

# FORM LM-20

## AGREEMENT AND ACTIVITIES REPORT

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-666130

### Person Filing

#### 2. Name and mailing address (include ZIP Code):

Name Thomas J Stone

Title Owner

Organization T. Jeff Stone & Associates, LLC

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

Street 1920 Woodbridge Drive

City McKinney

State Texas

ZIP Code + 4 75070-3904

#### 3. Any other address where records necessary to verify this report are kept:

Name

Title

Organization

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

Street

City

State

ZIP Code + 4

#### 4. Date fiscal year ends:

Dec / 30

#### 5. Type of person:

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):

Name Kevin M Rahnert

Organization Plant General Manager

Trade Name, if any RTI Advanced Forming, Inc.

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

Street 1701 West Main Street

City Washington

State Missouri

ZIP Code + 4 63090

#### 7. Date entered into:

10 / 7 / 2014

#### 8. Name of person(s) through whom made:

Name

Name

Name

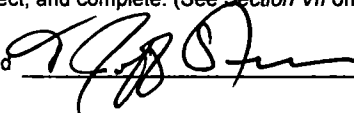
Name

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 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



President  
(If other title, see  
instructions)

Title Sole Proprietor

14. Signed

Title Treasurer

Treasurer  
(If other title, see  
instructions)

On 11/07/2014 225-348-2355

Date

Telephone Number

On

Date

Telephone Number

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.):

Train Managemt and Employee's on what they can and cannot do during a Union organixating campaign. Help develop campaing materal that will be used during Employee meetings. Meet with employees and present the campaign material.

#### Specific Activities to be Performed

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

a. Nature of activity:

Educate Management and Employees. Help develop material, meet with Management and Employees in group settings and manage the election process at the site.

11.b. Period during which performed:

10/7/2014 thru 10/24/2014

11.c. Extent performed:

11.d. Name and address through whom performed:

Name Kevin M Rahnert

Organization Plant General Manager

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

Street 1701 West Main Strteet

City Washington

State Missouri ZIP Code + 4 63090

Additional Name and address through whom performed, if any:

Name

Organization

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

Street

City

State ZIP Code + 4

12.a. Identify subject groups of employees:

All non-exempt employees excluding, managers and guards.

12.b. Identify subject labor organizations:

I.A.M. Local Lodge 837.