FORM LM-20
AGREEMENT AND ACTIVITIES REPORT

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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.

490417

1. File Number:	C- 761

Person Filing

2. Name and mailing address (include ZIP Code):	3. Any other address where records necessary to verify this report are kept:
Name Fernando A Rivera	Name
Title President	Title
Organization	Organization
P.O. Box, Bldg., Room No., if any 340	P.O. Box, Bldg., Room No., if any
Street 12223 Highland Ave	Street
City Rancho Cucamonga	City
State California ZIP Code + 4 91739	State ZIP Code + 4

4. Date fiscal year ends:	5. Type of person:
Dec / 31	a. ☒ Individual b. ☐ Partnership c. ☐ Corporation d. ☐ Other (Specify):

Nature of Agreement or Arrangement

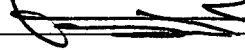| 6. Full name and address of employer with whom made (include ZIP Code):	7. Date entered into: 10 / 15 / 08
Name Nigel Hurst	
Organization HEI Hotels and Resorts	8. Name of person(s) through whom made:
Trade Name, if any HEI	Name
P.O. Box, Bldg., Room No., if any	Name
Street 101 Merritt 7 Corporate Park	Name
City Norwalk	Name
State Connecticut ZIP Code + 4 06851	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 _____	President (If other title, see instructions)	14. Signed _____	Treasurer (If other title, see instructions)
Title President		Title Treasurer	
4/26/2012			
On 7/4/2009 909-904-1474		On _____	
Date Telephone Number		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.):

Hold employee meetings to inform them of their rights under section (7) of the NLRA guide and to answer questions pertaining to the union using NLRB documents for questions and answers.

Specific Activities to be Performed

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

a. Nature of activity:

Inform employee, managers and supervisors about their rights, duties and responsabilities under the National Labor Relations Act (NLRA) Section 7, and under National Labor Relations Board (NLRB).

11.b. Period during which performed:	11.c. Extent performed:
July to December	Completed

11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:
Name Fernando A Rivera	Name
Organization	Organization
P.O. Box, Bldg., Room No., if any 340	P.O. Box, Bldg., Room No., if any
Street 12223 Highland Ave	Street
City Rancho Cucamonga	City
State California ZIP Code + 4	State ZIP Code + 4

12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:
All employees	UNITEHERE Local 11