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

FORM LM-20 AGREEMENT AND ACTIVITIES REPORT

Form approved
Office of Management
and Budget
No. 1245-0003
Expires 08-31-2016

RECEIVED

APR 1 6 2015

ly

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- 00633 Person Filing 3. Any other address where records necessary to verify this report are kept: 2. Name and mailing address (include ZIP Code): Name Steven A Beyer Title Title Partner Organization Organization The Crossroads Group Labor Relations Consi P.O. Box, Bldg., Room No., if any 505 P.O. Box, Bldg., Room No., if any Street Street 63 Via Pico Plaza City San Clemente City ▼ ZIP Code + 4 **ZiP Code + 4** 92672 State California State 5. Type of person: 4. Date fiscal year ends: a. Individual b. Partnership c. Corporation d. Other (Specify): Dec **I** Nature of Agreement or Arrangement 7. Date entered into: 6. Full name and address of employer with whom made (include ZIP Code): / 21 / 2014 Name Nancy Geraghty 8. Name of person(s) through whom made: Organization Capstone Logistics, LLC Name Nancy Geraghty Trade Name, If any Name P.O. Box, Bldg., Room No., if any 520 Name Street 6525 The Corners Parkway City Peachtree Corners Name ▼ ZIP Code + 4 30092 State Georgia Name

Signatures								
the informa	ıtion contained in any a	under penalty of perjunct companying documents Section VII on penalties i	s) has been examine					
13. Signed	Solu Ja	Moore	President (If other title, see	14. Signed	Michael	Dane	Per	Treasurer (If other title, see
Title	Other (Specify)		instructions)	Title	Other (Specif	y)	<u> </u>	instructions)
	Partner	•			Partner			
On	3/28/2014	(949) 248-0884		On	04/11/14		999-5632	
	Date	Telephone Numbe	·		Date	Tele	phone Number	

Filer: Steven Beyer The Crossroads Group Labor Relat.	ions Consu File Number C- 00633					
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.						
40. Towns and conditions (Evalue in details are instructions. Written agreements	must be attached >					
10. Terms and conditions (Explain in detail; see instructions. Written agreements must be attached.): Payment on a fee-for-service basis at an hourly rate of \$350.00 per hour, plus reasonable and customary expenses (see attachment)						
<u> </u>						
Specific Activities to be Performed						
11. For each activity, separately list in detail the information required (See instructions):						
a. Nature of activity:						
To assist the employer's communication efforts to advise employees of their Section 7 rights and furnish them with information related to third-party representation						
11.b. Period during which performed:	11.c. Extent performed:					
3/25/2014 - 3/27/2014	Complete					
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:					
Name Steven A Beyer	Name					
Organization The Crossroads Group Labor Relations Consi	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	City					
State California ZIP Code + 4 92672	State ZIP Code + 4					
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:					
All employees at the Employer's Carteret, New Jersey locations within the White Rose distribution centers	N/A					

Form LM-20 (2003) Page 2 of 2