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. 1245-0003 Expires 03-31-2019



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.

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WS DRU				
1. File Number: C- 00483				
Person Filing				
2. Name and mailing address (include ZIP Code):	3. Any other address where records necessary to verify this report are kept:			
Name	Name NA			
Title	Title			
Organization Cruz & Associates	Organization			
P.O. Box, Bldg., Room No., if any 1831	O. Box, Bldg., Room No., if any			
Street	Street			
City Upland	City			
State California ▼ ZIP Code + 4 91785	State ZIP Code + 4			
Date fiscal year ends: 5. Type of person:				
Dec 31 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):	7. Date entered into: 5 / 1 / 2017			
Name Nicole Scano				
Organization Production Resourse Group	8. Name of person(s) through whom made:			
Trade Name, if any	Name NA			
P.O. Box, Bldg., Room No., if any	Name			
Street 1245 Aviation Pl	Name			
City San fernando	Name			
State California ZIP Code + 4 91340	Name			
Signatures				
Each of the undersigned declares, under penalty of perjury and other applicable the information contained in any accompanying documents) has been examine true, correct, and complete. (See Section VII on penalties in the instructions.)	d by the signatory and is, to the best of the undersigned's knowledge and belief,			
13. Signed President (If other title, see instructions)	14. Signed 6-21-17 Treasurer (If other title, see instructions)			
Title President	Title Other (Specify)			
On 6/22/2017 909-980-8736 Date Telephone Number	On			
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Filer: Cruz & Associates		File Number C- 00483		
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.):			
Hourly rate plus expenses				
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Specific Activities to be Performed	· · · · · · · · · · · · · · · · · · ·			
11. For each activity, separately list in detail the information required (See instruc	tions):			
a. Nature of activity: Held employee meetings to inform employees of their Section 7 rights and answer questions using the				
NLRB Documents		4.000-010		
		}		
11.b. Period during which performed:	11.c. Extent performed:			
Ongoing	NA			
11.d. Name and address through whom performed:	Additional Name and address	ss through whom performed, if any:		
Name Greg Passant	Name Greco	Romero		
Organization Cruz & Associates	Organization LKLS COns	ulting		
		·		
P.O. Box, Bldg., Room No., if any 1831	P.O. Box, Bldg., Room No.,	if any		
Street	Street 1975 Alderbro	oke Ave		
City Upland	City San Diego			
State California ZIP Code + 4 91785	State California	▼ ZIP Code + 4 91913		
12.a. Identify subject groups of employees:	12.b. Identify subject labor	organizations:		
Lighting techs	I. A. T. S. E			

<u>* · </u>				
Filer:		File Number C-		
9. Check the appropriate box to indicate whether an object of the activities undertaken, is directly or indirectly:				
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.				
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10. Terms and conditions (Explain in detail; see instructions. Written agreements	must be attached.):	·		
Specific Activities to be Performed				
11. For each activity, separately list in detail the information required (See instruct	ions):			
a. Nature of activity:	,			
11.b. Period during which performed:	11.c. Extent performed:	·····		
11.d. Name and address through whom performed:		ss through whom performed, if any:		
Name Ignacio Fresan	Name			
Organization LKLS COnsulting	Organization			
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No.,	if any		
Street 1975 Alderbrooke Ave	Street			
City Chula Vista	City			
State California ZIP Code + 4 91913	State	ZIP Code + 4		
12.a. Identify subject groups of employees:	12.b. Identify subject labor	organizations:		
	12.0. Identify subject labor	7,50		