

# FORM LM-20 AGREEMENT AND ACTIVITIES REPORT



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)

677449  
**READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.**

1. File Number: C- 67759

## Person Filing

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

Name Johan Pena  
Title \_\_\_\_\_  
Organization \_\_\_\_\_  
P.O. Box, Bldg., Room No., if any \_\_\_\_\_  
Street 261 NW 57th Avenue. # 1  
City Miami  
State Florida ZIP Code + 4 33126

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 Ted Oh  
Organization US Fibers  
Trade Name, if any \_\_\_\_\_  
P.O. Box, Bldg., Room No., if any \_\_\_\_\_  
Street 30 Pine Road  
City Trenton  
State South Carolina ZIP Code + 4 92336

7. Date entered into:

04 / 06 / 2013

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

Name Carlos Ortiz  
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

Title Sole Proprietor

President  
(If other title, see  
instructions)

14. Signed

Title Treasurer

Treasurer  
(If other title, see  
instructions)

On 03/28/2014  
Date

305-926-8230  
Telephone Number

On \_\_\_\_\_  
Date

\_\_\_\_\_  
Telephone Number

Filer: <b>JOHAN PENA</b>	File Number <b>C-67739</b>
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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.):

To provide professional consulting services, per verbal contract, to be paid a flat daily fee, plus be reimbursed for expenses incurred while at client's facility

<b>Specific Activities to be Performed</b>	
11. For each activity, separately list in detail the information required (See instructions):	
a. Nature of activity: To communicate with employees regarding their right to exercise or not exercise their right to support or not support a labor organization	
11.b. Period during which performed: On going	11.c. Extent performed:
11.d. Name and address through whom performed: Name    Carlos                      Ortiz Organization    Solutions Labor Relations Consultants P.O. Box, Bldg., Room No., if any Street    7426 Cherry City    Fontana State    California                      ZIP Code + 4    92336	Additional Name and address through whom performed, if any: Name Organization P.O. Box, Bldg., Room No., if any Street City State                                      ZIP Code + 4
12.a. Identify subject groups of employees: Employees in potential bargaining unit	12.b. Identify subject labor organizations: USW Local 7898