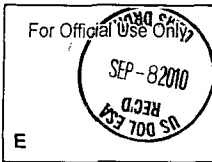


# FORM LM-20 AGREEMENT AND ACTIVITIES REPORT

Form approved  
Office of Management  
and Budget  
No. 1215-0188  
Expires 09-30-2011



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.

437139

1. File Number: C-707

## Person Filing

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

Name Mary L Holden

Title Consultant

Organization Mary L Holden HR/ER Consultant LLC

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

Street 1090 Willow Grove Ct.

City Rochester Hills

State Michigan

ZIP Code + 4 48307

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 / 10

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 Erick Taylor

Organization Food Pyramid

Trade Name, if any

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

Street 336 Barnes

City Springfield

State Missouri

ZIP Code + 4 65801

7. Date entered into:

12 / 14 / 2009

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

Name Erick Taylor

Name

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

President  
(If other title, see  
instructions)

Title Sole Proprietor

14. Signed

Title Treasurer

Treasurer  
(If other title, see  
instructions)

On 9-1-2010  
Date

2484595700  
Telephone Number

On

Date

Telephone Number

Filer: Mary Holden      Mary L Holden HR/ER Consultant LLC	File Number C-
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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.):

Verbal Agreement with Labor Relations Institute Inc. at \$1500 per day plus reasonable traveling expenses.

<b>Specific Activities to be Performed</b>	
11. For each activity, separately list in detail the information required (See instructions):	
a. Nature of activity: Engaged to communicate to employees regarding their rights to organize and bargain collectively	
11.b. Period during which performed: various days	11.c. Extent performed: fully performed
11.d. Name and address through whom performed: Name    Jim                      Teague Organization    Labor Relations Institute. Inc. P.O. Box, Bldg., Room No., if any Street    7850 South Elm Place ,    Suite E City    Broken Arrow State    Oklahoma                      ZIP Code + 4    74011	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: meat, deli, bakery, produce, and grocery departments, customer service	12.b. Identify subject labor organizations: United Food & Commercial Workers