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. 1215-0188 Expires 12-31-2010



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.

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1. File Number: <b>C-</b> 00483	360478			
Person Filing				
Name and mailing address (include ZIP Code):		Any other address where records necessary to verify this report are kept:		
Name Lupe Cruz		Name		
Title CEO		Title		
Organization Cruz & Associates, Inc.		Organization		
P.O. Box, Bldg., Room No., if any		P.O. Box, Bldg., Room No., if any		
Street 10201 Trademark Street, #C		Street		
City Rancho Cucamonga		City		
State California	ZIP Code + 4 91730	State ZIP Code + 4		
4. Date fiscal year ends:	5. Type of person:			
Dec / <b>0</b> 8	a. Individual b. Partnership	c. Corporation d. Other (Specify):		
· · · · · · · · · · · · · · · · · · ·				
Nature of Agreement or Arrangemen	nt			
6. Full name and address of employer with whom made (include ZIP Code):		7. Date entered into: 3 / 19 / 2008		
Name Tommy Slattery				
Organization Interstate Waste Services		8. Name of person(s) Ihrough whom made:		
Trade Name, if any		Name Tommy Slattery		
P.O. Box, Bldg., Room No., if any		Name		
Street 200 Sterling Mine Road		Name		
City Sloatsburg		Name		
State New York	ZIP Code + 4 10974	Name		
	Signa	tures		
the information contained if any accontrue, correct, and complete. (See Secti	npanying documents) has been examined on VII on penalties in the instructions.)	penalties of law, that all of the information submitted in this re by the signatory and is, to the best of the undersigned's know	eport (including viedge and belief,	
13. Signed	President (If other title, see	14. Signed	Treasurer (If other title, see	
Title President	instructions)	Title Treasurer	instructions)	
04/17/0000	0.000.000	_		
	9-980-8736 Telephone Number	On Telephone Number		
Date	i eleptione Number	E-ate Telephone Number		

Filer Lupe Cruz Cruz & Associates, Inc.		File Number C- 00483				
Check the appropriate box to indicate whether an object of the activities under	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 their section (7) rights and to answer questions pertaining to the union using NLRB documents and union documents for questions and answers.						
Specific Activities to be Performed						
11. For each activity, separately list in detail the information required (See instruct	ions):					
a. Nature of activity:						
Held employee meetings in small groups to inform them on unions						
	1					
11.b. Period during which performed:	11.c. Extent performed:	with amplement				
On going  11.d. Name and address through whom performed:	Held meetings					
	Name Juan	s through whom performed, if any:				
		Cruz				
Organization Cruz & Associates, Inc.	Organization Cruz & As-	sociates, Inc.				
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any					
Street 10201 Trademark Street, #C	Street 10201 Tradema	rk Street, #C				
City Rancho Cucamonga	City Rancho Cudamor	nga				
State California ZIP Code + 4 91730	State California	ZiP Code + 4 91730				
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:					
Employees in potential bargaining unit	Laborers Local. 108					