Department of Labor ffice 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 09-30-2011



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- 00525							
Person Filing	iling address (include 7	'IP Code):		3 Any othe	r address where reco	rds necessary to verify this	report are kept:
Name and mailing address (include ZIP Code):				Any other address where records necessary to verify this report are kept: Name			
Name							
Title				Title			
Organization				Organization LRI Consulting Services, Inc.			
P.O. Box, Bldg., Room No., if any				P.O. Box, Bldg., Room No., if any			
Street				Street 7850 S Elm Place, Suite E			
City			City Broken Arrow				
State		ZIP Code + 4		State Okl	ahoma	ZIP Code + 4 7	4011
4. Date fiscal ye	4. Date fiscal year ends: 5. Type of person:						
Dec	/ 31	a. Individual	b. Partnership	c. Corpo	oration 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: 4 / 30 / 2010			
Name				8. Name of person(s) through whom made:			
Organization Bartelstone Glass Distributors, Inc.				Name Barbara Dodd			
Trade Name, if any							
P.O. Box, Bldg., Room No., if any				Name			
Street 441 Co	rtlandt Street			Name			
City Belleville				Name			
State New Je	rsey	ZIP Code + 4	07109	Name			
Signatures Signatures							
the information of true, correct, and	ersigned declares und contained in any accord decomplete (See Secti	ipanying document	s) has been examined <u>in t</u> he instructions.)	penalties of I by the signal	aw, that all of the infor	rmation submitted in this re t of the undersioned's know	ledge and belief,
13. Signed			President (If other title, see	14. Signea			Treasurer (If other title, see
Title Pre	esident		instructions)	Title	Treasurer		instructions)
On 06,	/15/2010 91	8-455-9995		On	06/15/2010	918-455-9995	
	Date	Telephone Numbe	r		Date	Telephone Number	
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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.):
See attached.

Specific Activities to be Performed

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

Employed to give speeched to employees regarding exercising their rights to organize and bargain collectively.

11.b. Period during which performed:	11.c. Extent performed:		
various days 5/6/10 thru 5/12/10	Fully performed		
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:		
Name Mike Rosado	Name		
Organization M. Rosado Management Consultants, LLC	Organization		
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any		
Street 96 Linwood Plaza, Suite 103	Street		
City Fort Lee	City		
State New Jersey ZIP Code + 4 07024	State ZIP Code + 4		
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:		
Drivers	Teamsters		

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AGREEMENT FOR CONSULTING SERVICES

TO:

Barbara Dodd

Bartelstone Glass Distributors, Inc.

44 Cortlandt Street Belleville, NJ 07109 DATE:

April 30, 2010

PROPOSED INTERVENTION:

LRI Consulting Services, Inc. will provide consulting services to assist Bartelstone Glass in communicating factual and legally accurate information to eligible voters in NLRB-conducted election to enable voters to make fully informed choices in voting.

TIMING:

The project will begin on or about 5/6/10 and conclude on or about 5/12/10.

TERMS AND CONDITIONS:

Fees: The fee for this project is \$375 per consulting hour plus travel expenses.

Payment Terms: A \$3750.00 retainer is required upon acceptance of this proposal with the balance due within 30 days or prior to the date of your election, whichever is first. You agree and acknowledge that failure to pay fees or expenses associated with this project under these terms will result in reassignment of the consultant(s) and a penalty of 2% per month until all outstanding invoices are paid in full.

Expenses: Expenses will be billed as actually incurred and are due on presentation of the invoice. Reasonable business expenses include, but are not limited to, transportation (air, rental car, taxi, etc.), lodging, food, and costs for campaign communication materials.

You further acknowledge that no representation by LRICS or its representatives were relied on by you or any member of your company in entering this agreement, and that this document represents the full understanding of the parties. Your deposit, in the absence of your signature below, indicates your acceptance of this project and the terms and conditions as stated herein.

ACCEPTANCE:

We accept the Agreement and terms described above:

For LRI Consulting Services, Inc.

For Bartelstone Glass Distributors, Inc

Phillip B. Wilson

President – General Counsel

DATE: April 30, 2010

Name: Barbara Dodd Title: Controller

DATE: