

440

FD-1001

# Agreement and Activities Report

U.S. Department of Labor

Office of Labor-Management Standards



This report is mandatory under P.L. 89-257 as amended. Failure to comply may result in criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 438, 440.

OMB No. 1214-0001  
02/28/94

677

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).

File No. 65306

## A. Person Filing

428166

1. Name and mailing address (include ZIP code):

WRD, INC.  
CHARLES K. SMITH  
207 GAYLANE DR.  
COLUMBUS, MS. 39702

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

N/A

3. Date fiscal year ends:

12/31/04

4. Type of person:

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

## B. Nature of Agreement or Arrangement

5. Full name and address of employer with whom made (include ZIP code):

JOHN AMBROSE, PLANT MANAGER  
FERRO POLYMER ADDITIVES DIVISION  
RT. 130 SOUTH P.O. BOX 309 BRIDGEPORT, N.J. 08014-0309

6. Date entered into:

05/24/04

7. Names of persons through whom made:

John Ambrose

8. Check the appropriate box to indicate whether an object of the activities undertaken, is direct or indirect:

- a. ☒ To persuade employees to exercise or not to exercise, or persuade employees as to the manner of exercising, the right to organize collectively through representatives of their own choosing.
- b. ☐ To supply and 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 criminal or civil judicial proceeding.

9. Terms and conditions (Explain in detail; see Part B-9 of instructions):

ONE (1) CONSULTANT FOR A TOTAL OF FIVE (5) DAYS TO INCLUDE THESE DATES: 05/24 - 05/28/04. TOTAL OF \$6,000.00 AT A RATE OF \$1200.00 PER DAY.

## C. Specific Activities to be Performed

10. For each activity, separately list in detail the information required (See Part C-10 of instructions):

a. Nature of activity: CIRCULATE AMONG THE EMPLOYEES ON THE WORK SITE TO ANSWER QUESTIONS

b. Period during which performed:

05/24 - 05/28/04 (5 DAYS)

c. Extent performed:

COMPLETED

d. Names and addresses of persons through whom performed:

SAME AS ABOVE

11. Identify (a) subject employees, groups of employees, and (b) labor organizations:

FERRO - POLYMER ADDITIVES DIVISION  
RT. # 130 SOUTH - P.O. BOX 309  
BRIDGEPORT, N.J. 08014-0309



d. Verification and Signature. The person in item 1 above and each of his undersigned authorized officers declares, under penalty of law that all information in this report, including all attachments incorporated therein or referred to in this report, has been examined by him and to the best of his knowledge and belief, true, correct, and complete.

Signed:

Charles K. Smith

President

Signed:

N/A

Treasurer

(If other title, cross out and write in correct title above.)

(If other title, cross out and write in correct title above.)

City State ZIP Date at 207 GAYLANE DR Columbus MS 39702 at 06/09/04 N/A

Public reporting burden for this collection of information is estimated to average 20 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Labor-Management Standards, Department of Labor, Room 5525, 200 Constitution Avenue, N.W., Wash., D.C. 20210; and to the Office of Management and Budget, Paperwork Reduction Project (1214-0001), Wash., D.C. 20503.

Form LM  
(Feb. 19)