

# Agreement and Activities Report

U.S. Department of Labor

Office of Labor-Management



This report is mandatory under P.L. 86-257 as amended. Failure to comply may result in criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 439, 440.

OMB No. 1214-0001  
12/31/86

Required of Persons, including Labor Relations Consultants and Other Individuals and Organizations, Under Sections 203(b) of Labor-Management Reporting and Disclosure Act of 1959, as amended (LMRDA).

File No.

C. 527

## A. Person Filing

1. Name and mailing address (include Zip Code):

Labor Relations Services, Inc.  
24 Corporate Plaza, Suite #100  
Newport Beach, CA 92660

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

NONE

3. Date fiscal year ends:

12/31/03

4. Type of Person:

a. ☐ Individual b. ☐ Partnership c. ☒ Corporation d. ☐ Other (Specify):

## B. Nature of Agreement or Arrangement

5. Full name and address of employer with whom made (include Zip code):

PACIFIC SNAPPLE DISTRIBUTORS  
15201 WOODLAWN  
TUSTIN, CA 92780

6. Date entered into:

05/05/03

7. Name of persons through whom made:

MR. MITCH BRANTLEY  
PRESIDENT

8. 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.

9. Terms and conditions (Explain in detail; see Part B-9 of instructions):

All services described in Section C10 (a) below shall be performed on an hourly fee basis at a rate of \$225.00 per hour. Expenses incurred in connection with the performance of such services as travel, accommodations, copies, telephone long distance, etc., will be reimbursed to Labor Relations Services, Inc. at actual cost.

## C. Specific Activities to be Performed

10. For each activity, separately list in detail the information required (See Part C-10 of instructions):

a. Nature of activity: Labor Relations Services, Inc. has been retained to assist the employer named above in communication with its employees with regard to the manner in which they exercise their rights to organize and bargain collectively. We will assist in conducting meetings with employees and in communicating in writing during the period immediately prior to the conduct of representation election.

b. Period during which performed:

Pendency of NLRB

c. Extent performed:

None as of this date

d. Names and addresses of persons through whom performed:

DOUGLAS MUIR (SAME ADDRESS AS ITEM # 1 A)

11. Identify (a) Subject employees, groups of employees, and (b) labor organizations:

(a) All full-time and regular part-time employees.

(b) Western Conference of Teamsters



D. Verification and Signature. The person in item 1 above and each of his undersigned authorized officers declares, under penalty of law, that all information in this report, including all attachments incorporated therein or referred to in this report, has been examined by him and is, to the best of his knowledge and belief, true correct, and complete.

Signed:

*[Signature]*

President

Signed:

*[Signature]*

Treasurer

(If other title, cross out and write in correct title above)

(If other title, cross out and write in correct title above)

City State Date

City State Date

At: Newport Beach

CA

Date

At: Newport Beach

CA

05/07/03

# Agreement and Activities Report

## U.S. Department of Labor Office of Labor-Management



This report is mandatory under P.L. 86-257 as amended. Failure to comply may result in criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 439, 440.

OMB No. 1214-0001  
12/31/86

Required of Persons, including Labor Relations Consultants and Other Individuals and Organizations, Under Sections 203(b) of Labor-Management Reporting and Disclosure Act of 1959, as amended (LMRDA).

File No. c. 527

### A. Person Filling

1. Name and mailing address (include Zip Code):  Labor Relations Services, Inc. 24 Corporate Plaza, Suite #100 Newport Beach, CA 92660		2. Any other address where records necessary to verify this report are kept.  NONE	
3. Date fiscal year ends:  12/31/03	4. Type of Person: a. <input type="checkbox"/> Individual   b. <input type="checkbox"/> Partnership   c. <input checked="" type="checkbox"/> Corporation   d. <input type="checkbox"/> Other (Specify):		

### B. Nature of Agreement or Arrangement

5. Full name and address of employer with whom made (include Zip code):  OLTMANS CONSTRUCTION COMPANY 10005 MISSION MILL ROAD WHITTIER, CA 90608-0985		6. Date entered into: July 24, 2003
		7. Name of persons through whom made: MR. JOHN M. GORMLY SENIOR VICE PRESIDENT

8. 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.

9. Terms and conditions (Explain in detail; see Part B-9 of instructions):

All services described in Section C10 (a) below shall be performed on an hourly fee basis at a rate of \$275.00 per hour. Expenses incurred in connection with the performance of such services as travel, accommodations, copies, telephone long distance, etc., will be reimbursed to Labor Relations Services, Inc. at actual cost.

### C. Specific Activities to be Performed

10. For each activity, separately list in detail the information required (See Part C-10 of instructions):

a. Nature of activity: Labor Relations Services, Inc. has been retained to assist the employer named above in communication with its employees with regard to the manner in which they exercise their rights to organize and bargain collectively. We will assist in conducting meetings with employees and in communicating in writing during the period immediately prior to the conduct of representation election.

b. Period during which performed:  Pendency of NLRB	c. Extent performed:  None as of this date
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d. Names and addresses of persons through whom performed:  
MICHAEL PENN (SAME ADDRESS AS IN ITEM # 1A)  
RICARDO PASALAGUA (SAME ADDRESS AS IN ITEM # 1A)  
JOSE AGRAZ (SAME ADDRESS AS IN ITEM # 1A)



11. Identify (a) Subject employees, groups of employees, and (b) labor organizations:

- (a) All full-time and regular part-time employees.
- (b) SOUTHERN CALIFORNIA DISTRICT COUNCIL OF LABOURS, LIUNA, AFL-CIO

**D. Verification and Signature.** The person in item 1 above and each of his undersigned authorized officers declares, under penalty of law, that all information in this report, including all attachments incorporated therein or referred to in this report, has been examined by him and is, to the best of his knowledge and belief true correct, and complete.

Signed: President			Signed: Treasurer		
(If other title, cross out and write in correct title above)			(If other title, cross out and write in correct title above)		
City	State	Date	City	State	Date
At: Newport Beach	CA		At: Newport Beach	CA	JULY 29, 2003

# Agreement and Activities Report

U.S. Department of Labor

Office of Labor-Management



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OMB No. 1214-0001  
12/31/86

Required of Persons, including Labor Relations Consultants and Other Individuals and Organizations, Under Sections 203(b) of Labor-Management Reporting and Disclosure Act of 1959, as amended (LMRDA).

File No. C. 527

## A. Person Filing

1. Name and mailing address (include Zip Code):  Labor Relations Services, Inc. 24 Corporate Plaza, Suite #100 Newport Beach, CA 92660	2. Any other address where records necessary to verify this report are kept.  NONE
3. Date fiscal year ends:	4. Type of Person: a. <input type="checkbox"/> Individual b. <input type="checkbox"/> Partnership c. <input checked="" type="checkbox"/> Corporation d. <input type="checkbox"/> Other (Specify):

## B. Nature of Agreement of Arrangement

5. Full name and address of employer with whom made (include Zip code): CONOCOPHILLIPS ALASKA, INC. ATO 2002, 700 G STREET P. O. BOX 100360 ANCHORAGE, AK 99510-0360	6. Date entered into: August 21, 2003
	7. Name of persons through whom made: DANIEL G. RODGERS SENIOR COUNSEL

8. 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.

## 9. Terms and conditions (Explain in detail; see Part B-9 of instructions):

All services described in Section C10 (a) below shall be performed on an hourly fee basis at a rate of \$275.00 per hour. Expenses incurred in connection with the performance of such services as travel, accommodations, copies, telephone long distance, etc., will be reimbursed to Labor Relations Services, Inc. at actual cost.

## C. Specific Activities to be Performed

10. For each activity, separately list in detail the information required (See Part C-10 of instructions):

a. Nature of activity: Labor Relations Services, Inc. has been retained to assist the employer named above in communication with its employees with regard to the manner in which they exercise their rights to organize and bargain collectively. We will assist in conducting meetings with employees and in communicating in writing during the period immediately prior to the conduct of representation election.

b. Period during which performed:  Pendency of NLRB	c. Extent performed:  None as of this date
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d. Names and addresses of persons through whom performed:

JOHN M. HERMANN (SAME ADDRESS AS IN ITEM # 1 A)  
DOUGLAS MUIR (SAME ADDRESS AS IN ITEM # 1 A)



## 11. Identify (a) Subject employees, groups of employees, and (b) labor organizations:

(a) All full-time and regular part-time employees.

(b) PACE

**D. Verification and Signature.** The person in item 1 above and each of his undersigned authorized officers declares, under penalty of law, that all information in this report, including all attachments incorporated therein or referred to in this report, has been examined by him and is, to the best of his knowledge and belief, true correct, and complete.

Signed:  President	Signed:  Treasurer
(If other title, cross out and write in correct title above)	(If other title, cross out and write in correct title above)
City State Date At: Newport Beach CA	City State Date At: Newport Beach CA 8/21/03

# Agreement and Activities Report

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Office of Labor-Management



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12/31/86

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File No. C. 527

## A. Person Filling

1. Name and mailing address (include Zip Code):  Labor Relations Services, Inc. 24 Corporate Plaza, Suite #100 Newport Beach, CA 92660		2. Any other address where records necessary to verify this report are kept.  NONE	
3. Date fiscal year ends:  12/31/03	4. Type of Person: a. <input type="checkbox"/> Individual b. <input type="checkbox"/> Partnership c. <input checked="" type="checkbox"/> Corporation d. <input type="checkbox"/> Other (Specify):		

## B. Nature of Agreement or Arrangement

5. Full name and address of employer with whom made (include Zip code):  SUNVIEW VINEYARDS OF CALIFORNIA 1998 ROAD 152 DELANO, CA 93215		6. Date entered into: JUNE 5, 2003
		7. Name of persons through whom made: ANDREW ZANINOVICH VICE PRESIDENT

8. 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.

9. Terms and conditions (Explain in detail; see Part B-9 of instructions):

All services described in Section C10 (a) 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 reimbursed to Labor Relations Services, Inc. at actual cost.

## C. Specific Activities to be Performed

10. For each activity, separately list in detail the information required (See Part C-10 of instructions):

a. Nature of activity: Labor Relations Services, Inc. has been retained to assist the employer named above in communication with its employees with regard to the manner in which they exercise their rights to organize and bargain collectively. We will assist in conducting meetings with employees and in communicating in writing during the period immediately prior to the conduct of representation election.

b. Period during which performed:  Pendency of NLRB	c. Extent performed:  None as of this date
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d. Names and addresses of persons through whom performed:

JOHN HERMANN (SAME ADDRESS AS IN ITEM # 1A)	DELIA M. VITAL (SAME ADDRESS AS IN ITEM #1A)
ED VILLANUEVA (SAME ADDRESS AS IN ITEM #1A)	RICARDO GARCIA (SAME ADDRESS AS IN ITEM #1A)
MICHAEL PENN (SAME ADDRESS AS IN ITEM #1A)	RITA AGUILAR (SAME ADDRESS AS IN ITEM #1A)
JOSE AGRAZ (SAME ADDRESS AS IN ITEM #1A)	

11. Identify (a) Subject employees, groups of employees, and (b) labor organizations:

(a) All full-time and regular part-time employees.

(b) UFW



D. Verification and Signature. The person in item 1 above and each of his undersigned authorized officers declares, under penalty of law, that all information in this report, including all attachments incorporated therein or referred to in this report, has been examined by him and is, to the best of his knowledge and belief, true correct, and complete.

Signed: President		Signed: Treasurer	
(If other title, cross out and write in correct title above)		(If other title, cross out and write in correct title above)	
City At: Newport Beach	State CA	City At: Newport Beach	State CA
Date		Date	7/27/03

# Agreement and Activities Report

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File No. C. 527

## A. Person Filing

1. Name and mailing address (include Zip Code):  Labor Relations Services, Inc. 24 Corporate Plaza, Suite #100 Newport Beach, CA 92660	2. Any other address where records necessary to verify this report are kept.  NONE
3. Date fiscal year ends:  12/31/03	4. Type of Person: a. <input type="checkbox"/> Individual    b. <input type="checkbox"/> Partnership    c. <input checked="" type="checkbox"/> Corporation    d. <input type="checkbox"/> Other (Specify):

## B. Nature of Agreement or Arrangement

5. Full name and address of employer with whom made (include Zip code): PET FOOD EXPRESS 2131 WILLIAMS STREET SAN LEANDRO, CA 94577	6. Date entered into: MAY 16, 2003
	7. Name of persons through whom made: MR. JOHN MOORE GENERAL COUNSEL

8. 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.

## 9. Terms and conditions (Explain in detail; see Part B-9 of instructions):

All services described in Section C10 (a) below shall be performed on an hourly fee basis at a rate of \$245.00 per hour. Expenses incurred in connection with the performance of such services as travel, accommodations, copies, telephone long distance, etc., will be reimbursed to Labor Relations Services, Inc. at actual cost.

## C. Specific Activities to be Performed

10. For each activity, separately list in detail the information required (See Part C-10 of instructions):

a. Nature of activity: Labor Relations Services, Inc. has been retained to assist the employer named above in communication with its employees with regard to the manner in which they exercise their rights to organize and bargain collectively. We will assist in conducting meetings with employees and in communicating in writing during the period immediately prior to the conduct of representation election.

b. Period during which performed:  Pendency of NLRB	c. Extent performed:  None as of this date
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d. Names and addresses of persons through whom performed:  
ED VILLANUEVA (SAME ADDRESS AS IN ITEM #1 A)

## 11. Identify (a) Subject employees, groups of employees, and (b) labor organizations:

- (a) All full-time and regular part-time employees.
- (b) I.L.W.U. Local 6



**D. Verification and Signature.** The person in item 1 above and each of his undersigned authorized officers declares, under penalty of law, that all information in this report, including all attachments incorporated therein or referred to in this report, has been examined by him and is, to the best of his knowledge and belief, true, correct, and complete.

Signed: (If other title, cross out and write in correct title above) City: _____ State: _____ Date: _____ At: Newport Beach CA	Signed: (If other title, cross out and write in correct title above) City: _____ State: _____ Date: _____ At: Newport Beach CA July 15, 2003
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# Agreement and Activities Report

U.S. Department of Labor

Office of Labor-Management



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12/31/86

Required of Persons, including Labor Relations Consultants and Other Individuals and Organizations, Under Sections 203(b) of Labor-Management Reporting and Disclosure Act of 1959, as amended (LMRDA).

File No. C. 527

## A. Person Filling

1. Name and mailing address (include Zip Code):  Labor Relations Services, Inc. 24 Corporate Plaza, Suite #100 Newport Beach, CA 92660		2. Any other address where records necessary to verify this report are kept.  NONE	
3. Date fiscal year ends:  12/31/03	4. Type of Person: a. <input type="checkbox"/> Individual   b. <input type="checkbox"/> Partnership   c. <input checked="" type="checkbox"/> Corporation   d. <input type="checkbox"/> Other (Specify):		

## B. Nature of Agreement of Arrangement

5. Full name and address of employer with whom made (include Zip code): SYSTEMS SOURCE, INC. 2100 S.E. MAIN STREET, STE 100 IRVINE, CA 92614		6. Date entered into: JUNE 8, 2003
		7. Name of persons through whom made: ROSEMARIE SMITH PRESIDENT

8. 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.

9. Terms and conditions (Explain in detail; see Part B-9 of instructions):

All services described in Section C10 (a) 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 reimbursed to Labor Relations Services, Inc. at actual cost.

## C. Specific Activities to be Performed

10. For each activity, separately list in detail the information required (See Part C-10 of instructions):

a. Nature of activity: Labor Relations Services, Inc. has been retained to assist the employer named above in communication with its employees with regard to the manner in which they exercise their rights to organize and bargain collectively. We will assist in conducting meetings with employees and in communicating in writing during the period immediately prior to the conduct of representation election.

b. Period during which performed:  Pendency of NLRB	c. Extent performed:  None as of this date
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d. Names and addresses of persons through whom performed:

JOHN HERMANN (SAME ADDRESS AS IN ITEM # 1A)  
STEVE PUENTE (SAME ADDRESS AS IN ITEM # 1A)



11. Identify (a) Subject employees, groups of employees, and (b) labor organizations:

- (a) All full-time and regular part-time employees.
- (b) CABINET MAKERS, MILLMEN AND INDUSTRIAL CARPENTERS LOCAL 721

**D. Verification and Signature.** The person in item 1 above and each of his undersigned authorized officers declares, under penalty of law, that all information in this report, including all attachments incorporated therein or referred to in this report, has been examined by him and is, to the best of his knowledge and belief, true correct, and complete.

Signed: President			Signed: Treasurer		
(If other title, cross out and write in correct title above)			(If other title, cross out and write in correct title above)		
City	State	Date	City	State	Date
At: Newport Beach	CA		At: Newport Beach	CA	7/10/03