

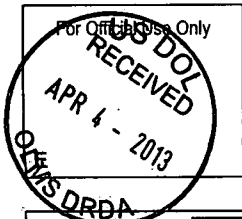
FORM LM-21

RECEIPTS AND DISBURSEMENTS 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 Relations and Disclosure Act of 1959, as amended. (LMRDA)



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

525680

1. File Number C- 00742	2. Period Covered By This Report	Month/Day/Year (mm/dd/yyyy)	Through:	Month/Day/Year (mm/dd/yyyy)
	From:	01 / 01 / 2012		12 / 31 / 2012

A. Person Filing	
3. Name and mailing address (include ZIP Code):	
Name	William D Leopardi
Title	Sole Proprietor
Organization	Leopardi Labor Solutions
P.O. Box, Building and Room Number, if any	
Street	28161 Haria
City	Mission Viejo
State	California ZIP Code + 4 92692
4. Any other address where records necessary to verify this report are kept:	
Name	
Title	
Organization	
P.O. Box, Building and Room Number, if any	
Street	
City	
State	ZIP Code + 4

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 the Section on penalties in the instructions).

17. Signed	President (If other title, see instructions)
Title	Sole Proprietor
On	03 / 27 / 2013 949-457-8087
Date	Telephone Number
18. Signed	Treasurer (If other title, see instructions)
Title	Treasurer
On	
Date	Telephone Number

Name of Person Filing: William Leopardi

File Number C- 00742

B. Statement of Receipts Report all receipts from employers in connection with labor relations advice or services regardless of the purposes of the advice or services.

5.a. Name and Address of Employer (including trade name, if any).

Mailing Address:

P.O. Box, Building and Room Number, if any

Employer See Attached

Trade Name

Street

Attention To

City

Title

State

ZIP Code + 4

5.b. Termination Date

5.c. Amount 231,848

6. TOTAL RECEIPTS FROM ALL EMPLOYERS 231,848

C. Statement of Disbursements

Report all disbursements made by the reporting organization in connection with labor relations advice or services rendered to the employers listed in Part B.

7. Disbursements to Officers and Employees:

(a) Name

(b) Salary

(c) Expenses (d) Totals

William	D	Leopardi	120,780	8,717	129,497	9. Office and Administrative Expenses	6,033
						10. Publicity	0
						11. Fees for Professional Services	445
						12. Loans Made	
						13. Other Disbursements	
8. Total disbursements to officers and employees:					129,497	14. Total Disbursements (Sum of Items 8-13)	135,975

D. Schedule of Disbursements for Reportable Activity

Use this Schedule to report only disbursements made for the purposes described in Part D of the instructions.

15.a. Employer Name:

15.b. Trade Name, If any:

15.c. To Whom Paid

Name

See attached

Title

Organization

P.O. Box, Building and Room Number, if any

Street

City

State

ZIP Code + 4

15.d. Amount 111,351

15.e. Purpose

16. TOTAL DISBURSEMENTS FOR ALL REPORTABLE ACTIVITY 111,351

2012 LM-21

William D. Leopardi
Leopardi Labor Solutions

C-00742

B. Statement of Receipts

1. El Centro Regional Medical Center

David R. Green, CEO

1415 Ross Avenue

El Centro, CA 92243

Term date 9-Apr-12

Amount \$20,556

2. Emanuel Medical Center

David Neapolitan

Chief Financial Officer

Emanuel Medical Center

825 Delbon Avenue

Turlock, CA 95382

Term date 6-Jan-13

Amount \$40,000

3. The Essential Baking Company

Tom Campanile

President & CEO

5601 1st Ave. South

Seattle, Washington 98108

Term date 12-Sep-12

Amount \$25,707

4. Mee Memorial Hospital

Susan Childers

Chief Financial Officer

300 Canal Street

King City, CA 93930

Term date 18-Nov-12

Amount \$140,260

5. MedReach Ambulance Service

Kathy McNab-Aragon

President

1303 Kona Drive

Rancho Dominguez, CA 90220

Term date: 6-Dec-12

Amount \$5,325

William D. Leopardi
Leopardi Labor Solutions

C-00742

D. Schedule of Disbursements

- 1 Carlos Ortiz
c. 7426 Cherry Avenue
Fontana CA 92336
d. \$39,542
e. To explain the National Labor Relations Act and the realities of collective bargaining to the employees of Mee Memorial Hospital eligible to vote in an NLRB representation election with NUHW
-
- 2 John de Groot
b. de Groot & Associates
c. 1313 College Avenue
Santa Rosa CA 95404
d. \$35,020
e. To explain the National Labor Relations Act and the realities of collective bargaining to the employees of Mee Memorial Hospital eligible to vote in an NLRB representation election with NUHW
- 3 Michael O'Donnell
b. Pinnacle Organizational Services
c. 3103 East Hazelwood Street
Phoenix AZ 85016
d. \$36,789
e. To explain the National Labor Relations Act and the realities of collective bargaining to the employees of Mee Memorial Hospital eligible to vote in an NLRB representation election with NUHW
To explain the Myers Milias Brown Act and the realities of collective bargainin to Registered Nurses of El Centro Regional Medical Center.
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- Total \$ 111,351