U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-20 AGREEMENT AND ACTIVITIES REPORT.

Form approved
Office of Management
and Budget
No. 1215-0188
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1. File Number:

Form LM-20 (2003)

C- 00525

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.

Person Filing 2. Name and mailing address (include ZIP Code): 3. Any other address where records necessary to verify this report are kept: Name Name Title Title Organization LRI Consulting Services Inc Organization P.O. Box, Bldg., Room No., if any P.O. Box, Bldg., Room No., if any Street Street 7850 South Elm Place, Suite E Citv City Broken Arrow ZIP Code + 4 74011 State Oklahoma State 5. Type of person: 4. Date fiscal year ends: Partnership c. Corporation d. d. Other (Specify): 49 10 10 27 Individual b. Nature of Agreement or Arrangement 6. Full name and address of employer with whom made (include ZIP Code): 7. Date entered into: 10. /. . . 2012 Name 8. Name of person(s) through whom made: Organization UPS Name Joe Finamore Trade Name, if any Name P.O. Box, Bldg., Room No., if any Name Street 55 Glenlake Parkway NE City Atlanta Name ZIP Code + 4 State Georgia 30328 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 accomplanying docuprents) 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. Signat President Tréasurer (If other title, see (If other title, see instructions) instructions) On 4/10/2012 918-455-9995 4/10/2012 Telephone Number Telephone Number Date

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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. \$3000 per day per consultant plus reasonable travel expenses.	
Specific Activities to be Performed	
11. For each activity, separately list in detail the information required (See instructions):	
a. Nature of activity:	
Engaged to communicate to employees regarding exercising their rights to organize and bargain	
collectively.	
11.b. Period during which performed:	11.c. Extent performed:
3/20/2012	Fully Performed
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:
Name	Name
Organization Taltos Consulting Inc	Organization
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any
Street 1474 Lodgepole Drive	Street
City Henderson	City
State Nevada ZIP Code + 4 89014	State ZIP Code + 4
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:
Office personnel, Clerical	Teamsters

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