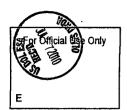
U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-20 **AGREEMENT AND ACTIVITIES REPORT**

Form approved Office of Management and Budget No. 1215-0188 Expires 09-30-2011



1. File Number:

**Person Filing** 

c.670

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.

2. Name and mailing address (include ZIP Code):	3. Any other address where records necessary to verify this report are kept.	
Name Patrick O'Mara	Name Patrick O'Mara	
Title President	Title President	
Organization O'Mara & Associates, LLC	Organization O'Mara & Associates, LLC	
P.O. Box, Bldg., Room No., if any P.O. Box 2624	P.O. Box, Bldg., Room No., if any A97	
Street	Street 130 Landing Court	
City Novato	City Novato	
State California ZIP Code + 4 94948	State California ZIP Code + 4 94945	
Date fiscal year ends:     5. Type of person:		
Jan / 8 a. Individual b. P	artnership c. Corporation d. Other (Specify): LLC	
Nature of Agreement or Arrangement		
6. Full name and address of employer with whom made (include ZIP C	Code): 7. Date entered into: 9/12/07	
Name		
Organization Mears Transportation	8. Name of person(s) through whom made:	
Trade Name, if any	Name Chuck Carns	
P.O. Box, Bldg., Room No., if any	Name	
Street 324 West Gore Street	Name	
City Orlando	Name	
State Florida ZIP Code + 4 32086	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.)		
13. Signed President (If other ti	itle, see (If other title, see	
Title President instruction	ns)  Title Treasurer instructions)	
On 6/30/10 107 903 45 75 Telephone Number	On Date Telephone Number	
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Filer. Patrick O'Mara O'Mara & Associates, LLC	File Number C-		
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.):			
Verbal agreement to provide consultation and to give speeches to employees about exercising their right to organize and bargain collectively. Terms are 187.50 per hour plus expenses			
Consider Addition to the Parkey and			
Specific Activities to be Performed  11. For each activity, separately list in detail the information required (See instructions):			
a. Nature of activity:			
To provide consultation and to give speeches to employees regarding their rights to organize and bargain collectively			
11.b. Period during which performed:	11.c. Extent performed:		
8/13 thru 8/15/08	Fully performed		
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:		
Name	Name		
Organization LRI Consulting Services, Inc.	Organization		

P.O. Box, Bldg., Room No., if any

Street 7850 S. Elm Place

Street

P.O. Box, Bldg., Room No., if any

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