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

FORM LM-20 AGREEMENT AND ACTIVITIES REPORT

Form approved
Office of Management
and Budget
No. 1245-0003
Expires 08-31-2016



1, Fils Number.

Person Filing

Name

Title

Z. Name and mailing address (Include ZIP Code):

R Stephenson

Charles

Member

This report is mandatory under P.L. 85-257, as amended. Faiture to camply may result in criminal prosecution, times, 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-Atsmagement Reporting and Disabsum Act of 1959, as amended. (LMRDA)

Name

Title

602140

3. Any other address where records necessary to verify this report are kept;

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

Omparization CRS Labor Relations Solutions	Organization				
P.O. Box, Bldg., Room No., it any Suite M	P.O. Box, Bidg., Room No., if any				
Street 1500 E. Katello Ave.	Street				
City Orange	City				
State California ZIP Code + 4 92867	State ZEP Code + 4				
Date fiscal year ends: 5. Type of person:					
Nec / 3I a Individual b Partnership	c. Corporation d. Other (Specify):				
Nature of Agreement or Arrangement					
Full name and address of employer with whom made (include XEP Code): Name	7. Date entered into:				
Organization	8. Name of person(s) through whom made;				
Trade Name, if any SYSCO Atlanta	Name Mark Eucker				
P.O. Box, Bidg., Room No., if any	Name				
Steel 2225 Riverdale Rd.	Name				
City College Park	Name				
State Georgia ZIP Code + 4 30331	Name				
Each of the undersigned declares, under penalty of perjuny and other applicable the information contained in any accompanying documents) has been examined true, correct, and complete. (See Section Woon penalties in the instructions.) 13. Signed President (If other title, see instructions)	it. Signed Treasurer (If other title, see				
Tidle Member	Title Treasurer instructions)				
on 12-18-14 957-316-1032	On				
Date 12-3-15 Charles Clarkender	Unite Telephone Number				
III LM-20 (2003)	Page 1 of 2				

The Charles Stephenson CRS Labor Relations Solutions	ions	File Number C- 66108							
9. Check the appropriate box to indicate whether an object of the activities undertaken, is directly or indirectly:									
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a. To persuade employees to exercise or not to exercise, or persuade employees as to the manner of exercising, the right to organize and basigain collectively through representatives of their own choosing.									
5. 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.): Daily Rate									
vally have									
Specific Activities to be Performed									
11. For each activity, separately list in detail the information required (See instruc	Sons).								
a. Nature of activity. Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively									
11.b. Period during which performed;	11.c. Extent performed:								
various days beginning	Fully Performe	1							
11.d. Name and address through whom performed;	Additional Name and address through whom performed, if any:								
Name	Name								
Organization	Organization								
P.O. Box, Bidg., Room No., if any	P.O. Box, Bidg., Room No., if any								
Street	Street								
Caly	City								
State ZFP Code + 4	State	ZIP Code + 4							
12.a, Identify subject groups of employees:	12.b. Identify subject labor of	ganizations;							
	:								
;									

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