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AGREEMENT AND ACTIVITIES REPORT

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For Official Use Only

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OCT 25 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)

Group

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number:

C 675

Person Filing

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

Name Ana L Rodriguez

Title Vice-President

Organization Prestige Consulting Solutions LLC.

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

Street 509 South Chickasaw Tr. # 249

City Orlando

State Florida

ZIP Code + 4 32825

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):

Nature of Agreement or Arrangement

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

Name Patricia Lecouras

Organization The Chef's Warehouse

Trade Name, if any

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

Street 100 East Ridge Road

City Ridgefield

State Connecticut

ZIP Code + 4 06877

7. Date entered into:

8/19/13

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

Name Patricia Lecouras

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.

Not Ready To Sign

13. Signed Ana Rodriguez

SIGN HERE
President
(If other title, see instructions)

Title Vice-President

Prestige Consulting Solutions

Not Ready To Sign

14. Signed [Signature]

SIGN HERE
Treasurer
(If other title, see instructions)

Title President - PCS

Stamp

On 8-19-2013 407-373-3800

Date

Telephone Number

Clear Signatures

On 8-19-13 407-373-3800

Date

Telephone Number

Filer:

File Number C-

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.):

Verbal agreement to provide consultation and to give speeches to employees about exercising their rights to organized and bargain collectively. Terms are \$225.00 per hour per consultant with all expenses included.

Specific Activities to be Performed

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

a. Nature of activity:

TEST PG CNT

To provide consultation and to give speeches to employees regarding their rights to organize and bargain collectively.

11.b. Period during which performed:

August 2013 - September 2013

11.c. Extent performed:

Completed

11.d. Name and address through whom performed:

Name Nekeya Nunn

Organization Labor Pros

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

Street 390 North Orange Ave. Ste. 2300

City Orlando

State Florida ZIP Code + 4 32801

Additional Name and address through whom performed, if any:

Name Miriam Navarro

Organization Frontline Labor Relations Inc.

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

Street 10371 Park Ave. Apt. A

City Garden Grove

State California ZIP Code + 4 92840

12.a. Identify subject groups of employees:

All full-time and regular part-time delivery drivers, day warehouse workers, night warehouse workers and night pickers, but excluding all dispatchers, routers, team leaders, temporary employees, office clerical employees, guards and supervisors as defined in the Act. That work at the employer location at 7477 Candlewood Rd., Hanover, MD

12.b. Identify subject labor organizations:

IBT Local 570