

71 2450



FORM LM-20
AGREEMENT & ACTIVITIES REPORT

Form Approved
Office of Management and Budget

This report is mandatory under P.L. 85-257, 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 Relations and Disclosure Act of 1959, as amended (LMRDA).

No: 1245-0003
Expires: 09/30/2021

For Official Use Only
E

PLEASE READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

☐ Amended Report

1. a. File Number: C- 633

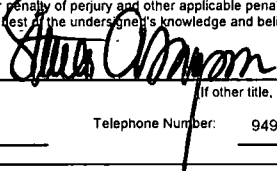
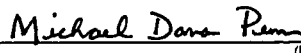
2. Name and mailing address (include ZIP code):		3. Any other address where records necessary to verify this report are kept:	
Name: Steven A Beyer		Name:	
Title: Partner		Title:	
Organization: THE CROSSROADS GROUP LABOR RELATION CONS		Organization:	
P.O. Box, Bldg., Room No., if any: 505		P.O. Box, Bldg., Room No., if any:	
Street: 63 Via Pico Plaza		Street:	
City: SAN CLEMENTE State: CA ZIP: 92672		City: State: ZIP:	

4. Date fiscal year ends: Dec / 31	5. Type of person <input type="checkbox"/> a. Individual <input checked="" type="checkbox"/> b. Partnership <input type="checkbox"/> c. Corporation <input type="checkbox"/> d. Other (Specify):
------------------------------------	---

Nature of Agreement or Arrangement	
6. Full name and address of employer with whom made (include ZIP Code): Name (first, middle, last): Paul Senty Organization: Midwest Natural Gas Company Trade Name, if any: P.O. Box, Bldg., room No., if any: Street: 3600 State Highway 157 City: La Crosse State: WI ZIP: 54601	7. Date entered into: 09/03/2019 8. Name of person(s) through whom made: Name: Paul Senty - Additional names at the end of the report

Signature and Verification

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: Steven A Beyer  Partner (If other title, see instructions)	14. SIGNED: Michael Dana Penn  Partner (If other title, see instructions)
Date: 11/06/2019 Telephone Number: 949-248-0884	Date: 11/21/19 Telephone Number: (818) 999-5632

Nature of Agreement or Arrangement (Continuation)

9. Check the appropriate box(es) 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 by clicking the "Add Attachments" link at the top of the form.)

Written Agreement/Arrangement

Payment on a fee-for-service basis at an hourly rate of \$400.00, plus reasonable and customary expenses.

Specific Activities to be performed

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

Activity 1

a. Nature of activity

To assist the employer with its communications efforts to advise employees of their Section 7 rights and furnish them with information related to third-party representation.

11b. Period during which activities performed:

09/09 through 09/10/2019

11c. Extent performed:

Complete

11d. Name and Address of person(s) through whom activities were performed:

Name (first,middle,last) : Steven A Beyer

Organization: THE CROSSROADS GROUP LABOR RELATION CONS

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

Street

City

State

ZIP

63 Via Pico Plaza

SAN CLEMENTE

CA

92672

12a. Identify subject groups of employees:

Construction Leads, Field technicians and Customer Services Representatives at it's locations in La Crosse, Independence, Westby and Somerset.

12b. Identify subject labor organizations:

ELECTRICAL WORKERS IBEW AFL-CIO(LOCAL UNION 953) - 27107