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.

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1. File Number: c- 68 645						
<i>♥8 (81.)</i>				-		
Person Filing						
Name and mailing address (include ZIP Code):		Any other address where records necessary to verify this report are kept:				
Name Linda Broderick		Name				
Title		Title				
Organization Linda Inez Consulting, LLC		Organization				
P.O. Box, Bldg., Room No., if any Suite 200		P.O. Box, Bldg., Room No., if any				
Street 460 King Street		Street				
City Charleston		City				
ate South Carolina ZIP Code + 4 29403		State		ZIP Code + 4		
4. Date fiscal year ends: 5. Type of person:						
Dec / 18 a. Individual b. Partnership c. Corporation d. Other (Specify): Single Member LLC						
Nature of Agreement or Arrangement						
6. Full name and address of employer with whom made (include ZIP Code):		7. Date entered into:				
Name Michael Freiman		, , , , , , , , , , , , , , , , , , , ,				
Organization DaVita, Inc.		8. Name of person(s) through whom made:				
Trade Name, if any		Name Peter List				
P.O. Box, Bldg., Room No., if any		Name				
Street 15271 Laguna Canyon Road		Name				
City Irvine		Name				
State California ZIP Code + 4	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.)						
Title Ti		14. Signed			Treasurer (If other title, see	
		Title			instructions)	
On 7/6/2019 860-559-8368 Telephone Number		On		Telephone Number		
Date releptione number				receptions Number		

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Filer: Linda Broderick Linda Inez Consulting, LLC	File Number C-		
9. Check the appropriate box to indicate whether an object of the activities undert			
a. It is persuade employees to exercise or not to exercise, or persuade em collectively through representatives of their own choosing.	ployees as to the manner of exercising, the right to organize and bargain		
	ployees or a labor organization in connection with a labor dispute involving nadministrative or arbitral proceeding or a criminal or civil judicial proceeding.		
10. Terms and conditions (Explain in detail; see instructions. Written agreements in	must be attached.):		
Oral agreement made with Kulture Consulting, LLC; \$	245. per hour, plus actual and reasonable expenses.		
Specific Activities to be Performed			
11. For each activity, separately list in detail the information required (See instructi	ons):		
a. Nature of activity:			
Traveled to employer; met with employees; provided Labor Relations Act, employees' Section Seven Right election process and collective bargaining; answere	s, as well as information regarding the NLRB		
11.b. Period during which performed:	11.c. Extent performed:		
Various Dates	Ongoing		
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:		

Name

Form LM-20 (2003)

Name

Peter

List