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 enalties 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. 1. File Number: Person Filing 3. Any other address where records necessary to verify this report are kept: 2. Name and mailing address (include ZIP Code): Name James M Gary Name David A Jacobson Title Partner Title Chairman Organization Kutak Rock LLP Organization Kutak Rock LLP P.O. Box, Bldg., Room No., if any One Union National Plaza P.O. Box, Bidg., Room No., if any The Omaha Building Street 124 W. Capitol Ave., Suite 2000 Street 1650 Farnam St. City Little Rock City Omaha ZIP Code + 4 72201-3706 State Nebraska ZIP Code + 4 68102-2186 State Arkansas 5. Type of person: 4. Date fiscal year ends: a Individual b Partnership Corporation d X Other (Specify): LLP Dec 31 Nature of Agreement or Arrangement 6. Full name and address of employer with whom made (include ZIP Code): 7. Date entered into: 2012 Eggman Name Gene 8. Name of person(s) through whom made: Organization Pace Industries LLC Name Gene Eggman Trade Name, if any Patterson Mold & Tool Division Taylor Name Rod P.O. Box, Bldg., Room No., if any Box 309 Name Street 481 S. Shiloh Drive Name City Fayetteville ZIP Code + 4 72704 State Arkansas 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.) Treasurer 14. Signed President-13. Signed (If other title, see (If other title, see instructions) instructions) charrman CFO Treasurer President

٠, "		-		
_	 · · · · · · · · · · · · · · · · · · ·		 	

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.

File Number C-

10. Terms and conditions (Explain in detail; see instructions. Written agreements must be attached.):

Kutak Rock LLP

Act as legal counsel in connection with an RC Petition involving union organzing at the Patterson Mold & Tool Division and related litigation.

Specific Activities to be Performed

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

Filer David Jacobson

The activity requiring the report occured after the enagagement commenced on 9/24/12 when James M. Gary engaged in lawful activity in giving a speech to employees in a representation election. The overall enagagement took place between approximately 8/17/2012 and 10/5/12 when the certification of election results was issued by the NLRB. The activity was performed in behalf of the Patterson Mold & Tool Division in St. Charles, MO.

11.b. Period during which performed:	11.c. Extent performed:			
8/17/2012 - 10/5/2012	Completed			
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:			
Name James M Gary	Name			
Organization Kutak Rock LLP	Organization			
P.O. Box, Bldg., Room No., if any One Union National Plaza	P.O. Box, Bldg., Room No., if any			
Street 124 W. Capitol Ave., Suite 2000	Street			
City Little Rock	City			
State Arkansas ZIP Code + 4 72201-3706	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 machinists, polishers, inspectors, janitors, toolmakers, shipping/receiving clerks and programmers, excluding designers, engineers, office clerical employees, professional employees, guards and supervisors as defined in the National Labor Relations Act.	International Association of Machinists and Aerospace Workers, AFL-CIO			