U.S. Departi ant of Labor **Employment Standards Administration** Office of Labor-Management Standards



464

Revised

This report is mandatory under P.L. 86-257 as amended. Failure to comply may result in criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 439, 440.

Required of Persons, including Labor Relations Consultants and Other Individuals and Organizations,

Form approved - OMB No. 1215-0188 Expires 11-30-2002

File No.

under Section 203(b) of the Labor-Management Reporting and Disc	Slosdie Act of 1959, as afficiated (LIMITDA).				
A. Person Filing					
Name and mailing address (include ZIP code):	2. Any other address where records necessary to verity this report are kept:				
Labor Information Service, Inc. PO Box 6063 Malibu, CA 90264	None				
Date fiscal year ends: 4. Type of person:					
	Partnership C. 🗵 Corporation d. 🗆 Other (Specify):				
B. Nature of Agreement or Arrangement					
5. Full name and address of employer with whom made (include	ZIP code): 6. Date entered into: 3/20/01				
Universal Molding Extrusion Company	7. Names of persons through whom made:				
9151 E Imperial Highway Downey, CA 90242 - 2808	Dominick Baione				
8. Check the appropriate box to indicate whether an object of the	activities undertaken, is directly or Indirectly:				
A IX To persuade employees to exercise or not to exer organize and bargain collectively through represent	rcise, or employees as to the manner of exercising, the right to tatives of their own choosing.				
dispute involving such employer, except information or a criminal or civil judicial proceeding.	the activities of employees or a labor organization in connection with a labor n for use solely in conjunction with an administrative or arbitral proceeding				
9. Terms and conditions (Explain in detail; see Part B-9 of instruct	tions):				
	g meetings with employees from the voting unit to discuss the realities of signing of 400 hours will be allocated to this work. Billing of time and expenses will be done unt.				
Increase I	hours to 400.				
C. Specific Activities to be Performed					
10. For each activity, separately list in detail the information requi	red (See Part C-10 of instructions):				
a. Nature of activity:					
To inform employees in the voting unit to exercise their right to choose bargaining.	e whether or not they wish to be represented for the purposes of collective				
b Davied during which performed:	performed:				
b. reflect during which performed.	eetings, up to 24 hours before the election will be performed. These will be group or				
	neetings to discuss NLRA basic guidelines, review ACT and answer questions.				
d. Names and addresses of persons through whom perfo	ormed:				
J. Cruz A. Tovar - Both with Labor Information Services, Inc PO Box 6063 - I	Malibu, CA 90264				
11. Identify (a) Subject employees, groups of employees, and (b) laborall voting employees in bargaining unit.	or organization: MAY 3 200				
	USDOL/ESA OLMS/DOE/SRD				

D. Verification and Signature. The person in item I above and each of his undersigned authorized officers declares, under penalty of law, that all information in this report, including all attachments incorporated therein or referred to in this report, has been examined by him and is, to the best of his knowledge and belief, true, correct, and complete

Signed:	TOF	> \.		Signed:		
	1 Out	- Ohn	President			Treasurer
(if othe	r title, cross out and wr	ite in correct title ab	ove.)	(if other title, cross out a	nd write in correct title	above.)
	city	state	Date	city	state	Date
at:	Malibu	CA	on: 5/23/01	at:		on:

Agreement and Activities report

Signed:

at

city

Malibu

(if other title, cross out and write in correct title above.)

state

CA

U.S. Department of Labor **Employment Standards Administration**

Office of Labor-Management Standards



464

This report is mandatory under P.L. 86-257 as amended. Failure to comply may result in criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 439, 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).

Form approved - OMB No. 1215-0188 Expires 11-30-2002

C.

File No.

A. Person Filing				
Name and mailing address (include)	Any other address where records necessary to verity this report are kept: None			
Labor Information Service, Inc. PO Box 6063 Malibu, CA 90264				
3. Date fiscal year ends:	4. Type of person:	•		
12/31/01	a. 🗌 Individual 🛮 b. 🔲	Partnership	C. Corporation	n d. 🗌 Other (Specify):
B. Nature of Agreement or Arra	ingement			
5. Full name and address of emplo	oyer with whom made (include	ZIP code):	6. Date entered into:	3/4/01
Mercy Fitzgerald Hospital 1500 Landsdowne Avenue			through whom made:	
Darby, PA 19023 8. Check the appropriate box to in	dicate whether an object of the	activities under	Cass Byrne	directly:
A. X To persuade employe organize and bargain b. To supply an employe	ees to exercise or not to exer- collectively through represent r with information concerning to employer, except information	cise, or emplo tatives of their of the activities of e	byees as to the ma own choosing. employees or a labor of	anner of exercising, the right to organization in connection with a labor administrative or arbitral proceeding
9. Terms and conditions (Explain in	n detail; see Part B-9 of instruct	tions):		
monthly. There is no written agreement	upcoming election. A maximum o ent as to a maximum billable amou	f 400 hours will be		Billing of time and expenses will be done
C. Specific Activities to be				
10. For each activity, separately lis	it in detail the information requir	red (See Part C-	10 of instructions):	
a. Nature of activity:				
To inform employees in the voting ur bargaining.	nit to exercise their right to choose	whether or not the	ey wish to be represente	ed for the purposes of collective
b. Period during which perfe	ormed: c. Extent p	performed:		
3/5/01 through electio	on date On-going me	eetings, up to 24 h		will be performed. These will be group or review ACT and answer questions.
d. Names and addresses o	f persons through whom perfo	ormed:		
H. Desch M. Roan	nc PO Box 6063 - Malibu, CA 90264			D & G E I V E
11. Identify (a) Subject employees, g All voting employees in bargaining ur	groups of employees, and (b) labor	r organization:		USDOL/ESA OLMS/DOE/SRD
	ncluding all attachments incorp	orated therein or		ficers declares, under penalty of law, ort, has been examined by him and is,

Signed:

at:

city

(if other title, cross out and write in correct title above.)

state

President

Date

4/9/01

Date

Treasurer

U.S. Department of Labor

Office of Labo

lagement Standards



This report is mandatory under P.L. 86-257 as amended. Failure to comply may result in criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 439, 440.

OMB No. 1214-0001 02/29/93

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).

C. 464 File No.

A. Person Filing						
 Name and maling address (inc 		2. A	ny other address	where records r	necessary to ve	erify this report are kept
Labor Information Service	es, Inc.					
P 0 Box 6063				NONE		
Malibu, CA 90264						
3. Date fiscal year ends:	4. Type of person:	•				
12/31/01	a. 🗆 Individu	ual b. 🗆 Parti	nership c. 🖾	Corporation	d. 🗆 Other	(Spedify):
B. Nature of Agreement or A						,
5. Full name and address of em	ployer with whom ma	ide (include ZIP co	de): 6. Da	te entered into:		
MGQ, Inc.			- 11	2/20/01		
1525 W County			7. N	ames of persons		made:
8. Check the appropriate box to		chiest of the activ	tioe undortakon	Lynn Rad		
a. 🖾 To persuade employe						a, the right to organize
	epresentatives of the		acada ampioyaa	0 40 10 11-0 11-41	or or oxoroion.	gs are right to organize
b. To supply and emplo			vities of employe	es or a labor org	anization in co	nnection with a labor
						rbitral proceeding or a
criminal or civil judic	al proceeding.					
9. Terms and conditions (Explain	n in detail; see Part B	-9 of instructions):				
Starting 2/21/01 t	hrough election	, our firm wil	l be conductin	ng meetings w	ith employee	s from the voting
unit to discuss the real	ities of signing	authorization	cards and voti	ing in the upo	coming elect	ion. A maximum of
500 hours will be al	located to this w	ork. Billing	of time and ex	penses will	e done mont	hly. There is
no written agreement as						100 to \$ 100 to
C. Specific Activities to be	Performed					
10. For each activity, separately	list in detail the infor	mation required (S	ee Part C-10 of in	structions):		
a Natura of activity. To	:			+		
a. Nature of activity: To					it to choose	whether or not
they wish to be represen	ted for the purpo	ses of collect	ive bargaining			
b. Peroid during which per	formed:	c. Extent perform	ned: On-going	meetings, up	to 24 hours	before the election
2/21/01 through	election date					ual meetings to
2/21/01 through	election date					er questions.
d. Nam, es and addresses	of persons through w	hom performed:			MA MIN MININ	
R Melita = Lab	or Information Se	rvices Inc		(comme		M E []
	Box 6063	rvices, inc.		10	3 6 3 1	VBI
				1107	AND DESCRIPTION OF THE PERSON	
11. Identify (a) Subject employe	ibu. CA 90264 es. groups of employ	ees, and (b) labor	organizations:	- linll		0001
, (2, 222, 22 2)	от в соро с с прису		- Jan		APR 5	2001
All voting employe	es in bargaining	unit.		less that		
					USDOL/ES	SA
					OLMS/DOE/	SRD
D. Verfication and Signature	. The person in item	1 above and each	of his undersign	ed authorized of	ficers declares	, under penalty of law,
that all information in this report to the best of his knowledge and			therein or referre	d to in this repo	rt, has been ex	amined by him and is,
Signed:			Signed:			
1 Dives	Sur	Presiden				Treasurer
(If other title, cross out and write	in correct title above			ross out and wri	te in correct titl	
City	State	Date	Cit		State	Date

Malibu on: 3/13/01 Public reporting burden for this collection of information is estimated to average 20 minutes per response, including the time for reviewing instructions searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Labor Management Standards, Department of Labor, Room N5625, 200 Constitution Avenue, N.W., Wash., D.C. 20210; and to the Office of Management and Budget, Paperwork Reduction Project (1214-0001), Wash., D.C. 20503.

at:

Agreement and Activities . . eport

U.S. Department of Labor Employment Standards Administration



Office of Labor-Management Standards Form approved - OMB No. 1215-0188 This report is mandatory under P.L. 86-257 as amended. Failure to comply may Expires 11-30-2002 result in criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 439, 440. Required of Persons, including Labor Relations Consultants and Other Individuals and Organizations, File No C 464 Under Section 203(b) of the Labor-Management Reporting and Disclosure Act of 1959, as amended (LMRDA) A. Person Filing 2. Any other address where records necessary to verity this report are kept: 1. Name and mailing address (include ZIP code): None Labor Information Service, Inc. PO Box 6063 Malibu, CA 90264 3. Date fiscal year ends: 4. Type of person: 12/31/01 b. Partnership C. X Corporation d. Other (Specify): a. Individual B. Nature of Agreement or Arrangement 6. Date entered into: 5. Full name and address of employer with whom made (include ZIP code): 2/14/01 Holy Cross Hospital 7. Names of persons through whom made: 4725 N. Federal Hwy Fort Lauderdale, FL 33308 John Johnston 8. Check the appropriate box to indicate whether an object of the activities undertaken, is directly or Indirectly. To persuade employees to exercise or not to exercise, or employees as to the manner of exercising, the right to organize and bargain collectively through representatives of their own choosing. To supply an employer with information concerning the activities of employees or a labor organization in connection with a labor b 🗆 dispute involving such employer, except information for use solely in conjunction with an administrative or arbitral proceeding or a criminal or civil judicial proceeding. 9. Terms and conditions (Explain in detail; see Part B-9 of instructions): Starting 2/15/01 through the election date, our firm will be conducting meetings with employees from the voting unit to discuss the realities of signing authorization cards and voting in the upcoming election. A maximum of 300 hours will be allocated to this work. Billing of time and expenses will be done monthly. There is no written agreement as to a maximum billable amount. Specific Activities to be Performed 10. For each activity, separately list in detail the information required (See Part C-10 of instructions): a. Nature of activity: To inform employees in the voting unit to exercise their right to choose whether or not they wish to be represented for the purposes of collective bargaining. c. Extent performed: b. Period during which performed: 2/15/01 through election date On-going meetings, up to 24 hours before the election will be performed. These will be group or individual meetings to discuss NLRA basic guidelines, review ACT and answer questions. d. Names and addresses of persons through whom performed S. Harris = Labor Information Services, Inc. - P.O. Box 6063 - Malibu, CA 90264

All voting employees in bargaining unit. 2001 USDOL/ESA D. Verification and Signature. The person in item I above and each of his undersigned authorized officers declares, under penalty of law, that all information in this report, including all attachments incorporated therein or referred to in this report, has been examined by him and is, to the best of his knowledge and belief, true, correct, and complete. Signed Signed: President Treasurer (if other title, cross out and write in correct title above. (if other title, cross out and write in correct title above.) city Date city Date state Malibu CA 3/13/01 on Form LM-20 (Feb. 1990)

11. Identify (a) Subject employees, groups of employees, and (b) labor organization: