

FORM LM-20 AGREEMENT AND ACTIVITIES REPORT

Form approved
Office of Management
and Budget
No. 1215-0188
Expires 11-30-2006



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: C- 00322 Person Filina 2. Name and mailing address (include ZIP Code): 3. Any other address where records necessary to verify this report are kept: Name Name Peter A List Title Founder & CEO Title Organization Kulture Consulting, LLC Organization P.O. Box, Bldg., Room No., if any P.O. Box, Bldg., Room No., if any Street 759 Bloomfield Avenue, No. 301 Street City City West Caldwell State New Jersey ZIP Code + 4 07006 ZIP Code + 4 State 5. Type of person: 4. Date fiscal year ends: Partnership c. Corporation d. Other (Specify): LLC Individual b. Nature of Agreement or Arrangement 6. Full name and address of employer with whom made (include ZIP Code): 7. Date entered into: / 26 2009 8. Name of person(s) through whom made: Organization Shop Rite Name Paul Tornaquindici Trade Name, if any Name P.O. Box, Bldg., Room No., if any Name Street 1200 Farmington Avenue City Bristol Name ZIP Code + 4 06010 State Connecticut Name Signatures Each of the undersigned deplares, 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.) Section VII on penalties in the instructions.) 13. Signed 14. Signed President Treasurer (If other title, see (If other title, see instructions) instructions) Other (Specify) Other (Specify) Title Founder & CEO Secretary & Treasurer 9/15/2009 973-403-9901 9/15/2008 973-403-9901

Fifer: Peter List Kulture Consulting, LLC	File Number C- 00322
O Charlette annualiste have to indicate what have a chiral of the pativities undertaken in directly as indicate.	
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.):	
Company was employed on a per hour basis with no formal written agreement relative to duration or amount of hours to be performed. Fee schedule based on a per hour rate.	
Specific Activities to be Performed	
11. For each activity, separately list in detail the information required (See instructions):	
a. Nature of activity:	
Met with employees to discuss the UFCW's boycott of Shop Rite stores, as well as union organizing tactics.	
11.b. Period during which performed:	11.c. Extent performed:
8/09 - 9/09	8/09
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:
Name Juan Negroni	Name

Organization

Organization Kulture Consulting, LLC