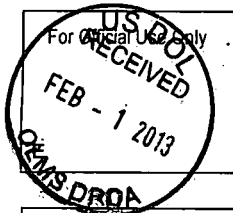


FORM LM-20

AGREEMENT AND ACTIVITIES REPORT

Form approved
Office of Management
and Budget
No. 1245-0003
Expires 10-31-2013



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.

510474

1. File Number: C- 00738

Person Filing

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

Name JACOB M MONTY

Title MANAGER

Organization LATINO LABOR PERSUADERS

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

Street 150 W. PARKER RD., 4TH FLOOR

City HOUSTON

State Texas

ZIP Code + 4 77084

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): LLC

Nature of Agreement or Arrangement

6. Full name and address of employer with whom made (include ZIP Code):

Name William D Leopardi

Organization Leopardi Labor Solutions Inc.

Trade Name, if any

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

Street 28161 Haria

City Mission Viejo

State California

ZIP Code + 4 92692

7. Date entered into:

12 / 26 / 2012

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

Name William D Leopardi

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

Title Other (Specify)

Manager

President
(If other title, see
instructions)

14. Signed

Title Other (Specify)

Treasurer
(If other title, see
instructions)

On 01/28/2013 (713) 691-7118

Date

Telephone Number

On 01/28/2013 (713) 691-7118

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.):

To provide professional consulting services as described in Section 11. Per verbal contract, consultants are to be paid a flat daily fee, plus be reimbursed for expenses incurred while at client's facility.

Specific Activities to be Performed

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

a. Nature of activity:

~~On behalf of Leopardi Labor Solutions, Inc., meet with employees of Emmanuel Medical Center, to explain their rights under NLRA prior to NLRB election. Provide information and answer questions about collective bargaining.~~

11.b. Period during which performed:

December 26, 2012 to present

11.c. Extent performed:

ongoing

11.d. Name and address through whom performed:

Name Carlos Ortiz
Organization Latino Labor Persuaders
P.O. Box, Bldg., Room No., if any Fourth Floor
Street 150 W Parker Rd.
City Houston
State Texas ZIP Code + 4 77076

Additional Name and address through whom performed, if any:

Name Gerri Ransom
Organization Latino Labor Persuaders
P.O. Box, Bldg., Room No., if any Fourth Floor
Street 150 W Parker Rd.
City Houston
State Texas ZIP Code + 4 77076

12.a. Identify subject groups of employees:

Voting Unit in case #32-RC-093820

12.b. Identify subject labor organizations:

Service Employees International Union