

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)

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

593198

1. File Number:

c-6574

Person Filing

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

Name Steven Vincent

Title

Organization

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

Street 120 Sprague Drive

City Star Valley

State Arizona

ZIP Code + 4 85541-3884

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

Organization Nestle Waters North America Inc.

Trade Name, if any

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

Street 900 Long Ridge Road

City Stamford

State Connecticut

ZIP Code + 4 06902-1128

7. Date entered into:

4 / 21 / 2015

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

Name Patrick

O'Sullivan

Name James

Schmoller

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

Steve Vincent

President
(If other title, see
instructions)

Title

N/A

14. Signed

Treasurer
(If other title, see
instructions)

Title

On

5-20-15

Date

(928) 472-7138

Telephone Number

On

Date

Telephone Number

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.):

As a recently retired Zone Manager for the Employer, I met with employees between 4/28 and 4/30 (2015) to advise them of their right not to be represented by a labor union and to encourage a vote for no union representation. No written agreement relative to the arrangement exists. Consultant was not compensated, with all travel expenses being paid directly by the Employer.

Specific Activities to be Performed

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

a. Nature of activity:

I met with Route Sales Representatives, Coffee/Point of Use Representatives, Administrative Assistants, and several other facility employees in El Monte, CA and Gardena, CA relative to union organizing petitions. Additionally, I met with employees in Orange, CA and Brea, CA, although no petitions have been filed at those two locations. Meetings were conducted to advise employees of their right not to be represented by a labor union and to encourage a vote for no union representation.

11.b. Period during which performed:

April 28-30, 2015

11.c. Extent performed:

Consultant activities completed.

11.d. Name and address through whom performed:

Name Steven Vincent

Organization

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

Street 120 Sprague Drive

City Star Valley

State Arizona

ZIP Code + 4 85541-3884

Additional Name and address through whom performed, if any:

Name

Organization

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

Street

City

State

ZIP Code + 4

12.a. Identify subject groups of employees:

Route Sales Representatives identified in the representation petitions, as well as Coffee/Point of Use Representatives and Administrative Assistants located at the Employer's El Monte and Gardena, California facilities. Consultant also met with similarly situated employees not identified in a union representation petition and who are located in Orange, CA and Brea, CA.

12.b. Identify subject labor organizations:

Teamsters Joint Council 42, International Brotherhood of Teamsters

Filer Steven Vincent

File Number C-

Item 10 Continuation From Page 2

This page intentionally left blank, nothing further to report.