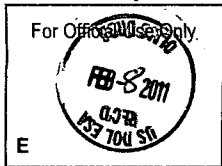


# FORM LM-20

## AGREEMENT AND ACTIVITIES REPORT

Form approved  
Office of Management  
and Budget  
No. 1215-0188  
Expires 09-30-2011



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)

442621

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number: C- 675

### Person Filing

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

Name Jason Rodriguez

Title President

Organization Prestige Consulting Solution

P.O. Box, Bldg., Room No., if any

Street 509 South Chickasaw Trail #249

City Orlando

State Florida ZIP Code + 4 32825

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 Patricia Lecouras

Organization The Chef's Warehouse

Trade Name, if any

P.O. Box, Bldg., Room No., if any

Street 100 East Ridge Road

City Ridgefield

State Connecticut ZIP Code + 4 06877

7. Date entered into:

1 / 3 / 2011

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

Name Patricia Lecouras

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

On 1/30/2011 407-373-3800

Date

Telephone Number

On

Date

Telephone Number

Filer: Jason Rodriguez, Prestige Consulting Solution

File Number C- 675

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.):

Verbal agreement to provide consultation and to give speeches to employees about exercising their rights to organize and bargain collectively. Terms are \$225.00 per hour per consultant with all expenses inclusive.

**Specific Activities to be Performed**

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

a. Nature of activity:

To provide consultation and to give speeches to employees regarding their rights to organize and bargain collectively.

11.b. Period during which performed:

January 2011 - February 2011

11.c. Extent performed:

near completion

11.d. Name and address through whom performed:

Name Jason Rodriguez  
Organization Prestige Consulting Solution  
P.O. Box, Bldg., Room No., if any  
Street 509 South Chickasaw Trail  
City Orlando  
State Florida ZIP Code + 4 32825

Additional Name and address through whom performed, if any:

Name Mike Roan  
Organization Prestige Consulting Solution  
P.O. Box, Bldg., Room No., if any  
Street 509 South Chickasaw Trail  
City Orlando  
State Florida ZIP Code + 4 32825

12.a. Identify subject groups of employees:

All full time and regular part time warehouse employees, driver, dispatchers, and routers. Employee by the employer at the Hayward California facility.

12.b. Identify subject labor organizations:

International brotherhood of Teamsters local 853  
Case # 32-RC-5807