Agreement and Activities Re

Signed:

City

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

State

U.S. Departme of Labor

Employment Standards Administration Office of Labor-Management Standards



This report is mandatory under P.L. 86-257 as amended. Failure to comply may result in criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 439, 440.

Form approved – OMB No. 1215-0188 Expires 07-31-2004

. Person Filing	<u> </u>
	2. Any other address where records necessary to verify this report are kept:
STEVEN E. JONES	
6 HUME CT.	NA
TOWSON MD 21204	
. Date fiscal year ends: 4. Type of person:	
DECEMBER 31 a. Mindividual b. 1	Partnership c. Corporation d. Cother (Specify):
. Nature of Agreement or Arrangement	
. Full name and address of employer with whom made (include Z	ZIP code): 6. Date entered into: SEPTEMBER 3, 2003
CONSTELLATION ENERGY GROUP	7. Names of persons through whom made:
BALTIMORE MD 21202	MARC K. SLOANE
. Check the appropriate box to indicate whether an object of the	
or a priminal or rivil indicial proceeding	trives of their own choosing. The activities of employees or a labor organization in connection with a labor for use solely in conjunction with an administrative or arbitral proceeding TO EXPLAIN INPLICATIONS OF THE ALERSES OF VOITING IN A REFRESION OF VOITING IN A REPRESION OF VOITING IN A VOITING IN A REPRESION OF VOITING IN A REPRESION OF VOITING IN A VOITING IN
BILLED MONTHLY.	D. AND REALITIES OF YOTHING IN A REPRESING BY MUNION FOR PHEROSES OF COLLECTIVE TOO AGREEMENT, SERVICES ARE TO BE
5. Specific Activities to be Performed	
a. Nature of activity: INFORM EMPLOYECS IN RIGHT TO CHOOSE WHETHER, TO FOR PURPOSES OF COLLECTIVE	HE POTENTIAL VOTING UNIT OF THEIR HEY WISH TO PEREPORTED BY A UNION BARGAINING
b. Period during which performed: c. Extent per	erformed: MTEC MITTE ENPLOYEE
9/3/2003 THROUGH ELECTION UP TO 2	STORMED INDIVIDUAL MIES WITH EMPLOYEES A HES PRIOR TO ELECTION
d. Names and addresses of persons through whom perfor	med:
STEVEN E, JONES	,
(SET ABOVE)	
	abor organizations:
	-
1. Identify (a) Subject employees, groups of employees, and (b) Identify (a) Subject employees, groups of employees, and (b) Identify (a) Subject employees, and (b) Identify (a) Subject employees, groups of employees, and (b) Identify (a) Subject employees, groups of employees, and (b) Identify (a) Subject employees, and (b) Identify (a) Subject employees, groups of employees, and (b) Identify (a) Subject employees, groups of employees, and (b) Identify (a) Subject employees, and (c) Identify (a) Subject employees, and (MPLOYEES PHOTE TO THE COLOR OF

Signed:

City

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

State

⊃€Z√-Procident

Date

on:

Treasurer