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



C- 00681

1. File Number:

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.

593210

Person Filing	
Name and mailing address (include ZIP Code):	3 Any other address where records accessed to the state of the state o
No.	Any other address where records necessary to verify this report are kept:
Name Juan Cruz	Name Alex Casillas
Title C.E.O	Title CEO
Organization Reconnect Labor Relations Consultants	Organization Action ResourcesLaborRelationsSpecialist
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any
Street 29450 Highland blvd	Street 1588 S. Mission Road, Suite #205
City Moreno Valley	City Fallbrook
State California ZIP Code + 4 92555	State California ZIP Code + 4 92028
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:
Name Luke Simendinger	4 / 30 / 2015
Organization HUB Group Trucking	8. Name of person(s) through whom made:
Trade Name, if any HUB GROUP Ontario California	Name
P.O. Box, Bldg., Room No., if any	Name
Street 3801 E. Guasti Road	Name
City Ontario	Name -
State California ZIP Code + 4 91761	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	14. Signed Treasurer
Title Other (Specify) instructions)	Title Other (Specify) (If other title, see instructions)
CEO	none
On 5/22/2015 951-413-4402	On
Date Telephone Number	Date Telephone Number

Filer: Juan Cruz Reconnect Labor Relations Consulta	nts File Number C- 00681
Check the appropriate box to indicate whether an object of the activities under	
5. Check the appropriate box to indicate whether an object of the activities under	naken, is directly or indirectly:
To persuade employees to exercise or not to exercise, or persuade e collectively through representatives of their own choosing.	mployees as to the manner of exercising, the right to organize and bargain
b. To supply an employer with information concerning the activities of er such employer, except information for use solely in conjunction with a	nployees or a labor organization in connection with a labor dispute involving an administrative or arbitral proceeding or a criminal or civil judicial proceed
10. Terms and conditions (Explain in detail; see instructions. Written agreements	s must be attached):
No written agreement.	- Made 50 Gladinal.
Specific Activities to be Performed	
11. For each activity, separately list in detail the information required (See instruc	tions):
	uons).
a. Nature of activity:	
To Persuade employees to excersise their right to National Labor Relations Act.	choose a union or not under section 7 of the
National Labor Relations Act.	
11.b. Period during which performed:	11.c. Extent performed:
4/29/2015	5/22/2015
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:
Name Alex Casillas	Name
Organization Action Resources Labor Relations Speciali	Organization
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any
Street 1588 S. Mission Road	Street
City Fallbrook	
·	City
State California ZIP Code + 4 92028	State ZIP Code + 4
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:
All employees: full time and part time.	Internation Brotherhood of Teamsters Local 166 Bloomington, California.