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 INSTRUCTION	IONS CAREFULLY BEFORE PR	EPARING THIS REPURT.	706762	
1. File Number: <b>C-</b> 65668				
Person Filing	· · · · · · · · · · · · · · · · · · ·			
Name and mailing address (include ZIP Code):	3. Any other add	dress where records necessary t	o verify this report are kept:	
Name Kirk Cummings	Name			
Title President	Title			
Organization Cummings Group, LLC	Organization			
P.O. Box, Bldg., Room No., if any PO Box 882	P.O. Box, Bldg.	., Room No., if any		
Street	Street			
City Lapeer	City			
State Michigan ZIP Code + 4 4844	State	ZIP	Code + 4	
4. Date fiscal year ends: 5. Type of person:				
Dec / 18 a. Individual b. Partnership c. Corporation d. Other (Specify): LLC				
Nature of Agreement or Arrangement				
6. Full name and address of employer with whom made (include Z	ZIP Code): 7. Date entered		2018	
Name Dave Ruman			/ 2018	
Organization JG Kern Enterprises, Inc.		son(s) through whom made:		
Trade Name, if any	Name Peter	List		
P.O. Box, Bldg., Room No., if any	Name			
Street 44044 Merrill Road	Name			
City Sterling Heights	Name			
State Michigan ZIP Code + 4 483	Name			
Signatures				
Each of the undersigned declares, under penalty of perjury and other applicable penalties of law, that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See Section VII on penalties in the instructions.)				
13. Signed President (If other	ident 14. Signed	<del></del>	Treasurer (If other title, see	
Title President instruc	uctions)  Title		instructions)	
On 7/5/2019 248-210-1162	On		_	
Date Telephone Number		Date Telepho	one Number	

Filer: Kirk Cummings Cummings Group, LLC	File Number C- 65668			
9. Check the appropriate box to indicate whether an object of the activities undertaken, is directly or indirectly:				
<ul> <li>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.</li> <li>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.</li> </ul>				
10. Terms and conditions (Explain in detail; see instructions. Written agreements must be attached.):				
Oral agreement made with Kulture Consulting, LLC; \$281.25 per hour, pleexpenses.	us actual and reasonable			

## Specific Activities to be Performed

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

Traveled to and from employer. Met with employees to discuss collective bargaining and labor disputes; Provided information relative to the National Labor Relations Act, employees' Section Seven Rights, as well as information regarding the NLRB election process and collective bargaining; answered questions.

11.b. Period during which performed:	11.c. Extent performed:	
September 2018	Completed	
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:	
Name Peter List	Name	
Organization Kulture Consulting, LLC	Organization	
P.O. Box, Bldg., Room No., if any P.O. Box 2877	P.O. Box, Bldg., Room No., if any	
Street	Street	
City Pawleys Island	City	
State South Carolina ZIP Code + 4 29585	State ZIP Code + 4	
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:	
All full-time and regular part-time production and maintenance employees, including quality inspectors, shipping and receiving employees, material handler employees, leaders, environmental assistants and tool room employees employed by the Employer at its 44044 Merrill Road, Sterling Heights, MI facility.	United Automobile, Aerospace and Agricultural Implement Workers of America (UAW), AFL-CIO	

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