5. Department of Labor Office of Labor-Management Standards Washington, DC 20210

AGREEMENT AND ACTIVITIES REPORT

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

FOR Official (Disp Only RECEIVED MAR 1 5 2017

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)

646747 READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT. 1. File Number: C-Person Filing 2. Name and mailing address (include ZIP Code): 3. Any other address where records necessary to verify this report are kept: Name Name n/a Gus Flores Title Title Organization GNE Consulting Services Organization P.O. Box, Bldg., Room No., if any P.O. Box, Bldg., Room No., if any Street Street 10850 Church St. E102 City Rancho Cucamonga City State California ZIP Code + 4 91730 State ZIP Code + 4 4. Date fiscal year ends: 5. Type of person: Individual b. Partnership c. Corporation d. Other (Specify): Dec Nature of Agreement or Arrangement 6. Full name and address of employer with whom made (include ZIP Code): 7. Date entered into: 1 / 2016 Name Mike Egan 8. Name of person(s) through whom made: Organization CEMEX Name Trade Name, if any Name P.O. Box, Bldg., Room No., if any Name Street 929 Gessner Road, Suite 1900 City Houston Name ZIP Code + 4 State Texas 77024 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.) President **Treasurer** (If other title, see (If other title, see instructions) instructions) President Treasurer Title Title 2/25/2017 909-322-4127 02/25/2017 909-322-4126 Date Telephone Number Date Telephone Number

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	Gus Flores	GNE Consulting Services	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.):				
Verbal agreement with LRI Consulting Services, \$1,500.00 per day plus reasonable travel expenses.				
Specific Activities to be Performed				
11. For each activity, separately list in detail the information required (See instructions):				
a. Nature of activity:				
Engaged to communicate to employees regarding exercising their rights to organize and bargain collectively.				
Collectively.				
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11.b. Period during which performed: various days beginning 11/2/16	11.c. Extent performed: Fully performed			
11.d. Name and address through whom performed:	Additional Name and address through whom performed, if any:			
	Name			
Name	Name			
Organization	Organization			
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any			
Street	Street			
City	City			
State ZIP Code + 4	State ZIP Code + 4			
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:			
Cement Powder Drivers	Teamsters			

Form LM-20 (2003)