U.S. Department of Labor Office of Labor-Management SternardsO/ Washington Devel 10

FORM LM-20 AGREEMENT AND ACTIVITIES REPORT

Form approved Office of Management and Budget No. 1245-0003 Expires 08-31-2016

For Official Use Only

his report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil benalties 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.

1. File Number: C- 459		
Person Filing		
2. Name and mailing address (include ZIP Code):	3. Any other address where records necessary to verify this report are kept:	
Name Bryan Little	Name	
Title Chief Operating Officer	Title	
Organization Farm Employers Labor Service	Organization	
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any	
Street 2300 River Plaza Drive	Street	
City Sacramento	City	
State California ▼ ZIP Code + 4 95833	State ZIP Code + 4	
4. Date fiscal year ends: 5. Type of person:		
Dec 31 a Individual b Partnership	c. Corporation d. Other (Specify):	
<u> </u>		
Nature of Agreement or Arrangement		
6. Full name and address of employer with whom made (include ZIP Code):	7. Date entered into:	
Name Jeff Marchini	8 / 25 / 2015	
Organization Marchini Farms	8. Name of person(s) through whom made:	
Trade Name, if any	Name Jeff Marchini	
P.O. Box, Bldg., Room No., if any	Name	
Street 8436 S. Minturn Road	Name	
City Le Grand	Name	
State California ZIP Code + 4 95333	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 compete. (See Section VII on penalties in the instructions.)		
13. Signed President (If other title, see instructions)	14. Signed Walk Dows Treasurer (If other title, see instructions)	
Title President	Title Treasurer	
On 120115 916-561-5520 Date Telephone Number	On Date 916-561-5520 Telephone Number	

Filer Bryan Little Farm Employers Labor Service		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.): Farm Employers Labor Service was retained by Marchini Farms, which agreed to pay PELS for services rendered by FELS Labor Management Consultant (LMC) for the purpose of informing employees of Marchini Farms of the advantages of voting for no union			
Specific Activities to be Performed			
11. For each activity, separately list in detail the information required (See instructions): a. Nature of activity: To inform employees of Marchini Farms of the advantages of voting for no union.			
11.b. Period during which performed:	11.c. Extent performed:		
8/25/15 through 9/2/15	Completed		
11.d. Name and address through whom performed:	Additional Name and addre	ss through whom performed, if any:	
Name Rigo De La Cerda	Name		
Organization Farm Employers Labor Service	Organization		
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No.,	if any	
Street 2300 River Plaza Drive	Street		
City Sacramento	City		
State California ✓ ZIP Code + 4 95833	State	ZIP Code + 4	
12.a. Identify subject groups of employees:	12.b. Identify subject labor	organizations:	
Employees of Marchini Farms	United Farm Worker	rs	
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