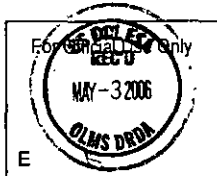


# FORM LM-20 AGREEMENT AND ACTIVITIES REPORT

Form approved  
Office of Management  
and Budget  
No. 1215-0188  
Expires 11-30-2006



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.

1. File Number: C- 00549

## Person Filing

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

Name

Title

Organization Direct Labor Training Corporation

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

Street 502 N. Division Street

City Carson City

State Nevada

ZIP Code + 4 89703

3. Any other address where records necessary to verify this report are kept:

Name Manny Gonzalez

Title President

Organization Direct Labor Training Corporation

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

Street 211 W. Palmetto Drive, #7

City Alhambra

State California

ZIP Code + 4 91801

4. Date fiscal year ends:

Dec / 6

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 Barbara Shepard

Organization The Doe Run Company

Trade Name, if any

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

Street 1801 Park 270 Drive, Suite 300

City St. Louis

State Missouri

ZIP Code + 4 63146

7. Date entered into:

3 / 13 / 2006

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

Name Barbara Shepard

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

*Manny Gonzalez*  
President  
(If other title, see instructions)

Title President

14. Signed

*John Bree*  
Treasurer  
(If other title, see instructions)

Title Other (Specify)

Vice President of Marketing & Admin

On 03/29/2006

Date

888-600-4008

Telephone Number

On 03/29/2006

Date

888-600-4008

Telephone Number

Filer: Direct Labor Training Corporation

File Number C- 00549

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.):

Starting 03/13/06 through the election date, our firm will conduct meetings with employees from the voting unit to discuss the realities of voting in the upcoming election. A maximum of 200 hours will be allocated to this work. Time and expenses will be billed monthly. There is no written agreement as to a maximum billable amount.

**Specific Activities to be Performed**

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

a. Nature of activity:

To inform employees in the voting unit to exercise their right to choose whether or not to be represented for the purpose of collective bargaining.

11.b. Period during which performed:

03/13/2006 through election date

11.c. Extent performed:

Ongoing meetings

11.d. Name and address through whom performed:

Name Manny Gonzalez

Organization Direct Labor Training Corporation

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

Street 211 W. Palmetto Drive, #7

City Alhambra

State California

ZIP Code + 4 91801

Additional Name and address through whom performed, if any:

Name William Jonas

Organization Eclipse, Inc.

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

Street 7018 NW Emerald Hills Dr

City Parkville

State Missouri

ZIP Code + 4 64152

12.a. Identify subject groups of employees:

All employees in the voting unit.

12.b. Identify subject labor organizations:

# Agreement and Activities Report

# U.S. Department of Labor

Office of Labor-Management Standards



This report is mandatory under P.L. 86-257 as amended. Failure to comply may result in criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 439, 440.

OMB No. 1214-0001  
12/31/86

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)

File No. **c.483**

## A. Person Filing

|  |   |  |  |
|--|---|--|--|
| 1. Name and mailing address (include ZIP code):<br><b>CRUZ &amp; ASSOCIATES, INC.</b><br><b>10201 TRADEMARK, #C</b><br><b>RANCHO CUCAMONGA, CA 91730</b> |   | 2. Any other address where records necessary to verify this report are kept: |  |
| 3. Date fiscal year ends:<br><b>12-31-05</b>   | 4. Type of person:<br>a. <input type="checkbox"/> Individual    b. <input type="checkbox"/> Partnership    c. <input checked="" type="checkbox"/> Corporation    d. <input type="checkbox"/> Other (Specify): |  |  |

## B. Nature of Agreement or Arrangement

|   |  |   |
|---|--|---|
| 5. Full name and address of employer with whom made (include ZIP code):<br><b>Emmanuel Medical Center</b><br><b>1801 N. Olive</b><br><b>Turlock, CA 95382</b>   |  | 6. Date entered into:<br><b>03/15/2006</b>                  |
|   |  | 7. Names of persons through whom made:<br><b>Terry Gray</b> |
| 8. Check the appropriate box to indicate whether an object of the activities undertaken, is directly or indirectly:<br>a. <input checked="" type="checkbox"/> 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.<br>b. <input type="checkbox"/> 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. |  |   |
| 9. Terms and conditions (Explain in detail; see Part B-9 of instructions):  |  |   |

**Hold employee meetings to inform their section (7) rights and to answer questions pertaining to the union, using NLRB Documents and Union Documents for questions and answers.**

## C. Specific Activities to be Performed

|  |  |
|--|--|
| 10. For each activity, separately list in detail the information required (See Part C-10 of instructions): |  |
| a. Nature of activity:<br><b>Hold employee meetings in small groups to inform them on Unions.</b>          |  |
| b. Period during which performed:<br><b>On going</b>   | c. Extent performed:<br><b>Held meetings with employees.</b> |
| d. Names and addresses of persons through whom performed:<br><b>Bill Leopardi And Gary Crowley</b>         |  |



11. Identify (a) Subject employees, groups of employees, and (b) labor organizations:

**Turlock Emergency Medical Service**

D. Verification and Signature. The person in item 1 above and each of his undersigned authorized officers declares, under penalty of law, that all information in this report, including all attachments incorporated therein or referred to in this report, has been examined by him and is, to the best of his knowledge and belief, true, correct, and complete.

|   |                                      |   |  |
|---|--------------------------------------|---|--|
| Signed: <i>[Signature]</i> (CEO/President)                                  |                                      | Signed: _____ (Secretary)                                     |  |
| (If other title, cross out CEO/President and write in correct title above.) |                                      | (If other title, cross out and write in correct title above.) |  |
| City: _____ State: _____ Date: _____  | City: _____ State: _____ Date: _____ |   |  |
| a. <b>RANCHO CUCAMONGA, CA</b>  |                                      | April 15, 2006  |  |

Form LMRDA-1 (Rev. 1-86)

# Agreement and Activities Report

## U.S. Department of Labor

Office of Labor-Management Standards



This report is mandatory under P.L. 86-257 as amended. Failure to comply may result in criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 439, 440.

OMB No. 1214-0001  
12/31/96

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).

File No. **c. 483**

### A. Person Filing

|  |  |
|--|--|
| 1. Name and mailing address (include ZIP code):<br><b>CRUZ &amp; ASSOCIATES, INC.<br/>10201 TRADEMARK, #C<br/>RANCHO CUCAMONGA, CA 91730</b> | 2. Any other address where records necessary to verify this report are kept: |
|--|--|

|  |   |
|--|---|
| 3. Date fiscal year ends:<br><b>12-31-06</b> | 4. Type of person:<br>a. <input type="checkbox"/> Individual    b. <input type="checkbox"/> Partnership    c. <input checked="" type="checkbox"/> Corporation    d. <input type="checkbox"/> Other (Specify): |
|--|---|

### B. Nature of Agreement or Arrangement

|  |  |
|--|--|
| 5. Full name and address of employer with whom made (include ZIP code):<br><b>Sunray Healthcare Center<br/>3210 W. Pico Blvd<br/>Los Angeles, CA 90019</b> | 6. Date entered into:<br><b>03/30/2006</b>                     |
|  | 7. Names of persons through whom made:<br><b>Raya Robinson</b> |

8. 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.

### 9. Terms and conditions (Explain in detail; see Part B-9 of instructions):

**Hold employee meetings to inform their section (7) rights and to answer questions pertaining to the union, using NLRB Documents and Union Documents for questions and answers.**

### C. Specific Activities to be Performed

10. For each activity, separately list in detail the information required (See Part C-10 of instructions):

a. Nature of activity:  
**Hold employee meetings in small groups to inform them on Unions.**

|  |  |
|--|--|
| b. Period during which performed:<br><b>On going</b> | c. Extent performed:<br><b>Held meetings with employees.</b> |
|--|--|

d. Names and addresses of persons through whom performed:  
**John Henderson, Judy Castillio And Nekeya Nunn**

### 11. Identify (a) Subject employees, groups of employees, and (b) labor organizations:

**S.E.I.U. Local 434**

D. Verification and Signature. The person in item 1 above and each of his undersigned authorized officers declares, under penalty of law, that all information in this report, including all attachments incorporated therein or referred to in this report, has been examined by him and is, to the best of his knowledge and belief, true, correct, and complete.

|   |  |  |
|---|--|--|
| Signed:<br><br>City: _____ State: _____ Date: _____       | CEO<br>President:<br>Signed:<br><br>City: _____ State: _____ Date: _____ | Treasurer:<br><br>City: _____ State: _____ Date: _____ |
| at: <b>RANCHO CUCAMONGA, CA</b> on: <b>April 28, 2006</b> |  |  |

# Agreement and Activities Report

## U.S. Department of Labor

Office of Labor-Management Standards



This report is mandatory under P.L. 86-257 as amended. Failure to comply may result in criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 439, 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).

File No. **c. 483**

### A. Person Filing

|  |  |  |  |
|--|--|--|--|
| 1. Name and mailing address (include ZIP code):<br><b>CRUZ &amp; ASSOCIATES, INC.</b><br><b>10201 TRADEMARK, #C</b><br><b>RANCHO CUCAMONGA, CA 91730</b> |  | 2. Any other address where records necessary to verify this report are kept: |  |
| 3. Date fiscal year ends:<br><b>12-31-06</b>   | 4. Type of person:<br>a. <input type="checkbox"/> Individual   b. <input type="checkbox"/> Partnership   c. <input checked="" type="checkbox"/> Corporation   d. <input type="checkbox"/> Other (Specify): |  |  |

### B. Nature of Agreement or Arrangement

|   |  |   |
|---|--|---|
| 5. Full name and address of employer with whom made (include ZIP code):<br><b>Bradford Airport Logistics</b><br><b>P.O. Box 1342</b><br><b>Huston, Tx. 77251-1342</b>   |  | 6. Date entered into:<br><b>04/10/2006</b>                        |
|   |  | 7. Names of persons through whom made:<br><b>Benjamin Ritcher</b> |
| 8. Check the appropriate box to indicate whether an object of the activities undertaken, is directly or indirectly:<br>a. <input checked="" type="checkbox"/> To persuade employees to exercise or not to exercise, or persuade employers as to the manner of exercising, the right to organize and bargain collectively through representatives of their own choosing.<br>b. <input type="checkbox"/> 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. |  |   |
| 9. Terms and conditions (Explain in detail; see Part B-9 of instructions):  |  |   |

**Hold employee meetings to inform their section (7) rights and to answer questions pertaining to the union, using NLRB Documents and Union Documents for questions and answers.**

### C. Specific Activities to be Performed

|  |  |  |
|--|--|--|
| 10. For each activity, separately list in detail the information required (See Part C-10 of instructions): |  |  |
| a. Nature of activity:<br><b>Hold employee meetings in small groups to inform them on Unions.</b>          |  |  |
| b. Period during which performed:<br><b>On going</b>   | c. Extent performed:<br><b>Held meetings with employees.</b> |  |
| d. Names and addresses of persons through whom performed:<br><b>Greg Passant And Daryl Valdez</b>          |  |  |

11. Identify (a) Subject employees, groups of employees, and (b) labor organizations:

**Teamster AFL-CIO Local 120**

D. Verification and Signature. The person in item 1 above and each of his undersigned authorized officers declares, under penalty of law, that all information in this report, including all attachments incorporated therein or referred to in this report, has been examined by him and is, to the best of his knowledge and belief, true, correct, and complete.

|   |                         |   |       |
|---|-------------------------|---|-------|
| Signed:   |                         | Signed: _____   |       |
| CEO<br>President  |                         | Treasurer   |       |
| (If other title, cross out and write in correct title above.) |                         | (If other title, cross out and write in correct title above.) |       |
| City  | State                   | City  | State |
| at: <b>RANCHO CUCAMONGA, CA</b>                               | on: <b>May 03, 2006</b> | on:   |       |

# Agreement and Activities Report

## U.S. Department of Labor

Office of Labor-Management Standards



This report is mandatory under P.L. 86-257 as amended. Failure to comply may result in criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 433, 440.

OMB No. 1214-0001  
12/31/86

Required of Persons, including Labor Relations Consultants and Other Individuals and Organizations, Under Section 202(b) of the Labor-Management Reporting and Disclosure Act of 1959, as amended (LMRDA).

File No. **c. 483**

### A. Person Filing

1. Name and mailing address (include ZIP code):

**CRUZ & ASSOCIATES, INC.  
10201 TRADEMARK, #C  
RANCHO CUCAMONGA, CA 91730**

2. Any other address where records necessary to verify this report are kept:



3. Date fiscal year ends:

**12/31/06**

4. Type of person:

a. ☐ Individual b. ☐ Partnership c. ☒ Corporation d. ☐ Other (Specify):

### B. Nature of Agreement or Arrangement

5. Full name and address of employer with whom made (include ZIP code):

**Piney Bowes MSC 61-23  
1 E Hancock R.  
Stanford, Ct 06926-0700**

6. Date entered into:

**04/16/2006**

7. Names of persons through whom made:

**Rosalinda M. Gordon**

8. 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.

9. Terms and conditions (Explain in detail; see Part B-9 of instructions):

**Hold employee meetings to inform their section (7) rights and to answer questions pertaining to the union, using NLRB Documents and Union Documents for questions and answers.**

### C. Specific Activities to be Performed

10. For each activity, separately list in detail the information required (See Part C-10 of instructions):

a. Nature of activity:

**Hold employee meetings in small groups to inform them on Unions.**

b. Period during which performed:

**On going**

c. Extent performed:

**Held meetings with employees.**

d. Names and addresses of persons through whom performed:

**John Henderson And Carlos Ortiz**

11. Identify (a) Subject employees, groups of employees, and (b) labor organizations:

**American Postal Workers**

D. Verification and Signature. The person in Item 1 above and each of his undersigned authorized officers declares, under penalty of law, that all information in this report, including all attachments incorporated therein or referred to in this report, has been examined by him and is, to the best of his knowledge and belief, true, correct, and complete.

Signed:

*[Signature]*

CEO  
President

Signed:

Treasurer

(If other title, cross out and write in correct title above.)

(If other title, cross out and write in correct title above.)

City

State

Date

City

State

Date

at: **RANCHO CUCAMONGA, CA** on: **May 15, 2006**

on: