"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 10-31-2013



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.

Person Filing			
2. Name and mailing address (include ZIP Code):	3. Any other address where records necessary to verify this report are kept:		
Name Peter A List	Name		
Title Founder & CEO	Title Organization P.O. Box, Bldg., Room No., if any		
Organization Kulture Consulting, LLC			
P.O. Box, Bldg., Room No., if any			
Street 759 Bloomfield Avenue, #301	Street 305 Eisenhower Parkway		
City West Caldwell	City Livingston		
State New Jersey ZIP Code + 4 07006	State New Jersey ZIP Code + 4 07039		
Dec / 14 a. Individual b. Partnershi	p c. Corporation d. Other (Specify): LLC		
Nature of Agreement or Arrangement			
6. Full name and address of employer with whom made (include ZIP Code):	7. Date entered into:  6 / 4 / 2014  8. Name of person(s) through whom made:  Name Tony Brothers  Name  Name		
Name			
Organization Petco Animal Supplies, Inc.			
rade Name, if any			
P.O. Box, Bldg., Room No., if any			
Street 9125 Rehco Road			
City San Diego	Name		
State California ZIP Code + 4 92121	Name		
Sig	natures		
Each of the undersigned declares, under penalty of perjury and other applicate the information contained in any accompanying documents) has been examinate, correct, and complete (See Section VIV on penalties in the instructions.)  13. Signed  Title  Other (Specify)  Founder & CEO  On 6262014 973-403-9901  Telephone Number	14. Signed Manager of Administration  On 6/26/2014 973-403-990]		

Filer:	Peter List	Kulture Consulting, LLC	File Number C-	00322

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.

mpany was employed ount of hours to be					to duration or
ount of hours to b	e perrormed. Fe	se schedule bas	ed on a per nour	. race.	

## Specific Activities to be Performed

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

Conducted employee relations walkarounds to assess the work environment of the facility.

11.c. Extent performed:  Completed
Additional Name and address through whom performed, if any:
Name
Organization Kulture Consulting, LLC
P.O. Box, Bldg., Room No., if any
Street 759 Bloomfield Avenue, #301
City West Caldwell
State New Jersey ZIP Code + 4 07006
12.b. Identify subject labor organizations:
NO PETITION