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

## FORM LM-20 AGREEMENT AND ACTIVITIES REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 12-31-2010



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. I. File Number. C- 00568 Person Filing 2. Name and mailing address (include ZIP Code): Any other address where records necessary to verify this report are kept: Name Rosenbach Name Raymond Title Trtle Treasurer Organization Organization Govt Resources Consultants of America P.O. Box, Bldg., Room No., if any 106 P.O. Box, Bldg., Room No., if any Street 253 Commerce Drive Street City City Grayslake State Illinois ZIP Code + 4 60030 ZIP Code + 4 State 5. Type of person: 4. Date fiscal year ends Dec 14 Individual b. Partnership c. Corporation d. Other (Speaty): Nature of Agreement or Arrangement 7. Date entered into: 6. Full name and address of employer with whom made (include ZIP Code): 2014 Name 8. Name of person(s) through whom made: Organization Pyranmid Pittsburgh Name Rick Knab Trade Name, if any Name P.O. Box, Bldg., Room No., d any Name Street 300 Penn Avenue Cay Wilkinsburg Name ZIP Code + 4 15221 State Pennsylvania Name Signatures

Each of the undersigned declares, under perialty of periury 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 of perialties in the instructions.)  13. Signed President  14. Signed  Treasurer						
Title President	(If other title, see instructions)	Title	Treasurer		(If other title, see instructions)	
On 07-(5- j4 847-337-3480  Date Telephone Number	er	Оп	07-15-1U	847-337-3480 Telephone <b>N</b> umber		
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Filer Raymond Rosenbach Govt Resources Consultants	of America File Number C- 00568				
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.):					
To provide professional consulting services as described in Section 11.					
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Specific Activities to be Performed					
11. For each activity, separately list in detail the information required (See instructions):					
a. Nature of activity:					
Conduct employee and supervisory group meetings to inform and educate participants about their rights, duties, and responsibilities as they pertain to the National Labor Relations Act and National Labor Relations Board procedures such as secret ballot elections, collective bargaining representation, collective bargaining procedures, unfair labor practices, and union rules and finances.					
11.b. Period during which performed:	11.c. Extent performed:				
June through August 2014	On going				
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:				
Name Noble Miller	Name Edward D Young				
Organization GOVE Resources Consultants of America	Organization Govt Resources Consultants of America				
P.O. Box, Bldg., Room No., if any 106	P.O. Box, Bidg., Room No., if any 106				
Street 253 Commerce Drive	Street 253 Commerce Dr				
City Grayslake	City Grayslake				
State Illinois ZIP Code + 4 60030	State Illinois ZIP Code + 4 60030				
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:				
All full time and part time counselors, nurses technicians, maintenance employees, drivers and housekeeping employees	Teamsters Local union 205				