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 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)

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

277535	READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.	
1. File Number: c. 00568		
Person Filing		
2. Name and mailing address (include ZIP Code):	3. Any other address where records necessary to verify this report are kept:	
Name Raymond Rosenbach	Name	
Title Treasurer	Title	
Organization Govt Resources Consultants of America	Organization	
P.O. Box, Bldg., Room No., if any 106	P.O. Box, Bldg., Room No., if any	
Street 253 Commerce Drive	Street	
City Grayslake	City Carlot Carl	
State Illinois ZIP Code + 4 60030	State ZIP Code + 4	
Date fiscal year ends: 5. Type of person:		
Dec / 14 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):	7. Date entered into: 8 / 4 / 2014	
Name John Wheeler	8. Name of person(s) through whom made:	
Organization Case Western Reserve University		
Trade Name, if any		
P.O. Box, Bldg., Room No., if any	Name	
Street 10900 Euclid Avenue	Name	
City Cleveland	Name	
State Ohio ZIP Code + 4 44106	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 Million penalties in the instructions.)		
13. Signed President (If other title, see instructions)	Treasurer (If other title, see instructions)	
Title	Title Title	
On 847-337-3480	On 847-337-3480	
Date Telephone Number	Date Telephone Number	

1.08 (3)

Filer: Raymond Rosenbach	Govt Resources Consultants of America	File Number C- 00568
Check the appropriate box to indi	icate whether an object of the activities undertaken, is directly or ind	lirectly:
a. To persuade employees collectively through repre	to exercise or not to exercise, or persuade employees as to the maresentatives of their own choosing.	nner of exercising, the right to organize and bargain
b. To supply an employer w such employer, except ir	ith information concerning the activities of employees or a labor org	anization in connection with a labor dispute involving itral proceeding or a criminal or civil judicial proceeding.

File Number C- 00568

10. Terms and conditions (Explain in detail; see instructions. Written agreements must be attached.):		
To provide professional consulting services 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 and educate participants about their rights, duties, and responsibilities as they pertain to the National Labor Relations Act and National Labor Relations Board procedures such as secret ballot elections, collective bargaining representation, collective bargaining procedures, unfair labor practices, and union rules and finances.

11.b. Period during which performed:	11.c. Extent performed:	
August 2014	On Going	
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:	
Name Timothy J Curtis	Name	
Organization Govt Resources Consultants of America	Organization	
P.O. Box, Bldg., Room No., if any 106	P.O. Box, Bldg., Room No., if any	
Street 253 Commerce Drive	Street	
City Grayslake	City	
State Illinois ZIP Code + 4 60030	State ZIP Code + 4	
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:	
Patrol Officers	ACOPS	