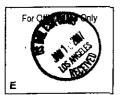
U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-21 RECEIPTS AND DISBURSEMENTS REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

Month/Day/Year

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 Relations and Disclosure Act of 1959, as amended. (LMRDA)



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

Month/Day/Year (mm/dd/yyyy)

Any other address where records ne	Through:	this report are kept:
Name	ecessary to verify	this report are kept:
Name	ecessary to verify	this report are kept:
Name	ecessary to verify	this report are kept:
	he and	7 - C - C - C - C - C - C - C - C - C -
1 IDS	er und i det se denn is broken. Den betrekken er en er e Egin oppgegegegen geste betrekken an an en elde i Miller blev diet de	MINISTER STATE STATE AND AND AND ADDRESS OF THE
Organization		
P.O. Box, Building and Room Numb	er, if any	· · · · · · · · · · · · · · · · · · ·
Street		
City		
State	ZIP Cod	e+4
res		,,,,,
flaw, that all of the information submitte natory and is, to the best of the under	ed in this report (inc rsigned's knowledg	luding the ge and belief, true,
Section of the sectio	wanton and sale to him opening	_ Treasurer (If other title, see instructions)
On Date Tele	aphone Number	
ig	P.O. Box, Building and Room Numb Street City State of law, that all of the information submitte ignatory and is, to the best of the under Title Treasurer On	Title Organization P.O. Box, Building and Room Number, if any Street City State ZIP Cod Ures of law, that all of the information submitted in this report (incignatory and is, to the best of the undersigned's knowledged) 18. Signed Title Treasurer On

	نسما:	
_	HE:	

MGS mant consulting Inc

File Number C-

- 9. Check the appropriate box to indicate whether an object of the activities undertaken, is directly or ind rectly:
 - 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. X 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.):

Provide on Site Consulting Services - Consultant must be 6i lingual -

Specific Activities to be Performed

- 11. For each activity, separately list in detail the information required (See instructions):
 - a. Nature of activity: Explained in employees language-Spainish the advantages disadvantages of voting for or or or against the unions in the election

11.b. Period during which performed:		11.c. Extent performed:	11.c. Extent performed:	
12.05- 1-06		completed		
11.d. Name and address through whom performed:		Additional Name and address through whom performed, if any:		
Name		Name		
Organization		Organization		
P.O. Box, Bldg., Room N	o., if any	P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any	
Street		Street		
City		City		
State	ZIP Code + 4	State	ZIP Code + 4	
12.a. Identify subject groups of employees:		12.b. Identify subject labor organization	12.b. Identify subject labor organizations:	
Employe	other than cherical spervice upon cherical	CAbover's Lut	1 union	
and si	upervisors emplo	ed nova by Car	Lugare.	
by wa	que Jiminez Conci	ek Operating Enq	inter >	
1	ı			
		}		