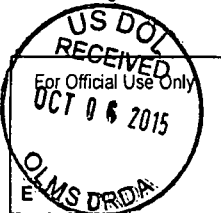


FORM LM-20 AGREEMENT AND ACTIVITIES REPORT

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)

599842

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number: C- 05894

Person Filing William Herrera	
2. Name and mailing address (include ZIP Code):	
Name	William Herrera
Title	
Organization	WPSC GROUP
P.O. Box, Bldg., Room No., if any	
Street	9427 Reston Grove Ln
City	Houston
State	TX
ZIP Code + 4	77095
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:
12 / 31	a. <input checked="" type="checkbox"/> Individual b. <input type="checkbox"/> Partnership c. <input type="checkbox"/> Corporation d. <input type="checkbox"/> Other (Specify):

Nature of Agreement or Arrangement	
6. Full name and address of employee with whom made (include ZIP Code):	
Name	Katch Kan
Organization	
Trade Name, if any	
P.O. Box, Bldg., Room No., if any	
Street	
City	Von Ormy
State	TX
ZIP Code + 4	78073
7. Date entered into: 8 / 7 / 2014	
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 [Signature] President
(If other title, see instructions)
Title President

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

On 9/15/2014 281-550-8563
Date Telephone Number

On _____
Date Telephone Number

Filer: William Herrera

File Number C-

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.):

None

Specific Activities to be Performed

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

a. Nature of activity:

Training & Persuading

11.b. Period during which performed:

8/7 to 8/31 2014

11.c. Extent performed:

11.d. Name and address through whom performed:

Name William Herrera

Organization

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

Street 9427 Reston Grove Ln

City Houston

State TX ZIP Code + 4 77095

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:

Technicians

12.b. Identify subject labor organizations: