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. 1245-0003 Expires 07-31-2019



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)

632190

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number: C- 65548		
Person Filing 2. Name and mailing address (include 7/D Code):	2 Assistance address where residence in the second	
2. Name and mailing address (include ZIP Code):	3. Any other address where records necessary to verify this report are kept:	
Name David A Garcia	Name	
Title President	Title	
Organization Buena Creek Mgmt Consv Ling	Organization	
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any	
Street 2134 Brena Creek Rd	Street	
City Vista, CA	City	
State ZIP Code + 4 _ 9 2 0 8 9	State ZIP Code + 4	
4. Date fiscal year ends: 5. Type of person:		
Dec / 201) 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:	
Name John K Gasparian		
Organization American Reclamation	8. Name of person(s) through whom made:	
Trade Name, if any	Name	
P.O. Box, Bldg., Room No., if any	Name	
Street 4560 Doran Street	Name	
City Los Angeles	Name	
State CA ZIP Code + 4 [90039-1000	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. (Section VI) or penalties in the instructions.)		
13. Signed President (If other title, see instructions)	14. Signed Treasurer (If other title, see instructions)	
Title President	Title Treasurer	
On 07-13-2017 (714) 476-3907 Date Telephone Number	On Date Telephone Number	

Filer David A. García	File Number C- 65548	
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 with pryments to be made		
Verbal agreement with pryments to be made on installments. Follow directions/coordinate with outside legal compel.		
with outside legal counsel.		
Specific Activities to be Performed		
11. For each activity, separately list in detail the information required (See instructions):		
a. Nature of activity: Assid is are proventions for RC election including		
discretional veneral with amployees		
Assist in preparations for RC election including directionolvement with employees and preparation of written materials under direction of		
counsel.		
11.b. Period during which performed: November - De Cember 2017 11.c. Extent performed:	ion postponed	
	Idress through whom performed, if any:	
Name David A Garcia Name		
Organization Buena Creek Mgmt Consulting Organization		
P.O. Box, Bldg., Room No., if any	No., if any	
Street 2134 Brenc Creek Road Street		
City 1374 City		
State A ZIP Code + 4 92084 State	ZIP Code + 4	
12.a. Identify subject groups of employees: 12.b. Identify subject lat	bor organizations:	
Sorters drivers maintennage 1BT	Local 396	
Sorters drivers maintenned 1BT		