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. 1215-0188
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Form LM-20 (2003)

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Document;Integrity Verified

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: Person Filing 2. Name and mailing address (include ZIP Code): 3. Any other address where records necessary to verify this report are kept: Name Name Thomas Zigray Title Vice-President Title Organization, Informed Choices Education, Inc. Organization P.O. Box, Bldg., Room No., if any P.O. Box, Bldg., Room No., if any 9月63日45 Street -Street 6501 E. Greenway Parkway #103-114 eponte de la City Scottsdale ZIP Code + 4 85254 State 4. Date fiscal year ends: 5. Type of person: THE. Individual ⊕b.gca. Partnership c. **X** Corporation d. Other (Specify): or compatible) W MEN ? J. Ben L. Nature of Agreement or Arrangement 6. Full name and address of employer with whom made (include ZIP Code): 7. Date entered into: 05 / 30 / 2010 0 5 7 20 Hunter 8. Name of person(s) through whom made: Organization The Art Institutes, Seattle Trade Name, if any Name P.O. Box, Bldg., Room No., if any Street 2323 Elliott Avenue Name City Seattle Name State ZIP Code + 4 98121-1642 Name Signatures Each of the undersigned declares, under penalty of perjury and other applicable penalties of law, that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See Section VII on penalties in the instructions.) Treasurer (If other title; seegraphical instructions) and Vice-President Secretary On 06/24/2010 Telephone Number Date Telephone Number 9 6 302 6

Filer: Thomas Zigray Informed Choices Education, Inc.	File Number C-
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- 9. Check the appropriate box to indicate whether an object of the activities undertaken, is directly or indirectly:
 - a. X 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.):

The Art Institutes has agreed to contract with Informed Choices Education, Inc. to provide educational consulting services for its employees.

Specific Activities to be Performed

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

7. 4

The Art Institutes was engaged to educate their employees of their Section 7 rights under the NLRA (National Labor Relations Act).

11.b. Period during which performed:	11.c. Extent performed:	
06/01/2010	06/04/2010 Additional Name and address through whom performed, if any:	
11.d. Name and address through whom performed:		
Name Thomas Zigray	Name	
Organization Informed Choices Education, Inc.	Organization	
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any	
Street 6501 E. Greenway Parkway #103-114	Street	
City Scottsdale	City	
State ZIP Code + 4 85254	State ZIP Code + 4	
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:	
All employees of The Art Institutes	į	
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