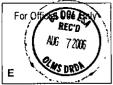


U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-20 AGREEMENT AND ACTIVITIES REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006



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.

1. File Number: C- 00364		
Person Filing	·	
Name and mailing address (include ZIP Code):	Any other address where records necessary to verify this report are kept:	
Name Mark Garrity	Name	
Title President	Title	
Organization Balance Incorporated	Organization	
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any	
Street 1029 Keys Drive	Street	
City Boulder City	City	
State Nevada ZIP Code + 4 89005	State ZIP Code + 4	
Date fiscal year ends: 5. Type of person:		
Dec / 6 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):	7. Date entered into: 7 / 25 / 2006	
Name William McBeath		
Organization Bellagio Hotel-Casino .	8. Name of person(s) through whom made:	
Trade Name, if any	Name William McBeath	
P.O. Box, Bldg., Room No., if any	Name	
Street 3600 Las Vegas Boulevard South	Name	
City Las Vegas	Name	
State Nevada ZIP Code + 4 89109	Name	
Signa	atures	
Each of the undersigned declares, under penalty of perjury and other applicable the information contained in any accompanying documents) has been examined true, correct, and complete. (See Section VII on penalties in the instructions.) 13. Signed President (If other title, see instructions)	penalties of law, that all of the information submitted in this report (including d by the signatory and is, to the best of the undersigned's knowledge and belief, 14. Signed Treasurer (If other title, see instructions)	
On 1 1 10 2 · 293 · 357. Date Telephone Number	On Hand 6 Jane Date Telephone Number	

Filer:	Mark Garrity	Balance Incorporated	File Number C-	00364

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.):

\$25.00 - \$1,000.00 per hour. To do everything the law allows to avoid contamination by OE Local 501. To determine employee benefits, job security, communications and human relations issues. To provide on-going advice to support future enhancement of the work environment, including management training and team building.

Specific Activities to be Performed

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

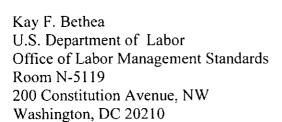
Educational group meetings, one-to-one contact, recommendations to management for lawful improvements and corrections, research into the legal and financial dealings of the labor organization in question.

11.b. Period during which performed:		11.c. Extent performed	11.c. Extent performed:	
ON-GOING		ON-GOING	ON-GOING	
11.d. Name and address through whom performed:		Additional Name and	Additional Name and address through whom performed, if any:	
Name TBD		Name	Name	
Organization		Organization	Organization	
P.O. Box, Bldg., Room No., if any		n No., if any		
Street		Street	Street	
City		City	City	
State	ZIP Code + 4	State	ZIP Code + 4	
12.a. Identify subject groups of employees:		12.b. Identify subject	12.b. Identify subject labor organizations:	
Per 28-RC-6467		A business cal	A business calling itself OE Local 501.	

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BALANCE INCORPORATED

August 1, 2006





Enclosed please find two copies with original signatures of our LM-20 report as applies to case 28-RC-6467.

Sincerely,

Mark Wm Garrity