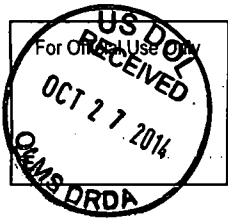


# FORM LM-20 AGREEMENT AND ACTIVITIES REPORT



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.

572920

1. File Number: C- 00483

### Person Filing

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

Name     
Title   
Organization   
P.O. Box, Bldg., Room No., if any   
Street   
City   
State  ZIP Code + 4

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:

/

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     
Organization   
Trade Name, if any   
P.O. Box, Bldg., Room No., if any   
Street   
City   
State  ZIP Code + 4

7. Date entered into:

/  /

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 *Supery* President  
(If other title, see instructions)  
Title

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

On    
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.):

hourly rate plus expenses

**Specific Activities to be Performed**

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

a. Nature of activity:

Meet with employees and inform them of there section 7 rights and answer questions using NLRB documents for questions and answers.

11.b. Period during which performed:

10/06/2014

11.c. Extent performed:

Ongoing

11.d. Name and address through whom performed:

Name Edward  Echanique

Organization

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

Street 155 Bay Laurel Dr.

City Mooresville

State North Carolina  ZIP Code + 4 28115

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:

Drivers

12.b. Identify subject labor organizations:

Teamsters