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. 1215-0188 Expires 09-30-2011



C- 00606

1. File Number:

This report is mandatory under P.L. 86-257, as armended. 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.

43 833

Person Filing						
Name and mailing address (include ZIP Code):		Any other address where records necessary to verify this report are kept:				
Name Christopher T Borruso		Name				
Title President		Title				
Organization Axiomatix, LLC		Organization				
P.O. Box, Bldg., Room No., if any		P.O. Box, Bldg., Room No., if any				
Street 323 Mariners Way		Street				
City Copiague		City				
State New York ZIF	Code + 4 11726	State		ZIP Code + 4		
4. Date fiscal year ends: 5. Type of person:						
Dec / 31 a.	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 ZIP Code):		7. Date entered into: 9 / 14 / 2009				
Name						
Organization SEB Security		8. Name of person(s) through whom made:				
Trade Name, if any		Name Robert DiNozzi				
P.O. Box, Bldg., Room No., if any			Name			
Street 8 Revolutionary Road			Name			
City Ossining			Name			
State New York ZIF	P Code + 4 10562	Name				
Signatures						
Each of the undersigned declares, under pena the information contained in any accompanying true, correct, and complete. (See Section VII of 13. Signed President	g documents) has been examined	penalties of laby the signat 14. Signed Title	aw, that all of the info ory and is, to the bes Treasurer	rmation submitted in this report (including st of the undersigned's knowledge and belief, Treasurer (If other title, see instructions)		
On 7-6-10 Date Teleph	hone Number	On	Date	Telephone Number		
Form I M 20 (2002)		4				

File: Christopher Borruso Axiomatix, LLC	File	e Number C- 00606			
9. Check the appropriate box to indicate whether an object of the activities under	aken, 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.					
40. Tormo and conditions (Cyclein in data)), one instructions. Whiten a consequent to the decimal of the decima					
10. Terms and conditions (Explain in detail; see instructions. Written agreements must be attached.): Oral agreement for hourly fee.					
oral agreement for nourly ree.					
Specific Activities to be Performed		· · · · · · · · · · · · · · · · · · ·			
11. For each activity, separately list in detail the information required (See instructions):					
a. Nature of activity:					
Conduct group meetings with employees and answer questions regarding section 7 rights, collective bargaining process and voting procedures.					
11.b. Period during which performed:	11.c. Extent performed:				
September - October 2009	Completed				
11.d. Name and address through whom performed:	Additional Name and address thr	rough whom performed, if any:			
Name Christopher T Borruso	Name				
Organization Axiomatix, LLC	Organization				
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any				
Street 323 Mariners Way	Street				
City Copiague	City				
State New York ZIP Code + 4 11726	State	ZIP Code + 4			
12.a. Identify subject groups of employees:	12.b. Identify subject labor organ	nizations:			
Security officers	Allied International Union				