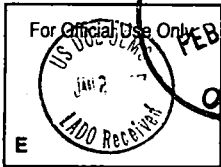


# FORM LM-20

## AGREEMENT AND ACTIVITIES REPORT

Form approved  
Office of Management  
and Budget  
No. 1245-0003  
Expires 07-31-2019



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)

633385

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number:

c- 65548

### Person Filing

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

Name David A. Garcia

Title President

Organization Buena Creek Mgmt Consulting

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

Street 2134 Buena Creek Road

City Vista

State CA ZIP Code + 4 92084

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 / 2012

5. Type of person:

a. ☐ Individual b. ☐ Partnership c. ☐ Corporation d. ☒ Other (Specify): LLC

### Nature of Agreement or Arrangement

6. Full name and address of employer with whom made (include ZIP Code):

Name John R. Gasparian

Organization American Reclamation

Trade Name, if any

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

Street 4560 Doran Street

City Los Angeles

State CA ZIP Code + 4 90039-1006

7. Date entered into:

11 / 01 / 2011

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 [Signature] President  
(If other title, see instructions)  
Title President

14. Signed \_\_\_\_\_ Treasurer  
(If other title, see instructions)  
Title Treasurer

On 01-13-2017 (714) 476-3907  
Date Telephone Number

On \_\_\_\_\_  
Date Telephone Number

Filer:

Buena Creek Mgmt Consulting LLC

File Number C-

65548

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 made in November 2011, with understanding that payment for services to be made in installments.

## Specific Activities to be Performed

11. For each activity, separately list in detail the information required (See instructions):

a. Nature of activity:

- ① box 9 a: RC election pending NLRB charges, direct contact with employees, produce written materials.
- ② box 9 b: assist with spanish translations at employee declarations made in response to NLRB litigation.

11.b. Period during which performed:

Jan - Sept 2012

11.c. Extent performed:

RC petition blocked

11.d. Name and address through whom performed:

Name David A Garcia

Organization Buena Creek Mgmt Consulting

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

Street 2134 Buena Creek Road

City Vista

State CA ZIP Code + 4 92084

Additional Name and address through whom performed, if any:

Name 020817

Organization

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

Street

City

State ZIP Code + 4

12.a. Identify subject groups of employees:

sorters, drivers, maintenance employees

12.b. Identify subject labor organizations:

IBT Local 396