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

FORM LM-20 AGREEMENT AND ACTIVITIES REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 12-31-2010



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.

1. File Number: C- 00525 368434	
Person Filing	
2. Name and mailing address (include ZIP Code):	Any other address where records necessary to verify this report are kept:
Name	Name
Title	Title
Organization LRI Consulting Services, Inc.	Organization
P.O. Box, Bidg., Room No., if any	P.O. Box, Bldg., Roo n No., if any
Street 7850 South Elm Place, Suite E	Street
City Broken Arrow	City
State Oklahoma ZIP Code + 4 74011	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:
Name	8 / 12 / 2008
Organization Mears Transportaion	8. Name of person(s) through whom made:
Trade Name, if any	Name Chuck Carns
P.O. Box, Bldg., Room No., if any	Name
Street 324 West Gore Street	Name
City Orlando	Name
State Florida ZIP Code + 4 32086	Name
Signa	tures
Each of the undersigned declares, under penalty of perjury and other applicable the information contained in any accompanying documents) has been examined true, correct, and complete. (See Section VII) or benalties in the instructions.) 13. Signed President (If other title, see instructions)	penalties of law, that all of the information submitted in this report (including by the signatory and is to the lest of the undersigned's knowledge and belief, 14. Signed Treasurer (If other title, see instructions)
On 9/11/2008 918-455-9995	On 9/11/2008 918-455-9995
Date Telephone Number	Date Telephone Number

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.):
Agreement to provide consultation, to give speeches to employees about exercising their rights to organize and bargain collectively.

File Number C- 00525

Specific Activities to be Performed

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

LRI Consulting Services, Inc.

a. Nature of activity:

Filer:

Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

11.b. Period during which performed:	11.c. Extent performe:l:
8/13/08 thru 8/15/08	Partially Completed
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:
Name Mike Rosado	Name Pat O'Mara
Organization M. Rosado Consultants, LLC	Organization O'Mara & Associates, LLC
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any P.O. Box 2624
Street 5 Quail Court	Street
City Englewood	City Novato
State New Jersey ZIP Code + 4 07631	State California ZIP Code + 4 94948
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:
Motor coach, I-Ride Trolley Operators	Amalgamated Transit

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Filer:

Specific Activities to be Performed (Continuation Page)

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

Employed to give speeches to employees regarding exercising their rights to organize and bargain collectively.

Partially Completed 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 Additional Name and address through whom performed, if any: Name Organization
Name Organization P.O. Box, Bldg., Rooin No., if any Street City State ZIP Code + 4 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 Additional Name and address through whom performed, if any: Name
P.O. Box, Bldg., Rooin No., if any Street City State ZIP Code + 4 Additional Name and address through whom performed, if any: Name
Street City State ZIP Code + 4 Additional Name and address through whom performed, if any: Name
City State ZIP Code + 4 Additional Name and address through whom performed, if any: Name
State ZIP Code + 4 Additional Name and address through whom performed, if any: Name
Additional Name and address through whom performed, if any: Name
Name
Organization
y
P.O. Box, Bldg., Room No., if any
Street
City
State ZIP Code + 4
12.b. Identify subject labor organizations:
Amalgamated Transit
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AGREEMENT FOR CONSULTING SERVICES

TO:

Chuck Carns Mears Transportation 324 West Gore Street Orlando, FL 32086 DATE:

August 12, 2008

PROPOSED INTERVENTION:

LRI Consulting Services, Inc. will provide consulting services to assist Mears Transportation in communicating factual and legally accurate information to eligible voters in NLRB-conducted election to enable voters to make fully informed choices in voting.

TIMING

The project will begin on or about 8/13/08 and conclude on or about the outcome of the election.

TERMS AND CONDITIONS:

Fees: The fee for this project is \$3000 per 8 hour day per consultant plus travel expenses.

Payment Terms: A 50% deposit is required upon acceptance of this proposal with the balance due within 30 days or prior to the date of your election, whichever is first. You agree and acknowledge that failure to pay fees or expenses associated with this project under these terms will result in reassignment of the consultant(s) and a penalty of 1.5% per week until all outstanding invoices are paid in full.

Expenses: Expenses will be billed as actually incurred and are due on presentation of the invoice. Reasonable business expenses include, but are not limited to, transportation (air, rental car, taxi, etc.), lodging, food, and costs for campaign communication materials.

You further acknowledge that no representation by LRICS or its representatives were relied on by you or any member of your company in entering this agreement, and that this document represents the full understanding of the parties. Your deposit, in the absence of your signature below, indicates your acceptance of this project and the terms and conditions as stated herein.

ACCEPTANCE:

We accept the Agreement and terms described above:

For LRI Consulting Services, Inc.

KOKL

For Mears Transportation

Phillip B. Wilson

Vice President - General Counsel

Chuck Carns

DATE: August 12, 2008

DATE: August 12, 2008