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. 1245-0003 Expires 08-31-2016



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.

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1. File Number:		· · · · · · · · · · · · · · · · · · ·		
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Person Filing				
Name and mailing address (include ZIP Code):		3. Any other address where records necessary to verify this report are kept:		
Name Bradley E White		Name n/a		
·Title President		Title		
Organization Interlate Systems, Inc.		Organization		
P.O. Box, Bldg., Room No., if any		P.O. Box, Bldg., Room No., if any		
Street 145 S. Lincolnway		Street		
City North Aurora		City		
State Illinois	ZIP Code + 4 60542	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 Arrangemen				
Full name and address of employer with whom made (include ZIP Code):		7. Date entered into:		
Name Double Tree of Rosemont		7 / 9 / 2014		
Organization Hilton Hotels		8. Name of person(s) through whom made:		
Trade Name, if any		Name Dave	Fincannon	
P.O. Box, Bldg., Room No., if any		Name Steve	Falciani	
Street 5460 N. River Rd.		Name		
City Rosemont		Name		
State Illinois	ZIP Code + 4	Name		
Signatures				
true, correct, and complete. (See Section 13. Signed President	ler penalty of perjury and other applicable apanying documents) has been examined by VII on penalties in the instructions.) President (If other title, see instructions)	penalties of law, that all of the inform by the signatory and is, to the best of the law that all of the inform law the signatory and is, to the best of the law that all of the inform law that all of the informal law that all of the inform law that all of the info	Treasurer (If other title, see instructions)	
On 8/08/2014 63	0-966-0214	On 08/08/2014	630-966-0214	
Date-	Telephone Number	Date	Telephone Number	

Filer Bradley White Interlate Systems, Inc.	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 persua collectively through representatives of their own choosing. b. To supply an employer with information concerning the activities such employer, except information for use solely in conjunction with the conjunction of the conjuncti	the employees as to the manner of exercising, the right to	a labor disputo involvina
10. Terms and conditions (Explain in detail; see instructions. Written agreem	ents must be attached.):	
No Written agreement was executed.Work performed sent.	•	ement yet to be
Specific Activities to be Performed		-
11. For each activity, separately list in detail the information required (See in	tructions):	
a. Nature of activity:	tructions):	
Provide voting unit employees with information of Editing of written documents posted at times for	unit perusal.	work stoppages.
11.b. Period during which performed: 7/29/2014 - 8/10/2014	11.c. Extent performed:	0/10
11.d. Name and address through whom performed:	hourly as need:7/29-8/1;8/4- Additional Name and address through whom perform	
Name Bradley E White	Name n/a	omed, if any:
Organization Interlate Systems, Inc.	Organization	
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any	
Street 145 S. Lincolnway	Street	
City North Aurora	City	
State Illinois ZIP Code + 4 60542	State ZIP	Code + 4
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:	
42 Housekeeping and laundry employees	HERE/UNITE Local 450	