

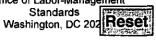
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AGREEMENT AND ACTIVITIES REPORT



Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2009



Renumber Pages





This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecular penalties as provided by 29 U.S.C. 439 or 440. Required of persons, including Labor Relations Consultar and Organizations Under Section 203(b) of the Labor-Management Reporting and Disclosure Act of 1959

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPO

E CAT DATE	338608	
1. File Number: C - 00525		
Person Filing		
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, Bidg., Rcom No., if any
Street 7850 South Elm Place, Suite E		Street
City Broken Arrow		City
State Oklahoma ZIP Code + 4 74011		State ZIP Code + 4
4. Date fiscal year ends:	5. Type of person:	<u> </u>
Dec /31	a Individual b. Partnership	c. Corporation d. Other (Specify):
Nature of Agreement or Arrangeme	ent	
6. Full name and address of employer with whom made (include ZIP Code):		7. Date entered into: 9 / 19 / 2007
Name		
Organization Saia		8. Name of person(s) through whom made:
Trade Name, if any		Name Walter Schumacher
P.O. Box, Bldg., Room No., if any		Name
Street 11465 Johns Creek Parkway, Suite 400		Name
City Duluth		Name
State Georgia	ZIP Code + 4 30097	Name
	Sign	atures
Each of the undersigned declares, unthe information contained in any accountrue, correctnot Ready To Sign 13. Signed President President	mpanying documents) has been examine	e penalties of law, that all of the information submitted in this report (including d by the signatory and s; to the best of the indersigned's knowledge and belief, Not Ready to Sign 14. Signed Treasurer (If other title, see instructions)
amp lete On 10/8/2007 9:	18-455-9995	On 10/8/2007 918-455-9995

Date

Telephone Number

Date

Telephone Number

Filer: LRI Consulting Services, Inc	File Number C - 00 5 25	
Check the appropriate box to indicate whether an object of the activities unde	rtaken, is directly or indirectly.	
or or other the appropriate box to mental and assistance and	nation, is allosity of interesty.	
a. To persuade employees to exercise or not to exercise, or persuade er collectively through representatives of their own choosing.	nployees as to the mainner of exercising, the right to organize and bargain	
b. To supply an employer with information concerning the activities of en such employer, except information for use solely in conjunction with a	nployees or a labor organization in connection with a labor dispute involving in administrative or arbitral proceeding or a criminal or civil judicial proceeding.	
10. Terms and conditions (Explain in detail; see instructions. Written agreements Agreement to provide consultation, to give speeches organize and bargain collectively.	, ·	
Specific Activities to be Performed		
11. For each activity, separately list in detail the information required (See instruction a. Nature of activity:	tions): partes T-RG CNT点象	
Employeed to give speeches to employees regarding their rights to organize and bargain collectively.		
11.b. Period during which performed: 9/10-9/13/07	11.c. Extent performed: fully performed	
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:	
Name Joseph Brock	Name	
Organization East Coast Labor Relations, LLC	Organization	
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any	
Street 151 Forge Road	Street	
City Delran	City	
State New Jersey ZIP Code + 4 08075	State ZIP Code + 4	
2.a. Identify subject groups of employees:	12.b. Identify subje ≾ labor organizations:	
ock, Linehaul, City Drivers, Yard Switchers	Teamsters	
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