

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 INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

498449

1. File Number: C- 00597

Person Filing

2. Name and mailing address (include ZIP Code):

Name Carlos Restrepo
Title President
Organization Persuasive Communicatiosn Incorporated
P.O. Box, Bldg., Room No., if any
Street 1474 West Price Rd. Ste. 7599
City Brownsville
State Texas ZIP Code + 4 78520

3. Any other address where records necessary to verify this report are kept:

Name
Title
Organization
P.O. Box, Bldg., Room No., if any
Street
City
State ZIP Code + 4

4. Date fiscal year ends:

Dec / 31

5. Type of person:

a ☐ Individual b ☐ Partnership c ☒ Corporation d ☐ Other (Specify):

Nature of Agreement or Arrangement

6. Full name and address of employer with whom made (include ZIP Code):

Name Charles Moore
Organization Battle Space Flight Services
Trade Name, if any
P.O. Box, Bldg., Room No., if any
Street 1215 S. Clark St.
City Arlington
State ~~Pennsylvania~~ Virginia ZIP Code + 4 22202

7. Date entered into:

11 / / 2011

8. Name of person(s) through whom made:

Name Charles Moore
Name
Name
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

Title President

President
(If other title, see
instructions)

14. Signed

Title Treasurer

Treasurer
(If other title, see
instructions)

On 06/01/2012

Date

310-897-0384

Telephone Number

On

Date

Telephone Number

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.

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

Inform employees, executives, managers and supervisors regarding their rights duties and responsibilities under Section 7 of the National Labor Relations Act.

Specific Activities to be Performed

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

a. Nature of activity:

Conducted informational meetings with employees, executives, managers and supervisors and distributed National Labor Relations Board documents and pamphlets; discussed collective bargaining union membership, rules and costs, secret ballot elections, unfair labor practices, boycotts, strikes, corporate campaigns.

11.b. Period during which performed:

November-December 2011

11.c. Extent performed:

Completed

11.d. Name and address through whom performed:

Name

Organization See Addendum

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

Additional Name and address through whom performed, if any:

Name

Organization

P.O. Box, Bldg., Room No., if any

Street

City

State

ZIP Code + 4

12.a. Identify subject groups of employees:

All Employees

12.b. Identify subject labor organizations:

IAM

LM 20 Battle Space Flight Services 2011
Name and Address Through Whom Performed

Employee Relations Group

322 Culver Bl. # 146

Playa del Rey CA 90293

Carlos Restrepo

1474 W price Rd

Suite 7599

Brownsville, TX 78520