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



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)

	LLY BEFORE PREPARING THIS REPORT.	
1. File Number: C-1/0/54		
1. File Number: C- 6654		
Person Filing		
2. Name and mailing address (include ZIP Code):	3. Any other address where records necessary to verify this report are kept:	
Name John P. Cevallos	Name	
Title Managins Partner	Title	
Organization Cevallos Consulting Group LLC	Organization	
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any	
Street 8553 5 on Clemente Dr.	Street	
city RAncho Cucamonsa	City	
State <i>CA</i> ZIP Code + 4 9 1.73 D	State ZIP Code + 4	
4. Date fiscal year ends: 5. Type of person:		
12/31 /2014 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 & D Sou live -	7. Date entered into:	
Organization UNO Pizzeria & Grill	Name of person(s) through whom made:	
Trade Name, if any	Name ED SOULIEV	
DO Day Did. D. M. W	Name	
Street 100 Charles Park Road	Name	
City Boston	Name	
State <i>CA</i> ZIP Code + 4 <i>O 2 1 3 2</i>	Name	
Signat	lines	
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 VII on penalties in the instructions.) 13. Signed Dum F. (Wallos President (If other title, see instructions)	penalties of law, that all of the information submitted in this report (including	
on 3/14/14 760-720-2929	Title 10 avag. vg 191 Mr	

Telephone Number

Telephone Number

Filer. John Cevallos- Cevallos Cons	ulting Group	File Number C-	
	LLC		
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.):			
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Specific Activities to be Performed			
11. For each activity, separately list in detail the information required (See instructions):			
a. Nature of activity:			
·			
11.b. Period during which performed: VArious Days beginning 3/1/14	11.c. Extent performed:		
11.d. Name and address through whom performed:	Additional Name and addre	ss through whom performed, if any:	
Name Phil Wilson	Name		
Organization LRI	Organization		
P.O. Box, Bldg., Room No., if any P.O. Box 1529			
Street 7850 South ELM Place	P.O. Box, Bldg., Room No.,	if any	
Street /85 0 5007 4 ECM 1500	Street		
city Broken Arrow	City		
State O K ZIP Code + 4 74013	State	ZIP Code + 4	
12.a. Identify subject groups of employees:	12.b. Identify subject labor	organizations:	
Shippers, Receivers, Area		· · · · · · · ·	
Shippers, Receivers, Area leads, quality control,	7 E	Ams ters	
Maintenance, general Food	, ,		
processing, production employed		`	
charles - Hance Kes Dias			
Cleaning & House Keeping			