

# FORM LM-20

## AGREEMENT AND ACTIVITIES REPORT

Form approved  
Office of Management  
and Budget  
No. 1215-0188  
Expires 11-30-2009



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.

472785

1. File Number: C- 00676

### Person Filing

2. Name and mailing address (include ZIP Code):

Name Carlos Ortiz  
Title President  
Organization Solutions Labor Relations Consultants  
P.O. Box, Bldg., Room No., if any  
Street 7426 Cherry ave, Suite # 210-106  
City Fontana  
State California ZIP Code + 4 92336

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

Name  
Title  
Organization  
P.O. Box, Bldg., Room No., if any  
Street  
City  
State ZIP Code + 4

4. Date fiscal year ends:

Dec / 31

5. Type of person:

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):

Name Doug Maloney  
Organization TruBlu Logistics  
Trade Name, if any Fresenius Medical Care North America  
P.O. Box, Bldg., Room No., if any  
Street 920 Winter Street  
City Waltham  
State Massachusetts ZIP Code + 4 02451

7. Date entered into:

1 / 3 / 2012

8. Name of person(s) through whom made:

Name  
Name  
Name  
Name  
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  
(If other title, see  
instructions)

Title President

14. Signed

Treasurer  
(If other title, see  
instructions)

Title Treasurer

On 1/30/2012

Date

909-910-5575

Telephone Number

On

Date

Telephone Number

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.):

Paid hourly, expenses reimbursed.

#### Specific Activities to be Performed

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

a. Nature of activity:

To communicate with employees regarding their right to exercise or not exercise their right to support or not to support a labor organization.

11.b. Period during which performed:

On going

11.c. Extent performed:

Held meetings with employees

11.d. Name and address through whom performed:

Name Carlos Ortiz  
Organization Solutions Labor Relations Consultants  
P.O. Box, Bldg., Room No., if any  
Street 7426 Cherry ave, Suite # 210-106  
City Fontana  
State California ZIP Code + 4 92336

Additional Name and address through whom performed, if any:

Name Laura Garcia  
Organization  
P.O. Box, Bldg., Room No., if any  
Street 1626 E Main St  
City Grand Prairie  
State Texas ZIP Code + 4 75052

12.a. Identify subject groups of employees:

All DC employees at 18925 Navajo Road Apple Valley CA 92307

12.b. Identify subject labor organizations: