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

FORM LM-20 AGREEMENT AND ACTIVITIES REPORT

Amended Report

Form approved
Office of Management
and Budget
No. 1245-0003
Expires 08-31-2016



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- 66578 **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 Title Title Organization Sparta, Inc Organization P.O. Box, Bldg., Room No., if any P.O. Box, Bldg., Room No., if any Street 8086 South Yale Ave suite 225 Street City Tulsa City ZIP Code + 4 74136 State Oklahoma State ZIP Code + 4 4. Date fiscal year ends: 5. Type of person: 31 Dec Individual b. Partnership Corporation d. Cther (Specify): **Nature of Agreement or Arrangement** 6. Full name and address of employer with whom made (include ZIP Code): 7. Date entered into: Name 8. Name of person(s) through whom made: Organization Name Trade Name, if any Name P.O. Box, Bldg., Room No., if any Street Name City Name ZIP Code + 4 State 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 Treasurer (If other title, see (If other title, see instructions) instructions) President Treasurer 11/07/2018 800-555-7509 11/07/2018 800-555-7509 On

Date

Telephone Number

Telephone Number

Date

Filer: Sparta, Inc	File Number C- 66578
.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.	
40. Torms and conditions /Evaluin in detail, one instructions. Welter agreements must be attached by	
10. Terms and conditions (Explain in detail; see instructions. Written agreements must be attached.): The prior original and revised reports (1-revised) & (2-revised) were incorrect reports. The revised	
reports are dated September 22, 2016 and January 24, 2017. No such work was done involving Kullman Law and Sparta Inc.	
Specific Activities to be Performed	
11. For each activity, separately list in detail the information required (See instructions):	
a. Nature of activity:	
No employee contact was made by either party of Sparta, Inc or Kullman Law . Kullman Law was not involved in any such activity.	
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11.b. Period during which performed:	11.c. Extent performed:
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:
Name	Name
Organization	Organization
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any
Street .	Street
City	City
State ZIP Code + 4	State ZIP Code + 4
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:
	Tails isominy subject tabor organizations.