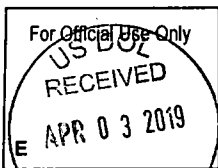


FORM LM-20

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.

701429

1. File Number: C- 00572

Person Filing

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

Name Sanderson B Adams

Title President

Organization Tactical Advisory Group

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

Street 28 W. Orchard Road

City Fort Mitchell

State Kentucky

ZIP Code + 4 41011

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 / 18

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 Ruth Wilson

Organization RadNet Inc.

Trade Name, if any Same

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

Street 1510 Cotner Avenue

City Los Angeles

State California

ZIP Code + 4 90025

7. Date entered into:

7 / 17 / 2018

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

Name Ruth Wilson VPHR

Name Norman Hames VP

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

Sanderson B. Adams

President
(If other title, see
instructions)

Title President

14. Signed

Susan R. Crain

Treasurer
(If other title, see
instructions)

Title Treasurer

On

3/31/2019

Date

(859) 630-7392

Telephone Number

On

3-27-19

Date

(513) 777-6204

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.):

No written agreement. Employer has worked with consultant previously and recently. Terms and conditions the same as previous engagements. The engagement is still continuing into 2019. Purpose of the engagement is to educate employees about their collective bargaining and representation right under the NLRB.

Specific Activities to be Performed

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

a. Nature of activity:

Planning or conducting individual employee meetings. Speaking with or otherwise communicating directly with employees.

11.b. Period during which performed:

7/17/18 through 12/31/18

11.c. Extent performed:

Engagement is continuing

11.d. Name and address through whom performed:

Name Carina M Hunt

Organization C.Hunt Management Consulting, Inc.

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

Street 909 Champions Court

City Roanoke

State Texas

ZIP Code + 4 76262

Additional Name and address through whom performed, if any:

Name Labor Sin Barreras

Organization C. Hunt Management Consulting, Inc.

P.O. Box, Bldg., Room No., if any P. O. Box 20441

Street

City Tampa

State Florida

ZIP Code + 4 33622

12.a. Identify subject groups of employees:

Technical employees and registered nurses

12.b. Identify subject labor organizations:

NUHW - National Union of Healthcare Workers