Agreement and Activities ... aport

U.S. Depai ent of Labor

Office of Labor-Management Standards



This report is mandatory under P.L. 86-257 as amended. Failure to comply may

REVISED

OMB No. 1214-0001

. Person Filing				9, as amended (LMR				
Name and maling address (include	de 7IP code):	2 4	any other ad	dress where records	necess	ary to verif	v this re	nort are ke
Labor Information Services		/	any other ac	G1000 W11010 1000103	1100000	aly to voil	y 11110 101	port are no
PO Box 6063	,			None				
Malibu, CA 90264				Hone				
. Date fiscal year ends:	4. Type of person:							
12/31/00	a. 🗆 Individual	b. 🗆 Pari	tnership	c. <section-header> Corporation</section-header>	d. □	Other (S	pedify):	
Nature of Agreement or Arra								
. Full name and address of emple	oyer with whom made	(include ZIP c	ode):	6. Date entered into:				
Heckett MultiServ						1/17/00		
Plant 52, PO Box 70				Names of person	s throu	gh whom m	ade:	
Blue Grass, IO 52726					Chris			
Check the appropriate box to in							the elekt	An au
a. XX To persuade employees			rsuade emp	loyees as to the man	ner or e	exercising,	the right	to organiz
b. To supply and employe			tivities of em	nlovees or a labor or	caniza	tion in conf	ection w	ith a labor
dispute involving such	employer, except inform	nation for use	solely in co	njunction with an adr	ninistra	tive or arbi	tral proc	eeding or a
criminal or civil judicial								3
Terms and conditions (Explain	in detail; see Part B-9 of	f instructions)	:					
Revised to increase maxim	num hours to 100 an	d add addit	tional per	son who proformed	the	work.		
Revised to increase maxim	num hours to 100 an	d add addit	tional per	son who proformed	the	work.		
		d add addit	tional per	son who proformed	i the	work.		
C. Specific Activities to be Pe	erformed				d the	work.		
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C. Specific Activities to be Pe	erformed				d the	work.		
C. Specific Activities to be Pe D. For each activity, separately li	erformed				d the	work.		
. Specific Activities to be Pe). For each activity, separately li	erformed				d the	work.		
. Specific Activities to be Pe). For each activity, separately li	orformed st in detail the informati		See Part C-1		i the	work.		
c. Specific Activities to be Period . For each activity, separately lia. Nature of activity:	orformed st in detail the informati	ion required (See Part C-1		i the	work.		
Specific Activities to be Performance For each activity, separately li a. Nature of activity:	erformed st in detail the informati	ion required (See Part C-1		d the	work.		
b. Peroid during which perform. Nam,es and addresses of	erformed st in detail the informati rmed: c. persons through whom	ion required (i	See Part C-1	0 of instructions):	d the	work.		
Specific Activities to be Pe For each activity, separately li a. Nature of activity: b. Peroid during which perfo	erformed st in detail the informati rmed: c. persons through whom	ion required (i	See Part C-1	0 of instructions):			n w	₽ C
b. Peroid during which perform d. Nam, es and addresses of Robert DiPretore - Labor	performed st in detail the information rmed: c. persons through whom Information Service	Extent performed: es, Inc	See Part C-1	O of instructions):	the	work.	N W	[]
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b. Peroid during which performs and addresses of Robert DiPretore - Labor	performed st in detail the information rmed: c. persons through whom Information Service	Extent performed: es, Inc	See Part C-1	O of instructions):				
b. Peroid during which perform. Nam,es and addresses of	performed st in detail the information rmed: c. persons through whom Information Service	Extent performed: es, Inc	See Part C-1	O of instructions):		E G E		

Signed:

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

City

State

Date

10/30/00

at:

Signed:

Treasurer

City

State

Date

10/30/00

at:

On:

Public reporting burden for this collection of information is estimated to average 20 minutes per response, including the time for reviewing instructions searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Labor Management Standards, Department of Labor, Room N5625, 200 Constitution Avenue, N.W., Wash., D.C. 20210; and to the Office of Management and Budget, Paperwork Reduction Project (1214-0001), Wash., D.C. 20503.

U.S. Department of Labor 101 inclicultary

Office of Labo nagement Standards

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.

OMB No. 1214-0001 02/29/93

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. 464

. Name and maling address (include 2		2	2. Any other a	ddress	where records n	ecessary t	o verify th	is report are kep
Labor Information Services,	Inc.							
P O Box 6063					NONE			
Malibu, CA 90264								
3. Date fiscal year ends: 4.	Type of person:							
12/31/2000	a. 🗆 Individua	al b. \square P	artnership	c. 🖾	Corporation	d. 🗆 Oth	er (Sped	ify):
3. Nature of Agreement or Arrang							7.	-
5. Full name and address of employe	er with whom mad	de (include Z	IP code):	6. Dat	e entered into:			
Lourdes Health System				-	3/3/00			
1533 Haddon Avenue				7. Na	mes of persons	inrough wi	nom made	:
Camden, N.1 08103-3117		his sa adaba a			Janet M			
 Check the appropriate box to indica. To persuade employees to 							ising, the	right to organize
collectively through repres	sentatives of their	own choosin	ig.				-	
b. To supply and employer w	ith information co	oncerning the	activities of e	mploye	es or a labor org	anization in	n connecti	on with a labor
dispute involving such emp criminal or civil judicial pro		ormation for	use solely in o	conjunct	ion with an admi	nistrative o	er arbitral	proceeding or a
Terms and conditions (Explain in d		9 of instruction	ns):					
	gh 3/11/00 ,			ductin	a moetinas wi	th emplo	vees fro	m the voting
unit to discuss the realities								
20 hours will be allocate								
			-	and ex	penses will b	e done iii	on cirry .	There is
no written agreement as to a	maximum biiia	ibre amount	•					
C. Specific Activities to be Perfo	ormed							
0. For each activity, separately list in		nation require	d (See Part C	-10 of in	structions):			
b. Peroid during which performe								
			on-	going	meetings, up	to 24 not	irs beto	re the electi
3/3/00 through elec	ction date				will be group nes. review a			
d. Nam,es and addresses of per	rsons through wh			urderi	nes. review a	lament .		escions.
Oliver Bell						lln]	E G E	OVET,
Henry Desch both wit	th - Labor Inf	ormation S	ervices, In	c (above address	112/		0 0 6
						1/11/1		- 111
	roups of employe	es, and (b) la	hor organizat			8 1 11 7 1	NUV 2	8 2000 110
1. Identify (a) Subject employees, ga	. cops or omprejs		abor organizar	ions:		1441		2000
		-14	abor organizar	ions:				2000
 Identify (a) Subject employees, gr All voting employees in 		nit.	ibor organizar	ions:		I'L	USDOL	/ESA
		nit.	abor organizat	ions:			.USDOL OLMS/DO	/ESA DE/SRD
		nit.	soor organizat	ions:			.USDOL OLMS/DO	/ESA DE/SRD
All voting employees in	n bargaining u				ed authorized off		OLMS/D(DE/SRD
All voting employees in D. Verfication and Signature. The hat all information in this report, included.	n bargaining under person in item	1 above and e	each of his un	dersign		icers decla	ares, unde	DE/SRD or penalty of law
All voting employees in D. Verfication and Signature. The hat all information in this report, include the best of his knowledge and believed.	n bargaining under person in item	1 above and e	each of his un ated therein o	dersigner referre		icers decla	ares, unde	DE/SRD or penalty of law
All voting employees in D. Verfication and Signature. The hat all information in this report, incluot the best of his knowledge and believed.	n bargaining under person in item	1 above and e ents incorpora and complete	each of his un ated therein of Signed:	dersigner referre		icers decla	ares, unde	penalty of law
All voting employees in D. Verfication and Signature. The hat all information in this report, include the best of his knowledge and believed:	e person in item uding all attachments, true, correct, a	1 above and ents incorporated complete	each of his un ated therein of Signed:	dersigne r referre	d to in this repor	icers decla	ares, unde	r penalty of law d by him and is,
All voting employees in D. Verfication and Signature. The hat all information in this report, include the best of his knowledge and believed: Signed: Of other title, cross out and write in controls.	e person in item uding all attachment, true, correct, a	1 above and elents incorporand complete Presi	each of his un ated therein of Signed:	dersign r referre	d to in this repor	icers deck t, has been	ares, unde	or penalty of law d by him and is, Treasure
All voting employees in D. Verfication and Signature. The that all information in this report, include the best of his knowledge and believed to the best of his knowledge and his knowledge and his knowledge and his knowledge and his knowled	e person in item uding all attachment, true, correct, a	1 above and complete Presi	each of his un ated therein of	dersigne r referre	d to in this repor	icers decla	ares, unde	r penalty of law d by him and is, Treasure
D. Verfication and Signature. The that all information in this report, include to the best of his knowledge and belief Signed: (If other title, cross out and write in concept of the context of the con	e person in item uding all attachment, true, correct, a	1 above and complete and complete Presi	sach of his unated therein of the signed: Signed: (If other the signed) (If other the signed)	dersignor referre	ross out and write	icers decide, has been been sin correct State	ares, unde	r penalty of law d by him and is, Treasure ve.) Date on:
All voting employees in D. Verfication and Signature. The that all information in this report, include the best of his knowledge and believed to the best of his knowledge and his knowledge and his knowledge and his knowledge and his knowled	e person in item uding all attachment, true, correct, a correct title above.	1 above and cents incorpora and complete Presi Date on: 4/3/i estimate took	each of his un ated therein of the signed: Signed: (If other the signed at: average 20 min d. and completi	r title, co	ross out and write	icers declar, has been sin correct State	ares, under a examine	r penalty of law of by him and is, Treasure re.) Date on: Send comments

U.S. Department of Labor not analyze

OMB No. 1214-0001 02/29/93

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C. 464

Under Section 203(b) of the Labor- A. Person Filing	Management Report	ing and Discle	osure Act of 1	959, as	amended (LM	RDA).		
	do 710 ando):	1.		- 4 4				
1. Name and maling address (include ZIP code): Labor Information Services, Inc.			2. Any other	address	where record	s necessary	to verify th	is report are ke
P 0 Box 6063	s, The.	1			NONE			
					NONE			
Malibu, CA 90264							-	
3. Date fiscal year ends:	4. Type of person:						74)	
12/31/00	a. 🗆 Individu	al b. \square F	artnership	c. 🖾	Corporation	n d. 🗆 O1	ther (Sped	lfy):
B. Nature of Agreement or Arra								-
5. Full name and address of emple	oyer with whom ma	de (include Z	P code):	6. Da	te entered into):		
Lakespur Hospitality Comp	any				5/1/00			
7700 Tamolpals Dr., Suite	301			7. Na	ames of person	ns through v	vhom made	:
Lankspur, CA 94929 8. Check the appropriate box to in					Mary Lee	Sharp		
a. To persuade employees collectively through rep b. To supply and employed dispute involving such a criminal or civil judicial. 9. Terms and conditions (Explain.)	to exercise or not to resentatives of their r with information of employer, except in proceeding.	to exercise, or own choosin oncerning the formation for the	r persuade eng. activities of a use solely in	nployee	s as to the mai	nner or exer	in connecti	on with a labor
Starting 5/1/00 thr	ough 9/11/00	our firm	will be con	ductin	a meetinas	with empl	ovees from	m the voting
unit to discuss the realit								
175 hours will be allo								
no written agreement as to				and cx	penses with	be done i	noncirry.	illere 15
							4	
C. Specific Activities to be Pe								
a. Nature of activity: To in they wish to be represente	d for the purpos	ses of coll	ective barg	aining				
 b. Peroid during which perform 	rmed:	c. Extent per	rformed: On-	going	meetings, u	p to 24 ho	urs befor	re the elect
3,1,00	lection date	will be pe	erformed.	These	will be gro	up or indi	vidual me	etings to
d. Nam, es and addresses of	persons through wh	om performe	d:			The latest	uisaci que	2010113.
Larry Wong - Labor I		5.				DEG		V E D
11. Identify (a) Subject employees	groups of employe	es, and (b) la	bor organiza	ions:		n)		11111
All voting employees	in bargaining u	nit.			- Condi	JUL NO	0 /111	
				CONTRACTOR DESCRIPTION		OLN	ISDOL/ESA AS/DOE/SRD	
D. Verfication and Signature. that all information in this report, in to the best of his knowledge and b	cluding all attachme	ents incorpora	ted therein o	dersigne r referre	ed authorized d to in this rep	officers dec	lares, under n examined	penalty of law by him and is
Signed:			Signed:					
(awill Bu		Presid					X- 27	Treasure
(If other title, cross out and write in			(If othe		oss out and w		ct title abov	
	State	Date 6/1/00)	City		State	1,2	Date
at: Malibu Public reporting burden for this collect searching existing data sources, gather regarding this burden estimate or any of Management Standards, Department of Paperwork Reduction Project (1214-000)	other aspect of this co	estimated to a he data needed illection of info	CO:-	utes per ng and re ling sugg Wash., D	response, includes eviewing the constions for reduced. C. 20210; and	ding the time llection of inf scing this burn to the Office		on: ng instructions end comments office of Labor ent and Budget,