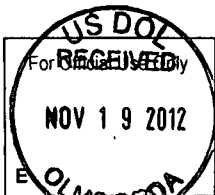


FORM LM-20 AGREEMENT AND ACTIVITIES REPORT



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-

733

507383

Person Filing

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

Name ~~Ernie~~ Ernesto Zuniga

Title

Organization

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

Street 422 East Florence Avenue

City West Covina

State California

ZIP Code + 4 91790

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 / 31

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 Luis A Pinedo

Organization Midwest Gaming and Entertainment, LLC

Trade Name, if any

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

Street 3000 S. River Road

City Des Plaines

State Illinois

ZIP Code + 4 60018

7. Date entered into:

10 / 10 / 2012

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

Name Luis A Pinedo

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

11/12/12
Date

(562) 299-3085
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.):

To educate employees of their rights under the National Labor Relations Act and to truthfully inform employees of the possible down-sides to unionization.

Specific Activities to be Performed

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

a. Nature of activity:

Ernie Zuniga made himself available to employees in Valet Services to answer questions about unionization and collective bargaining.

11.b. Period during which performed:

10/10/12 through 10/26/12

11.c. Extent performed:

11.d. Name and address through whom performed:

Name ~~Ernie~~ **Ernesto** Zuniga

Organization

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

Street 422 East Florence Avenue

City West Covina

State California

ZIP Code + 4 91790

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:

Valet Parkers

12.b. Identify subject labor organizations:

Teamsters, Local 727