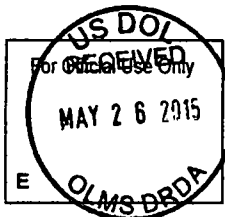


FORM LM-20

AGREEMENT AND ACTIVITIES REPORT

Form approved
Office of Management
and Budget
No. 1245-0003
Expires 08-31-2016



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.

593201

1. File Number: C-66579

Person Filing

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

Name Michael Swinton
Title President
Organization Presidio Executive Consultants, LLC
P.O. Box, Bldg., Room No., if any
Street 404 Presidio Court
City Southlake
State Texas ZIP Code + 4 76092-6042

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): LLC (S-Corp)

Nature of Agreement or Arrangement

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

Name
Organization Nestle Waters North America Inc.
Trade Name, if any
P.O. Box, Bldg., Room No., if any
Street 900 Long Ridge Road
City Stamford
State Connecticut ZIP Code + 4 06902-1128

7. Date entered into:

4 / 21 / 2015

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

Name Patrick O'Sullivan
Name James Schmoller
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

President
(If other title, see
instructions)

Title Sole Proprietor

14. Signed

Treasurer
(If other title, see
instructions)

Title

On

5/14/15

Date

(817) 488-0813

Telephone Number

On

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.):

As a recently retired Human Resources Executive for the Employer, Michael Swinton met with employees on April 22, 23, and 30 (2015) to advise them of their right not to be represented by a labor union and to encourage a vote for no union representation. No written agreement relative to the arrangement exists. Consultant was not compensated, but received reimbursement for travel expenses.

Specific Activities to be Performed

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

a. Nature of activity:

Consultant met with employees in a group setting at three facility locations - Los Angeles, El Monte, and Chatsworth, California. Meetings were conducted to advise employees of their right not to be represented by a labor union and to encourage a vote for no union representation.

11.b. Period during which performed:

April 22-30, 2015

11.c. Extent performed:

Consultant activities completed.

11.d. Name and address through whom performed:

Name Michael Swinton

Organization Presidio Executive Consultants, LLC

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

Street 404 Presidio Court

City Southlake

State Texas

ZIP Code + 4 76092-6042

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:

Route Sales Representatives identified in representation petitions filed relative to the Employer's Los Angeles, El Monte, and Chatsworth, California facilities, as well as other employees at those locations serving in functions such as Coffee/Point of Use Representatives and Unit Leaders.

12.b. Identify subject labor organizations:

Teamsters Joint Council 42, International Brotherhood of Teamsters