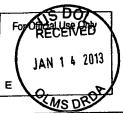
Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-20 AGREEMENT AND ACTIVITIES REPORT

Form approved Office of Managemen and Budget No. 1215-0188 Expires 09-30-2011



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)

JAN 1 4 2013	
READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.	
1. File Number: C-547	
I. Pile Nullibel.	
Person Filing	to well this populars kept
2. Name and mailing address (include ZIP Code):	3. Any other address where records necessary to verify this report are kept:
Name Employee Relations Services Int'l	Name
Title	Title
Organization	Organization
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any
Street	Street
P O Box 18122 City	City
Anaheim Hills, CA 92817-9998	State ZIP Code + 4
Date fiscal year ends: 5. Type of person:	
12 31 a. Individual b. Partnership	CXX Corporation d. Other (Specify):
Nature of Agreement or Arrangement	
Full name and address of employer with whom made (include ZIP Code):	7. Date entered into: 09 / 18 / 2012
Name Chris Dawes Organization	Name of person(s) through whom made:
RC Power, Inc. Trade Name if Prower Inc.	Name
P.O. Box, Bldg., Room No., if any	Name
Street 20 G Garate Garage #220	Name .
City Los Gatos, CA 95030	Name
State ZIP Code + 4	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 President 14. Signed Treasurer	
Title President (If other title, see instructions)	Title Treasurer (If other title, see instructions)
On 13 31 13 714 -998-7199 Telephone Number	On Date Telephone Number

Filef	File Number C-	
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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 **XXcollectively 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.):		
Held employee meetings to inform them on their section 7 rights and to answer questions pertaining to unions.		
Specific Activities to be Performed		
11. For each activity, separately list in detail the information required (See instructions): a. Nature of activity:		
Held meetings with employees, showed videos and informed them on union. Used union documentation for Q & A session.		
11.b. Period during which performed:	11.c. Extent performed:	
9/2012 - 10/2012		
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:	
Name	Name	
Bill Herrera Organization	Organization	
Emp Relations Services		
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any	
Street Same as page 1	Street	
City	City	
State ZIP Code + 4	State ZIP Code + 4	
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:	
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