Scottsdale

U.S. Department of Labor

Office of Labor-Management ?

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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					
Name and mailing address (include ZIP code):	2. Any other address where records necessary to verify this report are kept:				
Sunbelt Organization Servi	ces, Inc.	D. S. S. T. S.			
8711 East Pinnacle Peak Ro					
Scottsdale, Arizona 85255	5				
Date fiscal year ends: 4. Type of person	n:				
12-02 a. 🗆 Individ	iual b. 🗆 Parti	nership c	. Torporation	d. Other (Specify	() :
B. Nature of Agreement or Arrangement					
5. Full name and address of employer with whom mad	le (include ZIP code)	:	6. Date entered into 10 -	: -9-02	
Interstate Waste Services					
217 Ponier Street			7. Names of persons through whom made:		
Newark, NJ 07114			Michae	el DiBella	
8. Check the appropriate box to indicate whether an o	bject of the activities	undertaken,	is directly or indirectly	:	
 a. To persuade employees to exercise or not to collectively through representatives of their 	o exercise, or persua own choosing.	de employees	as to the manner of e	exercising, the right to o	rganize and bargain
 To supply an employer with information con- ing such employer, except information for us ceeding. 	cerning the activities se solely in conjuncti	of employees on with an adn	or a labor organization ninistrative or arbitral	on in connection with a l proceeding or a crimina	abor dispute involv- I or civil judicial pro-
9. Terms and conditions (Explain in detail; see Part B-	9 of instructions):				
		Tables .			
Company was ampleyed on a	nor hour	bagig :	ith no for	mal rmittan	a grand amont a
Company was employed on a relative to duration or am	per nour	Dasis w	he perform	mai written	agreements
on a per hour rate.	ount of no	urs to	be performe	ea. ree scn	ledule pased
on a per nour race.	The second secon		COLUMN TO THE PROPERTY OF THE		
C. Specific Activities to be Performed		D- + O + O - ()	-11		
10. For each activity, separately list in detail the inform	nation required (See	Part C-10 of In	structions):		
a. Nature of activity:					
Presented informational medof unionization, the role					
b. Period during which performed:	c. Extent performance	rmed:			
				0.0	
10-02/11-02			02		
d. Names and addresses of persons through who	m performed:				B. S.
M. G. Gibbons (Address as	in #1 abov	re)			TIM STATE
11. Identify (a) Subject employees, groups of employe	es, and (b) labor orga	anizations:			
				7 - 1	
a) All full-time & regular	part-time	arive	rs, neipers	& Laborers	
b) Teamsters, Local 945					
D. Verification and Signature. The person in item 1 tornation in this report, including all attachments including all attachments included and belief true, correct, and complete.					
Signed Ch	airman/CEC	Signed:	anne M	Herhert	Secretary Treasure
(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

on: 10-31-02 at:

Scottsdale

Arizona

Arizona

on: 10-31-02

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

Arizona

City

at: Scottsdale

U.S. Department of Labor

Office of Labor-Management '

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File No. C. -0322

A. Person Filing	
Name and mailing address (include ZIP code):	Any other address where records necessary to verify this report are kept:
Sunbelt Organization Services, I	
8711 East Pinnacle Peak Road, #2	287
Scottsdale, Arizona 85255	
Date fiscal year ends: 4. Type of person:	v .
a. Individual b.	□ Partnership c. 📶 Corporation d. □ Other (Specify):
B. Nature of Agreement or Arrangement	
5. Full name and address of employer with whom made (include 2	(IP code): 6. Date entered into:
Millennium Paper, Inc.	10-2-02
25-L Airmont Road	7. Names of persons through whom made:
Airmont, NY 10931	Michael DiBella
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, of collectively through representatives of their own choosing 	or persuade employees as to the manner of exercising, the right to organize and bargain ng.
	activities of employees or a labor organization in connection with a labor dispute involv- conjunction 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 Instruct	lons):
	To the state of th
	our basis with no formal written agreements
on a per hour rate.	f hours to be performed. Fee schedule based
C. Specific Activities to be Performed	
10. For each activity, separately list in detail the information requi	red (See Part C-10 of instructions):
a. Nature of activity:	TOTAL 01/23/17 1999
Presented informational meetings of unionization, the role of the	to company employees relative to the process NLRB, and collective bargaining.
b. Period during which performed: c. Exte	ent performed:
10-02/11-02	10-02
d. Names and addresses of persons through whom performed	d:
M. G. Gibbons (Address as in #1	above)
11. Identify (a) Subject employees, groups of employees, and (b)	labor organizations:
a) All full-time & regular part-	time employees
b) Laborers, Local 108	
D. Verification and Signature. The person in item 1 above and formation in this report, including all attachments incorporated the knowledge and belief, true, correct, and complete.	each of his undersigned authorized officers declares, under penalty of law, that all in- nerein or referred to in this report, has been examined by him and is, to the best of his
Signed: Chairman	CEO Signed: Secretary/

Date

on:10-24-02

Date

on: 10-24-02

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

City

knowledge and belief, true, correct, and complete

U.S. Department of Labor

Office of Labor-Management §

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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 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 Scottsdale, Arizona 85255 3. Date fiscal year ends: Type of person: c. D Corporation a.

Individual b.

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): 6. Date entered into: 9-23-02 Interstate Waste Services of NJ, Inc. 200 Sterling Mine Road 7. Names of persons through whom made: Sloatsburg, NY 10974 Mike DiBella, Gen. Manager 8. 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. 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. b. Period during which performed: c. Extent performed: 9-02/11-02 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 regular full & part time employees b) Laborers, Local 108 D. Verification and Signature. The person in item 1 above and each of his undersigned authorized officers declares, under penalty of law, that all in-

Signéd: Chairman/CEC Herhest President (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 Date Scottsdale Arizona on: 10-7-02 Scottsdale on: 10-7-02 Arizona Form LM-20 (Feb. 1986)

formation 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