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. 1. File Number: C- 00483 Person Filing 3. Any other address where records necessary to verify this report are kept: 2. Name and mailing address (include ZIP Code): Name Name Title Title Organization Organization Cruz & Associates, Inc. P.O. Box, Bldg., Room No., if any PO BOX 1831 P.O. Box, Bldg., Room No., if any Street Street City City Upland State California ZIP Code + 4 91785 State ZIP Code + 4 5. Type of person: 4. Date fiscal year ends: c. Corporation d. Other (Specify): Dec Individual b. Partnership **Nature of Agreement or Arrangement** 6. Full name and address of employer with whom made (include ZIP Code): 7. Date entered into: 2012 17 Name Alan Bagley 8. Name of person(s) through whom made: Organization Northgate Markets Chula Vista Name Trade Name, if any Name P.O. Box, Bldg., Room No., if any Name Street 1058 3rd Ave City Chula Vista Name ZIP Code + 4 State California 91911 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 14. Signed 13. Signed Treasurer (If other title, see (If other title, see instructions) instructions) resident Treasurer Title June 11,2012 9099808736 Telephone Number Telephone Number Date Date

Filer: 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.):	
Paid Hourly, Expenses Reimbursed.	
Specific Activities to be Performed	
11. For each activity, separately list in detail the information required (See instructions):	
a. Nature of activity:	
Meet with Managers, Supervisors and employees to explain the NLRB election process and collective bargaining while refraining from saying anything that might tend to suggest or persuade employees the manner in which they might exercise thier rights.	
11.b. Period during which performed:	11.c. Extent performed: ongoing
May 17, 2012 to present	Additional Name and address through whom performed, if any:
11.d. Name and address through whom performed: Name Lupe Cruz	Name Elizabeth Hernandez
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Organization Cruz & Associates	Organization Labor Relations/HR Consultant
P.O. Box, Bldg., Room No., if any PO Box 1831	P.O. Box, Bldg., Room No., if any
Street	Street 2504 Albatross St
City Upland	City San Diego
State California ZIP Code + 4 91785	State California ZIP Code + 4
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:
Managers, supervisors and employees	UFCW