U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

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FORM LM-20 AGREEMENT AND ACTIVITIES REPORT

Form approved
Office of Management
and Budget
No. 121.5-0188
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.

441522	
1. File Number: C- 00556	
Person Filing	
2. Name and mailing address (include ZIP Code):	3. Any other address where records necessary to verify this report are kept:
Name Jaiver Rojas	Name
Title Treasury	Title
Organization Permanent Solutions Labor Consultants	Organization
P.O. Box, Bldg., Room No., if any #374	P.O. Box, Bldg., Room No., if any
Street 23772 West Rd	Street
City Brownstown	City
State Michigan ZIP Code + 4 48183	State ZIP Code + 4
4. Date fiscal year ends: 5. Type of person:	4
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: 10 / 29 / 2010
Name Jennifer Oharan	, ,
Organization Walton Woods	8. Name of person(s) through whom made:
Trade Name, if any	Name Jennifer Oharan
P.O. Box, Bldg., Room No., if any	Name
Street 3450 West 13 Mile	Name
City Royal Oak	Name
State Michigan ZIP Code + 4 48073	Name
Signa	tures
Each of the undersigned declares, under penalty of perjury and other applicable the information contained in any accompanying documents) has been examined true, correct, and complete (See Section ///Len penalties in the instructions.)	penalties of law, that all of the information submitted in this report (including by the signatory and is, to the best of the undersigned's knowledge and belief,
President (If other title, see	14. Signed Server Server (If other title, see
Title President instructions)	Title Treasurer instructions)
On 12/02/2010 313-218-0371	On 12/02/2010 313-218-0371
Date Telephone Number	Date Telephone Number

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Ì	Filer Jaiver Rojas	Permanent Solutions Labor Consultants	File Number C- 00556

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.):

- 1. Consult and advise management of Praxair regarding strategy for conducting a cirtified election.
- 2. Conduct Informational meetings with employees.

Specific Activities to be Performed

- 11. For each activity, separately list in detail the information required (See instructions):
 - a. Nature of activity:
 - 1. Meeting times and location were posted, met in groups of 10 to 15. Union facts and Q & A.
 - 2. Worked with management on informational handouts to be given to employees about union Bi-laws and Constitution.

1.b. Period during which performed:	11.c. Extent performed:	
11/01/2010 to 12/10/2010	Compleated	
1.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:	
ame Richard L Torres	Name	
Organization Permanent Solutions	Organization	
O. Box, Bldg., Room No., if any #374	P.O. Box, Bldg., Room No., if any	
treet 23772 West Rd	Street	
ity Brownstown	City	
State Michigan ZIP Code + 4 48183	State ZIP Code + 4	
2.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:	
	N/A	
All full and regular part time: caregivers, Med Techs, Housekepping aides, cooks, servers and laundry employees.		