b) Teamsters, Local 773

U.S. Department of Labor

Office of Labor-Management Strong



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

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. -0322

A. Person Filing	
 Name and mailing address (include ZIP code): Sunbelt Organization Services, In 	
8711 East Pinnacle Peak Road, #28	37
Suite F-110	
Scottsdale, Arizona 85255	
Date fiscal year ends:	Partnership c. Corporation d. Other (Specify):
12-02	
B. Nature of Agreement or Arrangement	
5. Full name and address of employer with whom made (include ZIP c	6. Date entered into: 8 - 28 - 02
Young's Medical Equipment, Inc.	7 No
3320 Nazareth Road	7. Names of persons through whom made:
Easton, PA 18046	Dan Schira, General Manager
8. Check the appropriate box to indicate whether an object of the acti	vities undertaken, is directly or indirectly:
 a. X To persuade employees to exercise or not to exercise, or persuade collectively through representatives of their own choosing. 	ersuade employees as to the manner of exercising, the right to organize and bargain
	vities of employees or a labor organization in connection with a labor dispute involv- unction with an administrative or arbitral proceeding or a criminal or civil judicial pro-
9. Terms and conditions (Explain in detail; see Part B-9 of instructions Company was employed on a per hourelative to duration or amount of on a per hour rate.	ur basis with no formal written agreements hours to be performed. Fee schedule based
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:	
Presented informational meetings to of unionization, the role of the	to company employees relative to the process NLRB, and collective bargaining.
b. Period during which performed: c. Extent p	performed:
8-02/8-02	8-02
d. Names and addresses of persons through whom performed:	
P. A. List & S. B. Walkes (Address	ses as in #1 above)
a) All FT & reg. PT driver/technic	(2000)
	(OC1 - (2002))

D. Verification and Signature. The person in item 1 above and each of his undersigned authorized officers declares, under penalty of law, that all intermation 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.

Signe	di K.Ch	not Ch	airman/CEO	Signe	grame m.	Herhert	Secretary/	
(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	State	Date	
at:	Scottsdale	Arizona	on: 9-17-02	at:	Scottsdale	Arizona	on: ₉₋₁₇₋₀₂	

U.S. Department of Labor

Office of Labor-Management St

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9-02



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 12/31/86

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. -0322

A. Person Filing 2. Any other address where records necessary to verify this report are kept: 1. Name and mailing address (include ZIP code): Sunbelt Organization Services, Inc. 8711 East Pinnacle Peak Road, #287 Scottsdale, Arizona 85255 3. Date fiscal year ends: Type of person: c. Corporation a. Individual b. D Partnership d. Other (Specify): 12-02 B. Nature of Agreement or Arrangement 5. Full name and address of employer with whom made (include ZIP code): Date entered into: 9-18-02 PhilCorr, LLC 2317 Almond Road 7. Names of persons through whom made: Vineland, NJ 08360 Kevin Brower, Gen. Manager 8. Check the appropriate box to indicate whether an object of the activities undertaken, is directly or indirectly: a. X 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. 9. Terms and conditions (Explain in detail; see Part B-9 of instructions): Company was employed on a per hour basis with no formal written agreements relative to duration or amount of hours to be performed. Fee schedule based on a per hour rate. 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: Presented informational meetings to company employees relative to the process of unionization, the role of the NLRB, and collective bargaining.

9-02/10-02

d. Names and addresses of persons through whom performed:

P. A. List, S. B. Walkes, M. G. Gibbons (Addresses as in #1 above)

c. Extent performed:

11. Identify (a) Subject employees, groups of employees, and (b) labor organizations:

- a) All production & maintenance employees
- b) PACE, Local 375

b. Period during which performed:

D. Verification 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.

Signe	ed: L. M. C.	m Ch	airman/CEO	Signed:	me m.	Herhert	Secretary/	
(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		State	Date	
at:	Scottsdale	Arizona	on: 10-7-02	at: Sco	ottsdale	Arizona	on: 10-7-02	

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

City

Scottsdale

State

Arizona

Date

on: 9-9-02

at:

U.S. Department of Labor

Office of Labor-Management !



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.

Required of Persons, including Labor Relations Consultants and Other Individuals and Organizations.

OMB No. 1214-0001

C. File No. -0322Under Section 203(b) of the Labor-Management Reporting and Disclosure Act of 1959, as amended (LMRDA). A. Person Filing 1. Name and mailing address (include ZIP code): 2. Any other address where records necessary to verify this report are kept: Sunbelt Organization Services, Inc. 8711 East Pinnacle Peak Road, #287 Suite F-110 Scottsdale, Arizona 85255 3. Date fiscal year ends: Type of person: c. Corporation d.

Other (Specify): a.

Individual b.

Partnership 12-02 B. Nature of Agreement or Arrangement 5. Full name and address of employer with whom made (include ZIP code): Date entered into: 9-5-02 Frey Mechanical 1926 Auction Road Names of persons through whom made: Manheim, PA 17545 Jerald A. Frey, President 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. 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. 9. Terms and conditions (Explain in detail; see Part B-9 of instructions): Company was employed on a per hour basis with no formal written agreements relative to duration or amount of hours to be performed. Fee schedule based chants innotacrated therein or sterred to in this report, had be on a per hour rate. 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: Presented informational meetings to company employees relative to the process of unionization, the role of the NLRB, and collective bargaining. b. Period during which performed: c. Extent performed: 9-02/9-02 9-02 d. Names and addresses of persons through whom performed: M. G. Gibbons (Address as in #1 above) 11. Identify (a) Subject employees, groups of employees, and (b) labor organizations: a) All FT sheet metal workers tusted (See Part Child of natrator. b) Sheet Metal Workers International Association, Local Union 19 D. Verification and Signature. The person in item 1 above and each of his undersigned authorized officers declares, under penalty of law, that all intormation 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: Chairman/CEC Secretary/ Treasurer **Rresident**

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

Scottsdale

City

Date

State

Arizona