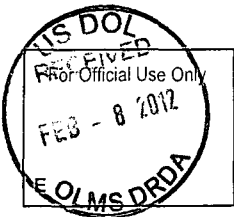


# FORM LM-20

## AGREEMENT AND ACTIVITIES REPORT

Form approved  
Office of Management  
and Budget  
No. 1245-0003  
Expires 10-31-2013



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.

473344

1. File Number: c- 637

Person Filing	
2. Name and mailing address (include ZIP Code):  Name Fred B Grubb  Title Partner  Organization Grubb Quist & Assoc. LLC  P.O. Box, Bldg., Room No., if any  Street 12 South Main Street  City Waterbury  State Vermont <input checked="" type="checkbox"/> ZIP Code + 4 05676	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 <input checked="" type="checkbox"/> ZIP Code + 4
4. Date fiscal year ends:  Dec <input checked="" type="checkbox"/> / 7	5. Type of person: a. <input type="checkbox"/> Individual b. <input type="checkbox"/> Partnership c. <input checked="" type="checkbox"/> Corporation d. <input type="checkbox"/> Other (Specify):

Nature of Agreement or Arrangement	
6. Full name and address of employer with whom made (include ZIP Code):  Name  Organization Wenner Bread  Trade Name, if any  P.O. Box, Bldg., Room No., if any  Street 33 Rajon Road  City Bayport  State New York <input checked="" type="checkbox"/> ZIP Code + 4	7. Date entered into: 7/16 / 2007  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 Fred B. Grubb President  
(If other title, see instructions)  
Title Managing Partner ☒

14. Signed \_\_\_\_\_ Treasurer  
(If other title, see instructions)  
Title d ☒

On 02/06/2012 802-279-8816  
Date Telephone Number

On \_\_\_\_\_  
Date 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.):

Verbal agreement. Sub contractor to LRI.

#### Specific Activities to be Performed

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

a. Nature of activity:

Employee meetings.

11.b. Period during which performed:

2007

11.c. Extent performed:

11.d. Name and address through whom performed:

Name

Organization

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

Street

City

State

ZIP Code + 4

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:

Voting unit employees.

12.b. Identify subject labor organizations: