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 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. \$ 15 But 1 18 4 1. File Number: is appur toper, Person Filing 2. Name and mailing address (include ZIP Code): 3. Any other address where records necessary to verify this report are kept: Name Eduardo R Padillace Title Title Organization EPC Consulting Organization : P.O. Box, Bldg., Room No., if any P.O. Box, Bldg., Room No., if any Street 3620 Lomacitas Ln. City Bonita 1、自身性質数体等扩张。 ZIP Code + 4 State California State 4. Date fiscal year ends: 5. Type of person: a. X Individual b. Partnership Corporation d Other (Specify): C. **Nature of Agreement or Arrangement** 6. Full name and address of employer with whom made (include ZIP Code): 7. Date entered into: $\sim 5^{-1}$ / 2^{0} / 2012 Espinoza Name Luis Daniel 8. Name of person(s) through whom made: Organization Marquez Brothers International Inc. Cruz Trade Name, if any El Mexicano 'Name P.O. Box, Bldg., Room No., if any Name Street 179 S 11th Ave City Hanford Name State California ZIP Code + 4 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 14. Signed Treasurer (If other title, see ~(If other title, see instructions) instructions) Other (Specify) Sole Proprietor Title" 1 107 20 C fold that is a card to be suggested. The Committee of the Co Telephone Number Telephone Number 医骶线性神经性病

ing and seeming some

\$P\$27831. 次度机图图12

(Call : 1992

Filer:		File Number C-
	•	

- 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.):

 conducted employee meetings to informed the of their rights under the National Labor Relations Board Section 7

