

FORM LM-20

AGREEMENT AND ACTIVITIES REPORT

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.

677621

1. File Number: C-00680

Person Filing

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

Name Ronald L. Mason
Title President
Organization Midwest Management Consultants, Inc.
P.O. Box, Bldg., Room No., if any P. O. Box 398
Street
City Dublin
State Ohio ☒ ZIP Code + 4 43017-0398

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

Name Ronald L. Mason
Title President
Organization Midwest Management Consultants, Inc.
P.O. Box, Bldg., Room No., if any P. O. Box 398
Street
City Dublin
State Ohio ☒ ZIP Code + 4 43017-0398

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 Chris Trentini, Principal
Organization Concrete Express of NY LLC
Trade Name, if any
P.O. Box, Bldg., Room No., if any
Street 2279 Hollers Avenue
City Bronx
State NY ☒ ZIP Code + 4 10475

7. Date entered into:

04 / 30 / 2018

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

Name Chris Trentini
Name Donna Trentini
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

Ronald L. Mason

President
(If other title, see
instructions)

Title President

14. Signed

Donna Trentini

Treasurer
(If other title, see
instructions)

Title Treasurer

On 5-17-18
Date

614-734-9455
Telephone Number

On 5-17-18
Date

614-734-9455
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.):

Verbal agreement to represent Concrete Express of NY in campaign to remain union-free. Agreement has never been reduced to writing, is for no specific time and may be terminated by either party at any time.

All consultations billed at \$225/hourly, including travel to/from Bronx, NY and expenses accordingly.

Specific Activities to be Performed

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

a. Nature of activity:

Giving speeches, preparing written materials for distribution, and conducting meetings with employees and management for purpose of addressing and answering questions concerning rights afforded under the NLRA.

11.b. Period during which performed:

04/30/2018 to present

11.c. Extent performed:

continuing

11.d. Name and address through whom performed:

Name Chris Trentini, Principal

Organization Concrete Express of NY LLC

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

Street 2279 Hollers Avenue

City Bronx

State NY ZIP Code + 4 10475

Additional Name and address through whom performed, if any:

Name Donna Trentini

Organization

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

Street

City

State ZIP Code + 4

12.a. Identify subject groups of employees:

All full time and regular part time drivers and mechanics employed at 2279 Hollers Avenue, Bronx, NY.

12.b. Identify subject labor organizations:

Teamsters Local #456