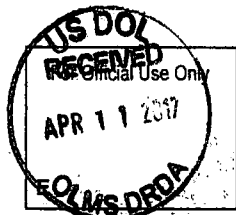


# FORM LM-20 AGREEMENT AND ACTIVITIES REPORT

Form approved  
Office of Management  
and Budget  
No. 1245-0003  
Expires 03-31-2019



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)

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

646495

1. File Number: C- 67645

## Person Filing

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

Name Jose Agraz

Title

Organization

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

Street 4010 Ivey Vista Way

City Oceanside

State California

ZIP Code + 4 92057

### 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 Robert Long

Organization Healthcare Labor Solutions

Trade Name, if any

P.O. Box, Bldg., Room No., if any L1645

Street 27762 Antonio Parkway L1-645

City Ladera Ranch

State California

ZIP Code + 4 92694

### 7. Date entered into:

10 / 31 / 2016

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

Name

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

*Jose Agraz*

President  
(If other title, see  
instructions)

Title Other (Specify)

Individual

On

3/25/2017 (760) 717-5284

Date

Telephone Number

14. Signed

Treasurer  
(If other title, see  
instructions)

Title Other (Specify)

Individual

On

Date

Telephone Number

Filer: Jose Agraz	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.):

Verbal agreement to performed services on an hourly fee basis. Expenses in connection with the performance of such servies as lodging, meals, travel were reimbursed at actual cost.

<b>Specific Activities to be Performed</b>	
11. For each activity, separately list in detail the information required (See instructions):	
a. Nature of activity:	
Assisted in communicating with employees with regard to the manner in which they exercise their rights to organize and bargain collectively under the National Labor Relations Act.	
11.b. Period during which performed: 10/31/2016	11.c. Extent performed: Ongoing
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:
Name Jose Agraz	Name
Organization	Organization
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any
Street 4010 Ivey Vista Way	Street
City Oceanside	City
State California ZIP Code + 4 92057	State ZIP Code + 4
12.a. Identify subject groups of employees: Full-time and part-time employees	12.b. Identify subject labor organizations: SEIU