U.S. Department of Labor

Office of Labor-Managems, __landards



This report is mandatory under P.L. 86-257 as amended. Failure to comply may

OMB No. 1214

A.	Person Filing						
1	Name and mailing address (in CRUZ & ASSOCIATI 10201 TRADEMARK, RANCHO CUCAMO	ES, INC. #C	2. Any other as	ddress where record	ds necessary to	o verily	this report are kept:
3.	Date fiscal year ends: 12-31-00	4. Type of person: a. individual b.	☐ Partnership c. 0	XCorporation	d. 🗆 Other	(Specif	у):
В.	Nature of Agreement or Ar	rangement .					
5.	Full name and address of emo	cloyer with whom made (include λ	ZIP code): 6.	Date entered into: 07/00	And the second s		
	3220 INDUSTRY SIGNAL HILL, CA 90	0806	7.	Names of persons DAN BUSBE		nmade:	
3.	a. DXTo persuade employer collectively through rest. b. D To supply an employer.	indicate whether an object of the es to exercise or not to exercise, presentatives of their own choos with information concerning the cept information for use solely in	or persuade employees as ing. activities of employees or	to the manner of e	xercising, the r	n with a	labor dispute involv
	ceeding.	•			*		
1.	HOLD EMPLOYEE ANSWER QUESTIC	n in detail; see Part 8-9 of instruct MEETINGS TO INFORM ONS PERTAINING TO TO QUESTION AND ANSV	A THEM OF THEIR HE UNIONS, USING				

C. Specific Activities to be Performed

10. For each activity, separately list in detail the information required (See Part C-10 of instructions):

a. Nature of activity:

HELD EMPLOYEE MEETINGS IN SMALL GROUPS TO INFORM THEM ON UNIONS.

b. Period during which performed

Extent performed.

ON GOING

HELD MEETINGS WITH EMPLOYEES

Names and addresses of persons through whom performed:

JACK BERMUDEZ

11 Identify (a) Subject employees, groups of employees, and (b) labor organizations:

SERVICE EMPLOYEES INTERNATIONAL UNION (SEIU)

USDOL/ESA OLMS/DOE/SRD

SFP 2 2 2000

D. Verification and Signature. The person in item 1 above and each of his undersigned authorized officers declares, under penalty of law, that all information in this report, including all attachments incorporated therein or referred to in this report, has been examined by him and is, to the best of his knowledge and belief, true, correct, and complete.

Sign	lyse	Cru/	CEO President	Signed:		Treasurer
(11 21	her title, cross out and v	vrite in correct title above.)		(If other title, cross out and write	in correct title above.)	
	City	State	Date	City	State	Date
àt.	RANCHO CUC	AMONGA, CA	on: 8/00	at:		on:

U.S. Department Labor

Office of Labor-Managemer. Landards



This report is mandatory under P.L. 86-257 as amended. Failure to comply may result in criminal prosecution, times and civil penalties as provided by 29 U.S.C. 439, 440. OMB No. 1214-0001 12/31/86

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 1969, as amended (LMRDA). File No. C. 483

A. Person Filling				
1. Name and mailing address CRUZ & ASSOCLA 10201 TRADEMARI RANCHO CUCAM	VIES, INC.	2. Any	other address where records nec	essary to verily this report are kept:
Date fiscal year ends:	Type of person:	1	-	ARTHURIST IN A DECEMBER OF THE PARTY OF THE
12-31-00	a. 🗆 Individus	d b. 🗆 Partnership	c. CXCorporation d.	Other (Specify):
3. Nature of Agreement or	Arrangement			
Full name and address of o	employer with whom made (i	include ZIP code):	6. Date entered into:	
CALIFORNIA O V	ERNIGHT		07/00	
3401 E. HARBO UI PHO ENIX, AZ 850			7. Names of persons throug ROBERT E. HUM	
. Check the appropriate box	to indicate whether an obje-	ct of the activities undertak	en, is directly or indirectly:	
	ryees to exercise or not to ex n representatives of their own		yees as to the manner of exercisi	ng, the right to organize and bargain
				nnection with a labor dispute involv- ding or a criminal or civil judicial pro-
Terms and conditions (Exp	ilain in detail; see Part 8-9 of	finstructions):		
	TIONS PERTAINING OR QUESTION AND		USING NLRB DOCUME	NTS AND UNION
. Specific Activities to be	Performed			
For each activity, separa	tely list in detail the informat	ion required (See Part C-10	of instructions):	
a. Nature of activity:				
HELD EMPLOYI	EE MEETINGS IN SM	IALL GROUPS TO I	NFORM THEM ON UNI	ONS.
b. Period during which po	erformed	c Extent performed:		
ON GOING		HELD MEETIN	GS WITH EMPLOYEES	
d. Names and addresses	af persons through whom p	performed:		
LUPECRU	Z, RICHARD WATE	ERS, BILL MEDRAN	O, BILL LEO PARDI	OEGEIVE
1 Identify (a) Subject emplo	yees, groups of employees,	, and (b) labor organizations	3:	SEP 2 2 2000
INTERNATIO NA	L BRÖTHERHOOD	OF TEAMSTERS (I	RT)	1-21 22 2000

OLMS/DOE/SRD D. Verification and Signature. The person in item 1 above and each of his undersigned authorized officers declares, under penalty of law, that an formation in this report, including all attachments incorporated therein or referred to in this report, has been examined by him and is, to the best of his knowledge and belief, true, correct, and complete.

Sign	Lunge Cruz		C EO President	Signed:		Treasurer
(If o	ther title, cross out and write in corr	ect title above	9.)	(If other title, cross out and write	in correct title above.)	
-	City	State	Date	City	State	Date
àt.	RANCHO CUCAMONO	GA. CA	on: 8/00	at:		on:
				• • • • • • • • • • • • • • • • • • • •		Frant M 20 (6), 1007

FormLM-20 (&b. 1986)

USDOL/ESA

U.S. Departmen of Labor

Office of Labor-Manageme. Jandards



This report is mandatory under P.L. 86-257 as amended. Failure to comply may result in criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 439, 440. OMB No. 1214-000

A.	Person Filling			
1.1	Name and mailing address (include ZIP code): CRUZ & ASSO CIATES, INC. 10201 TRADEMARK, #C RANCHO CUCAMONGA, CA 91730		Any other address where reco	ords necessary to verily this report are kept
3. (Date fiscal year ends: 4. Type of person	n:		
ı	12-31-00 a. □ Individ	fual b. 🗆 Partnersh	nlp c. CXCorporation	d. Other (Specify):
В.	Nature of Agreement or Arrangement			
5 1	Full name and address of employer with whom mad	le (include ZIP code):	6. Date entered int	0:
	BIG SAVERS FOODS		07/00	
	4260 CHARTER STREET		7. Names of person	ns through whom made:
	VERNON, CA 90058		TIM ORTIZ	5. T. B.
1. (Check the appropriate box to indicate whether an o	oject of the activities unde	artaken, is directly or indirectly	y:
i	 a. EXTo persuade employees to exercise or not to collectively through representatives of their 	o exercise, or persuade en own choosing.	nployees as to the manner of	exercising, the right to organize and barga
t	 To supply an employer with information con- ing such employer, except information for us ceeding. 			
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ì. T	Ferms and conditions (Explain in detail; see Part 8-5 HOLD EMPLOYEE MEETINGS TO ANSWER OUESTIONS PERTAININ	INFORM THEM O		
i. T	, ,	INFORM THEM OF		
	HOLD EMPLOYEE MEETINGS TO ANSWER QUESTIONS PERTAININ	INFORM THEM OF		
C. \$	HOLD EMPLOYEE MEETINGS TO ANSWER QUESTIONS PERTAININ DOCUMENTS FOR QUESTION AN	INFORM THEM OF G TO THE UNION D ANSWER,	S, USING NLRB DO	
C. \$	HOLD EMPLOYEE MEETINGS TO ANSWER QUESTIONS PERTAININ DOCUMENTS FOR QUESTION AN	INFORM THEM OF G TO THE UNION D ANSWER,	S, USING NLRB DO	
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0. 1	HOLD EMPLOYEE MEETINGS TO ANSWER QUESTIONS PERTAININ DO CUMENTS FOR QUESTION AN Specific Activities to be Performed For each activity, separately list in detail the information in the second activity:	INFORM THEM OF	S, USING NLRB DO C	CUMENTS AND UNION
0. 1	HOLD EMPLOYEE MEETINGS TO ANSWER QUESTIONS PERTAININ DO CUMENTS FOR QUESTION AN Specific Activities to be Performed. For each activity, separately list in detail the information at the performance of activity:	INFORM THEM OF GOOD THE UNION ANSWER, nation required (See Part of MALL GROUPS To Extent performed)	S, USING NLRB DO C	N UNIONS.
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Signedy Signed: CEO. President Treasurer (If other title, pross out and write) in correct title above.) (If other title, cross out and write in correct title above.) Date Date City State 8/00 RANCHO CUCAMONGA, CA at:

FormLM-20 (feb. 1986)