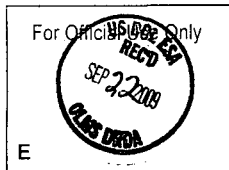


# FORM LM-20

## AGREEMENT AND ACTIVITIES REPORT

Form approved  
Office of Management  
and Budget  
No. 1215-0188  
Expires 12-31-2010



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)

464160  
READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number: C- 00568

### Person Filing

2. Name and mailing address (include ZIP Code):

Name Raymond Rosenbach

Title Treasurer

Organization Govt. Resources Consultants of America

P.O. Box, Bldg., Room No., if any 106

Street 253 Commerce Dr

City Grayslake

State Illinois

ZIP Code + 4 60030

3. Any other address where records necessary to verify this report are kept:

Name

Title

Organization

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

Street

City

State

ZIP Code + 4

4. Date fiscal year ends:

Dec / 9

5. Type of person:

a. ☐ Individual b. ☐ Partnership c. ☐ Corporation d. ☐ Other (Specify):

### Nature of Agreement or Arrangement

6. Full name and address of employer with whom made (include ZIP Code):

Name David Hurd

Organization Classic Conveyor Systems

Trade Name, if any

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

Street 120 Airport Rd

City Blairsville

State Pennsylvania

ZIP Code + 4 15717

7. Date entered into:

9 / 5 / 2009

8. Name of person(s) through whom made:

Name

Name

Name

Name

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 title, see instructions)

Title President

14. Signed

Treasurer  
(If other title, see instructions)

Title Treasurer

On 09/09/2009

Date

847-337-3480

Telephone Number

On 09/09/2009

Date

847-337-3480

Telephone Number

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.):

To provide professional consulting as described in section 11.

**Specific Activities to be Performed**

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

a. Nature of activity:

Conduct Employee and supervisory group meetings to inform & educate participants about their rights, duties and responsibilities as they pertain to th National Labor Relations Board procedures and Nationsl Labor relations Act, and collective barganing procedures on Fair Labor practices and union rules and finances

11.b. Period during which performed:

September 15 to November 01, 2009

11.c. Extent performed:

on going

11.d. Name and address through whom performed:

Name Noble Miller  
 Organization Government Resources Consultants of Amer.  
 P.O. Box, Bldg., Room No., if any 106  
 Street 253 Commerce Dr  
 City grayslake  
 State Illinois ZIP Code + 4 60030

Additional Name and address through whom performed, if any:

Name  
 Organization  
 P.O. Box, Bldg., Room No., if any  
 Street  
 City  
 State ZIP Code + 4

12.a. Identify subject groups of employees:

Unit Production & Maintenance Employees

12.b. Identify subject labor organizations:

United Mine Workers Region 1