



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. 1214-000

02/29/95

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).

File No. C. 530

**A. Person Filing**

1. Name and mailing address (include ZIP code): John Sullivan 2701 Trelawny Drive Clarksville TN 37043	2. Any other address where records necessary to verify this report are kept
3. Date fiscal year ends: 12-31-2001	4. Type of person: a. <input checked="" type="checkbox"/> Individual b. <input type="checkbox"/> Partnership c. <input type="checkbox"/> Corporation d. <input type="checkbox"/> Other (Specify):

**B. Nature of Agreement or Arrangement**

5. Full name and address of employer with whom made (include ZIP code): Rumsey Electric Co. 15 Colwell Lane Conshohocken PA 19428	6. Date entered into: 8-6-2001
7. Names of persons through whom made: Gerald M. Lihota	
8. Check the appropriate box to indicate whether an object of the activities undertaken, is directly or indirectly: a. <input checked="" type="checkbox"/> To persuade employees to exercise or not to exercise, or persuade employees as to the manner of exercising, the right to organize collectively through representatives of their own choosing. b. <input type="checkbox"/> To supply and 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.	
9. Terms and conditions (Explain in detail; see Part B-9 of instructions): One consultant and one campaign manager for \$55,000.00	

**C. 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: 1) Hold captive audience meetings, show videos provided by employer and answer questions. 2) Circulate with employees for questions and answers.	
b. Period during which performed: 8/6 - 9/5/2001	c. Extent performed: Complete
d. Names and addresses of persons through whom performed: 1) Khanh Tran - PO Box 1501 Lake Forest CA 92630 2) John Sullivan - Same as #1	
11. Identify (a) Subject employees, groups of employees, and (b) labor organizations: a) Rumsey Electric Employees b) Teamsters	



**D. Verification and Signature.** The person in item 1 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: [Signature] (If other title, cross out and write in correct title above.) at: Clarksville TN Date on: 9/5/01	Signed: Sale Proprietor President (If other title, cross out and write in correct title above.) at: _____ State _____ Date _____
	Treasurer (If other title, cross out and write in correct title above.) at: _____ State _____ Date _____

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.

# Agreement and Activities Report

U.S. Department of Labor  
Office of Labor-Management Standards



OMB No. 1214-0001  
02/29/93

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).

File No. C. 530

## A. Person Filing

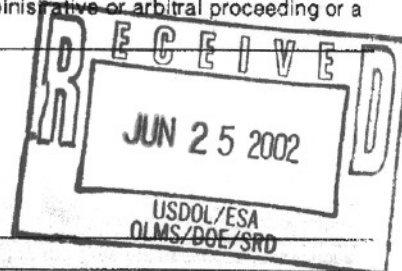
1. Name and mailing address (include ZIP code): John Sullivan 2701 Trelawny Drive Clarksville TN 37043	2. Any other address where records necessary to verify this report are kept:
3. Date fiscal year ends: 12-31-2001	4. Type of person: a. <input checked="" type="checkbox"/> Individual b. <input type="checkbox"/> Partnership c. <input type="checkbox"/> Corporation d. <input type="checkbox"/> Other (Specify):

## B. Nature of Agreement or Arrangement

5. Full name and address of employer with whom made (include ZIP code): Lawson Mardon 6700 Midland Industrial Drive Shelbyville KY 40065	6. Date entered into: 7-12-2001
7. Names of persons through whom made: Steve Barait	
8. Check the appropriate box to indicate whether an object of the activities undertaken, is directly or indirectly: a. <input checked="" type="checkbox"/> To persuade employees to exercise or not to exercise, or persuade employees as to the manner or exercising, the right to organize collectively through representatives of their own choosing. b. <input type="checkbox"/> To supply and 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.	

## 9. Terms and conditions (Explain in detail; see Part B-9 of instructions):

2 Consultants for 20 Days  
1 Consultant for 7 Days for \$63,000.00



## C. 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: 1) Hold captive audience meetings, show videos provided by employer and answer questions. 2) Circulate with employees for questions and answers.		
b. Period during which performed: 7/13 - 8/10/01	c. Extent performed: Complete	
d. Names and addresses of persons through whom performed: Lee Bell - 10223 Sunridge Trail, Dallas TX 75243 Elizabeth Hernandez - 2546 Santa Ana Ave #C, Costa Mesa CA 92627 William Price - 1015 Hillshire Drive, Clarksville TN 37040		

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

a) Lawson Mardon Employees  
b) Graphic Communication International Union, Local 6A-M

**D. Verification and Signature.** The person in item 1 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: [Signature] (If other title, cross out and write in correct title above.) City: Clarksville State: TN Date: 8/10/01	Signed: Dale Papneib Resident (If other title, cross out and write in correct title above.) City: State: Date:	Signed: [Signature] Treasurer (If other title, cross out and write in correct title above.) City: State: Date:
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Form LM-20  
(Feb. 1990)



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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).

File No. C. 530

**A. Person Filing**

1. Name and mailing address (include ZIP code): John Sullivan 2701 Trelawny Drive Clarksville TN 37043		2. Any other address where records necessary to verify this report are kept:	
3. Date fiscal year ends: 12-31-2001	4. Type of person: a. <input checked="" type="checkbox"/> Individual b. <input type="checkbox"/> Partnership c. <input type="checkbox"/> Corporation d. <input type="checkbox"/> Other (Specify):		

**B. Nature of Agreement or Arrangement**

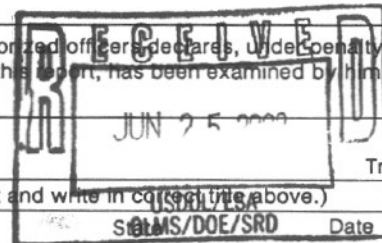
5. Full name and address of employer with whom made (include ZIP code): Tuscarora Inc. 800 Fifth Avenue New Brighton PA 15066		6. Date entered into: 7/9/2000
7. Names of persons through whom made: Tessie Kucherawy		
8. Check the appropriate box to indicate whether an object of the activities undertaken, is directly or indirectly: a. <input checked="" type="checkbox"/> To persuade employees to exercise or not to exercise, or persuade employees as to the manner or exercising, the right to organize collectively through representatives of their own choosing. b. <input type="checkbox"/> To supply and 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.		
9. Terms and conditions (Explain in detail; see Part B-9 of instructions): 2 Consultants for 18 Days 1 Campaign Manager to do 25 <sup>th</sup> hour presentations on 3 days for \$80,000.00.		

**C. 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: 1) Hold captive audience meetings, show videos provided by employer, and answer questions. 2) Circulate with employees for questions and answers		
b. Period during which performed: 7/9-8/1/2001		c. Extent performed: Completed
d. Names and addresses of persons through whom performed: 1) Khanh Tran - PO Box 1501 Lake Forest CA 92630 2) Charles K. Smith - 207 Gaylane Drive, Columbus MS 39702 3) John Sullivan - 2701 Trelawny Drive, Clarksville TN 37043		
11. Identify (a) Subject employees, groups of employees, and (b) labor organizations: a) Employees at 1323 Main St, Mt. Pleasant TN; 1620 Old Belfast Rd and 520 Church St, Lewisburg TN, Tuscarora Inc. b) United Auto Workers		

**D. Verification and Signature.** The person in item 1 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: [Signature] Sole Proprietor President	Signed:	Treasurer
(If other title, cross out and write in correct title above.)	(If other title, cross out and write in correct title above.)	
City State Date at: Clarksville TN on: 8/8/01	City State Date at: on:	



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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).

File No. C. 530

### A. Person Filing

1. Name and mailing address (include ZIP code): John Sullivan 2701 Trelawny Drive Clarksville TN 37043	2. Any other address where records necessary to verify this report are kept:
3. Date fiscal year ends: 12-31-2001	4. Type of person: a. <input checked="" type="checkbox"/> Individual b. <input type="checkbox"/> Partnership c. <input type="checkbox"/> Corporation d. <input type="checkbox"/> Other (Specify):

### B. Nature of Agreement or Arrangement

5. Full name and address of employer with whom made (include ZIP code): GEMACO 2925 North Highway 7 Blue Springs MO 64014	6. Date entered into: 03-04-01
7. Names of persons through whom made: Chuck Walitala	
8. Check the appropriate box to indicate whether an object of the activities undertaken, is directly or indirectly: a. <input type="checkbox"/> To persuade employees to exercise or not to exercise, or persuade employees as to the manner or exercising, the right to organize collectively through representatives of their own choosing. b. <input type="checkbox"/> To supply and 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.	
9. Terms and conditions (Explain in detail; see Part B-9 of instructions): 2 Consultants for (20) days for \$45,000.00	

### C. 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: 1) To hold captive audience meetings, show videos provided by employer, and answer questions. 2) Circulate with employees for questions and answers.		
b. Period during which performed: 3/4/01 - 3/28/01	c. Extent performed: Completed	
d. Names and addresses of persons through whom performed: Khanh Tran - PO Box 1501 Lake Forest CA 92630		

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

- a) GEMACO  
b) Graphic Communications Union



**D. Verification and Signature.** The person in item 1 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: <i>[Signature]</i> President	Signed: _____ Treasurer
(If other title, cross out and write in correct title above.)	(If other title, cross out and write in correct title above.)
City: Clarksville State: TN Date: 4/6/01	City: _____ State: _____ Date: _____

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# Agreement and Activities Report

U.S. Department of Labor

Office of Labor Management Standards



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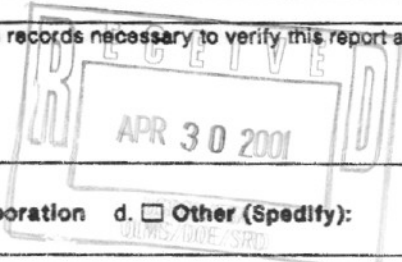
OMB No. 1214-0001  
02/29/93

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).

File No. C. 530

## A. Person Filing

1. Name and mailing address (Include ZIP code): John Sullivan 2701 Trelawny Drive Clarksville TN 37043	2. Any other address where records necessary to verify this report are kept:
3. Date fiscal year ends: 12-31-2001	4. Type of person: a. <input checked="" type="checkbox"/> Individual b. <input type="checkbox"/> Partnership c. <input type="checkbox"/> Corporation d. <input type="checkbox"/> Other (Specify):



## B. Nature of Agreement or Arrangement

5. Full name and address of employer with whom made (include ZIP code): Public Service Co. of New Mexico Alvarado Square Albuquerque NM	6. Date entered into: 3-5-2001
7. Names of persons through whom made: Robert Curtis	
8. Check the appropriate box to indicate whether an object of the activities undertaken, is directly or indirectly: a. <input checked="" type="checkbox"/> To persuade employees to exercise or not to exercise, or persuade employees as to the manner or exercising, the right to organize collectively through representatives of their own choosing. b. <input type="checkbox"/> To supply and 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.	

## 9. Terms and conditions (Explain in detail; see Part B-9 of instructions):

Five Consultants for (20) Days. Two Consultants and additional (2) Days. Pay = \$130,000.00

## C. 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: 1) Travel to work sites and hold captive audience meetings, show videos provided by employer, and answer questions. 2) Circulate with employees for questions and answers.	
b. Period during which performed: 3/5 - 4/2/2001	c. Extent performed: Completed
d. Names and addresses of persons through whom performed: 1) Charles K. Smith, 207 Gaylane Dr, Columbus MS 39702 2) Herman C. Wiggins, 8017 McKee Blvd, Oklahoma City, OK 73132 3) Lee Bell, 10223 Sunridge Trail, Dallas TX 75243 (See Attached)	

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

a) Public Service Co. of New Mexico  
b) International Brotherhood of Electrical Workers.

**D. Verification and Signature.** The person in item 1 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: (If other title, cross out and write in correct title above.) City: Clarksville State: TN Date: 4/2/01 at: Clarksville TN on: 4/2/01	Signed: _____ (If other title, cross out and write in correct title above.) City: _____ State: _____ Date: _____ at: _____ on: _____
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Form LM-20  
(Feb. 1990)

10: C:

4) William A. Price, Jr.  
1015 Hillshire Drive  
Clarksville TN 37040

C-530

5) Ricardo Pasalagua  
6 Seaside Circle  
Newport Beach CA 92663

