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 08-31-2016

RECEIVED MAR 1 0 2014

1. File Number:

Person Filing

Name •

City Tulsa

Dec

Title

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 of 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. 2. Name and mailing address (include ZIP Code): 3. Any other address where records necessary to verify this report are kept: Name Title Organization International Labor Relations Organization P.O. Box, Bldg., Room No., if any P.O. Box, Bldg., Room No., if any Street 8086 South Yale Avenue Suite 225 Street City State Oklahoma ZIP Code + 4 74136 State ZIP Code +.4 4. Date fiscal year ends: 5. Type of person: 31 Individual b. Partnership c. Corporation d.X 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:		
Name	5 / 24 / 2013		
Organization Enercon Federal Services Inc.	8. Name of person(s) through whom made:		
Trade Name, if any	Name Michelle Zerkle		
P.O. Box, Bldg., Room No., if any	Name		
Street 500 TownPark Lane	Name		
City Kennesaw	Name		
State Georgia ZIP Code + 4 30144	Name		

Signatures

	_		Sigi	iatures.			
the informa	ition contained in ai	ares, under penalty of penjur ny accompanying document ee Section VII on penalties	s) has been examine	le penalties of led by the signa	aw, that all of the info tory and is, to the be	ormation submitted in this r st of the undersigned's kno	eport (including wledge and belief,
13. Signed	President		President (If other title, see instructions)	14. Signed Ţitle	Treasurer		Treasurer (If other title, see instructions)
On	6/23/2013	800-555-7509	_	On	06/23/2013	800-555-7509	
	Date	Telephone Numbe	r 		Date -	Télephone Numbe	·

Filer: International Labor Relations	File Number	C-
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 er collectively through representatives of their own choosing.	ployees as to the manner of exercising, the r	right to organize and bargain
b. To supply an employer with information concerning the activities of en such employer except information for use solely in conjunction with a	oloyees or a labor organization in connection administrative or arbitral proceeding or a critical proceeding or a critica	with a labor dispute involving iminal or civil judicial proceeding.
10. Terms and conditions (Explain in detail, see instructions. Written agreements	nust be attached.):	
See attached agreement		
		
Specific Activities to be Performed		·
11. For each activity, separately list in detail the information required (See instruct	ons):	
a. Nature of activity:		
Engaged to communicate with employees so they can rights to organize and bargain collectively.	ake an informed decision rega	arding exercising their
		-
11.b. Period during which performed:	11.c. Extent performed:	<u> </u>
Beginning on or about 05/25/2013	Completed	
11.d. Name and address through whom performed:	Additional Name and address through whor	n performed, if any:
Name	Name Joseph Miel	Luchowski
Organization Clegg & Associates Management Group	Organization	
P.O. Box, Bidg., Room No., if any	P.O. Box; Bldg., Room.No., if any	
Street 25889 152nd St.	Street 47 East Jonathan Ct.	
City Surrey, BC, CA V3SOA4	City Kennett Square	
State ZIP Code + 4	State Pennsylvania	ZIP Cöde + 4 19348
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:	
All employees eligible to vote in the bargaining unit	International Brotherhood of Local Union 575, AFL-CTO	Electrical Workers,
		İ

Specific Activities to be Performed (Continuation Page)

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

Engaged to communicate with employees so they can make an informed decision regarding exercising their rights to organize and bargain collectively.

11.b. Period during which perl	_	11.c. Extent performed:			
Beginning on or	about 05/25/2013	Completed			
11.d. Name and address thro	ugh whom performed:	Additional Name and add	fress through whom performed, if any:		
Name Jim	Teague	Name			
Organization Internatio	nal Labor Relations	Organization-			
P.O. Box, Bldg., Room No., if	ány	P.O. Box, Bidg., Room N	P.O. Box, Bldg., Room No., if any		
Street 8086 South Yale	Avenue Suite 225	Street			
City Tulsa		City			
State Oklahoma	ZIP Code + 4, 74136	State	ZIP Code + 4.		
Additional Name and address	through whom performed, if any:	Additional Name and add	Additional Name and address through whom performed; if any:		
Name		Name			
Organization		Organization			
P.O. Box, Bldg., Room No., if a	O. Box, Bidg., Room No., if any		lo., if any		
Street		Street			
City		City			
State	ZIP Code + 4	State:	ZIP Code + 4		
12.a. Identify subject groups of	employees	12.b. Identify subject lab	or organizations:		
All employees eligi unit	ble to vote in the bargaining	Internațional Br Local Union 575,	otherhood of Electrical Workers, AFL-CIO		
					