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

FORM LM-20 **AGREEMENT AND ACTIVITIES REPORT**

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



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 Fielations Consultants and Other Individuals

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.	RECTO	gement Reporting and Disclosure Act of 1959, as amended. (LMRDA)	
Parson Filling 2. Name and mailing address (include ZIP Code): 3. Any other address where records necessary to verify this report are kept.	READ THE INSTRUCTIONS CAREFUL	LLY BEFORE PREPARING THIS REPORT.	
Person Filing 2. Name and mailing address (include ZIP Code): 3. Any other address where records necessary to verify this report are kept.			
2. Name and mailing address (include ZIP Code): Name RICARDO PASALAGUA Title PRESIDENT Organization RP & ASSOCIATES P.O. Box, Bidg., Room No., if any Street 6 SEASIDE CIRCLE City Newport BEACH State Callifornia ZIP Code + 4 92663 State Abstract of Agreement or Arrangement 6. Full name and address of employer with whom made (include ZIP Code): Name MAURICE Organization A.M. ORTEGA Trade Name, if any GENERAL ENGINEERING CONTRACTOR, INC. P.O. Box, Bidg., Room No., if any Street 10125 CHANNEL ROAD City LAKESIDE Each of the undersigned declares, under penalty of perjury and other spplicable 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 Knowledge and belief, true, correct, and complete (See Section Vitar penalties in the instructions) Tresident Title President Title Title Title Title Title 13. Signed Tresident Title			
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4. Date fiscal year ends: Dec	City NEWPORT BEACH	City	
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08/31/2007

Date

714-240-2919

Telephone Number

08/31/2007

Date

714-240-2919

Telephone Number

Filer: RICARDO PASALAGUA RP & ASSOCIATES	File Number C-			
Check the appropriate box to indicate whether an object of the activities under	aken, is directly or indirectly:			
a. To persuade employees to exercise or not to exercise, or persuade emcollectively through representatives of their own choosing.	ployees as to the manner of exercising, the right to organize and bargain			
b. To supply an employer with information concerning the activities of em such employer, except information for use solely in conjunction with an	ployees or a labor organization in connection with a labor dispute involving n 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):			
All services described in Section 11a., below shall be performed on an hourly fee basis at a rate of \$250.00 per hour. Expenses incurred in connection with the performance of such services as travel, accommodations, copies, telephone long distance, etc., will be rembursed to RP & Associates, LLC, at actual cost.				
Specific Activities to be Performed				
a. Nature of activity: RP & Associates, LLC, has been retained to assist the employer named above in communication with its employees with regard to the manner in which they excercise their rights to organize and bargain collectively. We will assist in conducting meetings with employees and in communications in writing during the period immediately prior to the conduct of representation election.				
11.b. Period during which performed:	11.c. Extent performed: None as of this date.			
Pendency of N.L.R.B. 11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:			
Name RICARDO PASALAGUA	Name RUTH JENKINS			
Organization RP & ASSOCIATES	Organization RP & ASSOCIATES			
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any			
Street 6 SEASIDE CIRCLE	Street 6 SEASIDE CIRCLE			
City NEWPORT BEACH	City NEWPORT BEACH			
State California ZIP Code + 4 92663	State California ZIP Code + 4 92663			
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:			
ALL FULL-TIME AND REGULAR PART-TIME EMPLOYEES.	LABORERS UNION			

Filer: RICARDO PASALAGUA

RP & ASSOCIATES

File Number C-

Specific Activities to be Performed (Continuation Page)

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

RP & Associates, LLC, has been retained to assist the employer named above in communication with its employees with regard to the manner in which they excercise their rights to organize and bargain collectively. We will assist in conducting meetings with employees and in communications in writing during the period immediately prior to the conduct of representation election.

11.b. Period during which pe	erformed:	11.c. Extent performed		
Pendency of N.	L.R.B.	None as of t	this date.	
11.d. Name and address the	rough whom performed:	Additional Name and ad	dress through whom performed, if any:	
Name SHELBY	WORTHINGTON	Name	Name	
Organization RP & ASSO	CIATES	Organization		
P.O. Box, Bldg., Room No.,	if any	P.O. Box, Bldg., Room I	No., if any	
Street 6 SEASIDE CIRC	LE	Street		
City NEWPORT BEACH		City	City	
State California	ZIP Code + 4 92663	State	ZIP Code + 4	
Additional Name and addres	s through whom performed, if any:	Additional Name and a	Additional Name and address through whom performed, if any:	
Name		Name	Name	
Organization		Organization	Organization	
P.O. Box, Bldg., Room No., i	f any	P.O. Box, Bldg., Room I	P.O. Box, Bldg., Room No., if any	
Street		Street	Street	
City		City	City	
State	ZIP Code + 4	State	ZIP Code + 4	
12.a. Identify subject groups	of employees:	12.b. Identify subject la	12.b. Identify subject labor organizations:	
ALL FULL-TIME AND	REGULAR PART-TIME EMPLOYEES.	LABORERS UNION		