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 08-31-2016



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)

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READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

WE DROP				
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			
Title	Title			
Organization Cruz & Associates	Organization			
P.O. Box, Bldg., Room No., if any 1831	P.O. Box, Bldg., Room No., if any			
Street	Street			
City Upland	City			
State California ZIP Code + 4 91785	State ZIP Code + 4			
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: 12 / 15 / 2014			
Name Randy Welch				
Organization Conway Kernersville	8. Name of person(s) through whom made:			
Trade Name, if any	Name			
P.O. Box, Bldg., Room No., if any	Name			
Street 438 West Bodenhamer St.	Name			
City Kernersville	Name			
State North Carolina. ZIP Code + 4 27284	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)	14. Signed Treasurer (If other title, see instructions)			
Title Other (Specify) CEO	Title Treasurer			
On 1/27/2015 909-980-8736	On			
Date Telephone Number	Date Telephone Number			

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			
noully late plus expenses			
0			
Specific Activities to be Performed			
11. For each activity, separately list in detail the information required (See instruct a. Nature of activity:	ions):		
Held employee meetings to inform employees of the section 7 rights and answer questions using NLRB Documents.			
11.b. Period during which performed:	11.c. Extent performed:		
ongoing			
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:		
Name Daniel Block	Name Bill Michaelis		
Organization	Organization		
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any		
Street 14314 Elinor Ct.	Street 6930 Parsons Trail		
City cypress	City Tujunga		
State Texas ZIP Code + 4 77429	State California ZIP Code + 4 91042		
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:		
Drivers and dock workers	Teamsters		

Filer:		File Number C-		
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.):				
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Specific Activities to be Performed  11. For each activity, separately list in detail the information required (See instruction)	one).			
<ul><li>11. For each activity, separately list in detail the information required (See instructions):</li><li>a. Nature of activity:</li></ul>				
11.b. Period during which performed:	11.c. Extent performed:			
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:			
Name Javier Weitzman	Name			
Organization Cruz & Associates	Organization			
P.O. Box, Bldg., Room No., if any 1831	P.O. Box, Bldg., Room No., if any			
Street	Street			
City upland	City			
State California ZIP Code + 4 91785	State	ZIP Code + 4		
12.a. Identify subject groups of employees:	12.b. Identify subject labor	organizations:		
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