CU.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. 1215-0188
Expires 11-30-2006



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.		
431771		
1. File Number: C- 00633		
Person Filing		
2. Name and mailing address (include ZIP Code):	Any other address where records necessary to verify this report are kept:	
Name Michael D Penn	Name	
Title Partner	Title	
Organization The Crossroads Group	Organization	
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any	
Street 63 Via Pico Plaza, Suite 505	Street	
City San Clemente	City	
State California ZIP Code + 4 92672	State ZIP Code + 4	
4. Date fiscal year ends: 5. Type of person:		
Dec / 31 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):	de (include ZIP Code): 7. Date entered into: 6 / 9 / 2010	
Name Raul Diaz De Leon	<u> </u>	
Organization ValleyCrest Landscape Companies	8. Name of person(s) through whom made:	
Trade Name, if any ValleyCrest Landscape Management	Name	
P.O. Box, Bldg., Room No., if any	Name	
Street 24151 Ventura Boulevard	Name	
City Calabasas	Name	
State California ZIP Code + 4 91302	Name	
Signatures		
Each of the undersigned declares, under penalty of perjury and other applicable the information contained in any accompanying documents) has been examined true, correct, and complete. (See Section VII on penalties in the instructions.)	penalties of law, that all of the information submitted in this report (including I by the signatory and Is, to the best of the undersigned's knowledge and belief,	
13. Signed Mile Dan Pen President (If other title, see instructions)	14. Signed Treasurer (If other title, see instructions)	
Title Other (Specify)	Title Other (Specify)	
Partner	Partner	
On 06/23/2010 818-999-5632	on 06/25/2010 949-248-0884	

Date

Date

Telephone Number

Telephone Number

<u> </u>			
Filer: Michael Penn The Crossroads Group		File Number C- 00633	
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.):			
Payment on a fee-for-service basis at the hourly rate of \$337.50 plus reasonable and customary expenses			
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Specific Activities to be Performed			
11. For each activity, separately list in detail the information required (See instructions):			
a. Nature of activity:			
To advise employees of their Section 7 rights and the potential disadvantages of third-party representation			
	T		
11.b. Period during which performed:	11.c. Extent performed:		
06/14 - 06/18/10	Completed		
11.d. Name and address through whom performed:		ss through whom performed, if any:	
Name Michael D Penn	Name		
Organization The Crossroads Group	Organization		
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No.,	if any	
Street 63 Via Pico Plaza, Suite 505	Street		
City San Clemente	City		
State California ZIP Code + 4 92672	State	ZIP Code + 4	
12.a. Identify subject groups of employees:	12.b. Identify subject labor	organizations:	
All laborers, irrigators, drivers and crew leaders at the employer's D.C. Metro Region branches: Dulles,VA; Fredericksburg, VA; Clarksburg, MD; Lorton, VA; and Chantilly, VA	LIUNA (Mid-Atlant:	ic)	