## Steridards Washington, DC 20210

## **AGREEMENT AND ACTIVITIES REPORT**

and Budget No. 1245-0003 Expires 08-31-2016

3. Any other address where records necessary to verify this report are kept:



Simon

1. File Number:

**Person Filing** 

Name

Title

C- 776

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

Jara

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil panalties 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.

Name

Title

573603

Organization Pinnacle Labor Solutio	ns		Organization			
P.O. Box, Bldg., Room No., if any P.O. Box	x 710	158	P.O. Box, Bl	dg., Room No., if any		
Street			Street			
city SANYEE			City			
State California ZIP 0	Code + 4	92071	State		ZIP Code + 4	
4. Date fiscal year ends: 5. Type	of person:					
Dec / 31 a.	Individual	b. Partnership	c. Corpor	ation d. Other (Specify	):	
Nature of Agreement or Arrangement	<u> </u>					
6. Full name and address of employer with whom	n made (inclu	ude ZIP Code):	7. Date ente			
Name				10 /	5 / 2010	)
Organization Heritage Security Systems		8. Name of person(s) through whom made:				
		Name Larry Richman				
Trade Name, if any		Name				
P.O. Box, Bldg., Room No., if any						
Street 1260 Morena Boulevard, Sui	te 200		Name			
City San Diego			Name			
State California ZIP	Code + 4	92110	Name			
		Signa	tures			
Each of the undersigned declares, under penalt the information contained in any accompanying true, correct, and complete. (See Section VII on	documents)	has been examined	penalties of la by the signate	w, that all of the information ory and is, to the best of the	submitted in this re undersigned's know	port (including ledge and belief,
13. Signed		President	14. Signed			Treasurer
		(If other title, see instructions)				(If other title, see instructions)
Title President			Title	Treasurer		
On 16/26/19 6/9.	221 one Number	549.684	<b>(</b>	 Date	Telephone Number	

- g'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.):
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## Specific Activities to be Performed

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

Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.

11.b. Period during which performed: various days beginning 10/20/10	11.c. Extent performed: Fully Performed		
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:		
Name Simon Jara	Name		
Organization Pinnacle Labor Solutions	Organization		
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any		
Street	Street		
City	City		
State California ZIP Code + 4	State ZIP Code + 4		
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:		
Security Officers at Transit Areas	United Transportation		