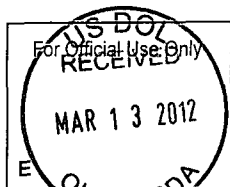


# FORM LM-20

## AGREEMENT AND ACTIVITIES REPORT

Form approved  
Office of Management  
and Budget  
No. 1245-0003  
Expires 10-31-2013



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)

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

476632

1. File Number: C- 756

### Person Filing

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

Name Bryan Little  
Title Chief Operating Officer  
Organization Farm Employers Labor Service  
P.O. Box, Bldg., Room No., if any  
Street 2300 River Plaza Drive  
City Sacramento  
State California ZIP Code + 4 95833

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 Jerry W Pearson  
Organization Young and Wooldridge, LLP  
Trade Name, if any  
P.O. Box, Bldg., Room No., if any  
Street 1800 39th Street  
City  
State ZIP Code + 4

7. Date entered into:

12 / 21 / 2011

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

Name John Barrientos  
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 President

President  
(If other title, see instructions)

14. Signed

Title Treasurer

Treasurer  
(If other title, see instructions)

On 3/1/12 916-561-5520

Date

Telephone Number

On 3/1/12 916-561-5520

Date

Telephone Number

Filer: Bryan Little Farm Employers Labor Service	File Number C-
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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.):

FELS was retained by Young & Wooldridge, LLP representing North Kern Water Storage District. Young & Wooldridge agreed to pay FELS \$195 per hour for services rendered by FELS Labor Management Consultant (LMC) plus travel costs (\$.58 per mile, \$45 per hour and actual out-of-pocket expenses) for the purpose of informing employees of the North Kern Water Storage District of the advantages of voting for no union.

#### Specific Activities to be Performed

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

a. Nature of activity:

- Meetings with supervisory personnel and management of North Kern Water Storage District.
- Group meetings with employees of North Kern Water Storage District.

11.b. Period during which performed:

12/5/2011 through 12/21/2011

11.c. Extent performed:

completed

11.d. Name and address through whom performed:

Name John Barrientos  
 Organization Farm Employers Labor Service  
 P.O. Box, Bldg., Room No., if any  
 Street 2300 River Plaza Drive  
 City Sacramento  
 State California ZIP Code + 4 95833

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 of North Kern Water Storage District

12.b. Identify subject labor organizations:

Teamsters Local 8