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

Treasurer

instructions)

(If other title, see



This report is mandatory under P.L. 86-257, as amended. Faiture to compty 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.

416430H

true, correct, and complete. (See Section VII on penalties in the instructions.)

909-980-8736

(Specify)

President

instructions)

(If other title, see

13. Signed

Title

On

Other

10/13/2011

CEO

| 1. File Number: C- 00483 | | | | | |
|--|--|---|--|--|--|
| | | | | | |
| Person Filing | | | | | |
| 2. Name and mailing address (include ZIP Code): | | Any other address where records necessary to verify this report are kept: | | | |
| Name Lupe Cruz | | Name | | | |
| Title CEO | | Title | | | |
| Organization Cruz & Associates, Inc. | | Organization | | | |
| P.O. Box, Bldg., Room No., if any p.O. Box 1831 | | P.O. Box, Bldg., Room No., if any | | | |
| Street | | Street | | | |
| City Upland | | City | | | |
| State California ZIP Code + 4 91785 | | State ZIP Code + 4 | | | |
| 4. Date fiscal year ends: 5. Type of person: | | | | | |
| Dec / 11 a. Individual b. Partnership c. Corporation d. Other (Specify): | | | | | |
| | | | | | |
| Nature of Agreement or Arrangement | | | | | |
| 6. Full name and address of employer with whom made (include ZIP Code): | | 7. Date entered into: 9 / 19 / 2011 | | | |
| Name Venishia Price | | , | | | |
| Organization Joe's Auto Parts, Inc. | | 8. Name of person(s) through whom made: | | | |
| Trade Name, if any | | Name Lupe Cruz | | | |
| P.O. Box, Bldg., Room No., if any | | Name | | | |
| Street 845 Figueroa Street, Suite 500 | | Name | | | |
| City Los Angeles | | Name | | | |
| State California ZIP Code + 4 90017 | | 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, | | | | | |

14. Signed

Title

On

Treasurer

Filer: Lupe Cruz Cruz & Associates, Inc. File Number C- 00483

- 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.):

 Held employee meetings to inform them of their section (7) rights and to answer questions pertaining to the union using NLRB documents and union documents for questions and answers.

Specific Activities to be Performed

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

Held meetings in small groups to inform them on unions

| 11.b. Period during which performed: | 11.c. Extent performed: | | |
|---|---|--|--|
| On-going | Held meetings with employees | | |
| 11.d. Name and address through whom performed: | Additional Name and address through whom performed, if any: | | |
| Name Juan Cruz | Name Luis Camarena | | |
| Organization Reconnect Labor Relation Consultants | Organization LKLS Consulting | | |
| P.O. Box, Bldg., Room No., if any | P.O. Box, Bldg., Room No., if any | | |
| Street 12831 Moreno Beach Drive, Suite 133 | Street 1975 Alderbrook Pl | | |
| City Moreno Valley | City Chula Vista | | |
| State California ZIP Code + 4 92558 | State California ZIP Code + 4 91913 | | |
| 12.a. Identify subject groups of employees: | 12.b. Identify subject labor organizations: | | |
| Employees in potential bargaining unit | Teamsters Local 911 | | |
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| Filer: Lupe Cruz Cruz & Associates, Inc. | | File Number C- 00483 | | |
|---|---|----------------------|--|--|
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| | | | | |
| | | | | |
| 11.b. Period during which performed: | 11.c. Extent performed: | | | |
| On-going | Held meetings with employees | | | |
| 11.d. Name and address through whom performed: | Additional Name and address through whom performed, if any: | | | |
| Name Ruth G Jenkins | Name | | | |
| Organization | Organization | | | |
| P.O. Box, Bldg., Room No., if any | P.O. Box, Bldg., Room No., if any | | | |
| Street 16020 Elbert Cir | Street | | | |
| City Fountain Valley | City | | | |
| State California ZIP Code + 4 92708 | State | ZIP Code + 4 | | |
| 12.a. Identify subject groups of employees: | 12.b. Identify subject labor organizations: | | | |
| Employees in potential bargaining unit | Teamsters Local 911 | | | |
| | | | | |

and .