessary to verify this report are kept: 1. Name and maling address (include ZIP code): CBC Consulting, Ltd. 5900 Lorac Dr., Suite 101 48346 Clarkston, MI 3. Date fiscal year ends: 4. Type of person: c. M Corporation d. C Other (Specify); a. Individual b. Partnership 12-31- 01 B. Nature of Agreement or Arrangement 6. Date entered into: 5. Full name and address of employer with whom made (include ZIP code): 2 - 01.Cintas Corporation 7. Names of persons through whom made: 2222 N. 13th Street Larry Fultz Terre Haute, IN 47804 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 persuade employees as to the manner of exercising, the right to 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 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): For services rendered during the union campaign. To answer questions of management, and employees concerning the law so as not to violate the employees' rights or the rights of the union. Included would be group meetings with employees. \$ 34,000.00 to be received by check. 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: Group meetings with employees. b. Period during which performed: c. Extent performed: 02 - 01thru 03-01 Complete d. Names and addresses of persons through whom performed: Address - Same as #1 John Herrmann, III, Dennis Chaivre 6 200 11. Identify (a) Subject employees, groups of employees, and (b) labor organizations: Employees of Cintas Corporation (Terre Haute, IN) D. Verfication and Signature. The person in item 1 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: President Treasurer (If other title, cross out and write in correct title above.) (If other title, cross out and write in correct title above.) City State Date City Sale Date Clarkston

Clarkston

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C.	21	22
	C.	C. 29

Under Section 203(b) of the Labor-Management Reporting and Disclosure Act of 1959, as amended (LMRDA). A. Person Filing 1. Name and maling address (include ZIP code): 2. Any other address where records necessary to verify this report are kept: CBC Consulting, Ltd. 5900 Lorac Dr., Suite 101 Clarkston, MI 48346 3. Date fiscal year ends: 4. Type of person: b. Partnership c. Corporation d. Other (Specify): a. | Individual 12 - 31 - 01B. Nature of Agreement or Arrangement 5. Full name and address of employer with whom made (include ZIP code): 6. Date entered into: 12 - 00Dean Foods Company of Indiana, Inc. 7. Names of persons through whom made: 1700 N Old US 31, PO 258 Neil Finerty Rochester. IN 46975-0258 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 persuade employees as to the manner of exercising, the right to 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 disputé 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 8-9 of instructions): For services rendered during the union campaign. To answer questions of management, and employees concerning the law so as not to violate the employees' rights or the rights of the union. Included would be group meetings with employees. \$ 28,550.00 to be received by check. 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: Group meetings with employees. c. Extent performed: b. Period during which performed: 12-00 thru 01-01 Complete d. Names and addresses of persons through whom performed: Address - Same as #1 Philip Craft, Elizabeth Casale 11. Identify (a) Subject employees, groups of employees, and (b) labor organizations: Employees of Dean Foods Company of Indiana, Inc. D. Verfication and Signature. The person in item 1 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: Aurese President Treasurer (If other title, cross out and write in correct title above.) (If other title, cross out and write in correct file above.) Date State City State Date Clarkston at: MI Clarkston MI

Signed:

at:

(If other ritle, cross out and write in correct title above.)

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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).			FILE No. C. 212		
A. Person Filing			**************************************		
1. Name and maling address (include ZIP code): CBC Consulting, Ltd. 5900 Lorac Dr., Suite 101 Clarkston, MI 48346	2. Any other	address where records neces	sary to verify this report are ke		
Date fiscal year ends: 4. Type of person:					
12-31- 01 a. □ Individual b.	☐ Partnership	c. Corporation d. [Other (Specify):		
B. Nature of Agreement or Arrangement			Mail 1986 All Bridge & Market All All All Market (All 2014) and All All All All All All All All All Al		
5. Full name and address of employer with whom made (include	6. Date entered into:				
Hausbeck Pickles		12-00			
		7. Names of persons throu			
Saginay, MI 48601 8. Check the appropriate box to indicate whether an object of	the activities unde	Timothy Haus	heck		
 To persuade employees to exercise or not to exorganize and bargain collectively through represe To supply an employer with information concerning dispute involving such employer, except information or a criminal or civil judicial proceeding. 	kercise, or persua entatives of their og the activities of tion for use solely	ade employees as to the ma	anner of exercising, the right t		
9. Terms and conditions (Explain in detail; see Part B-9 of instru	uctions):				
For services rendered during the of management, and employees con the employees' rights or the riggroup meetings with employees.	the of the	he law so as no e union. Includ			
C. Specific Activities to be Performed					
10. For each activity, separately list in detail the information red	quired (See Part C	-10 of instructions):			
a. Nature of activity:					
Group meetings with employee	S.				
b. Period during which performed: c. Exten	nt performed:				
12-00 thru 1-01	•	olete			
d. Names and addresses of persons through whom per	rformed:	Parties and the same and the sa	The second secon		
Address - Same as #1		In F	GENWEDI		
Charles LaMarre			W IS U V E		
11. Identify (a) Subject employees, groups of employees, and (b) labor organizat	ions:	AR 3 0 2001		
Employees of Hausbeck Pickles			0 2001		
		01	USDOL/ESA LMS/DOE/SRD		
D. Verfication and Signature. The person in item 1 above a that all information in this report, including all attachments incort to the best of his knowledge and belief, true, correct, and comp		dersigned authorized officers referred to in this report, has	deciares, under penalty of law, been examined by him and is,		

Signed:

City

Clarkston

(If other title, cross out and write in coglect title above.)

State

MI

President

Date

Treasurer