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 08-31-2016



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.

593237	
1. File Number: C- 00597	
Person Filing	
2. Name and mailing address (include ZIP Code):	3. Any other address where records necessary to verify this report are kept:
Name Carlos Restrepo	Name
Title President	Title
Organization Persuasive Communications Incorporated	Organization
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any
Street 1474 West Price Road # 7599	Street
City Brownsville	City
State Texas ZIP Code + 4 78520	State ZIP Code + 4
4. Date fiscal year ends: 5. Type of person:	
Dec 31 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: 6 / 15 / 2014
Name	8. Name of person(s) through whom made:
Organization Abengoa Solar Solana AZ	
Trade Name, if any	Name Byron Arthur
P.O. Box, Bldg., Room No., if any	Name
Street 1250 Simms Street	Name
City Lakewood	Name
State Colorado ZIP Code + 4 80401	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 President	14. Signed Treasurer
(If other title, see	(If other title, see instructions)
Title President	Title Treasurer
on 430 15 30 0 847 0389	On
Date Telephone Number	Date Telephone Number

Tiel: Callos Nestrepo I elsuasive Confindinations incorporated		
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.): Inform and educate employees, managers and supervisors regarding their rights duties and responsibilities under National Labor Relations		
Act and National Labor relations Board procedures		
Specific Activities to be Performed		
11. For each activity, separately list in detail the information required (See instruct	ions):	
a. Nature of activity:	core	
Conducted group and indivdiual meetings with employees and mana	yers	
11.b. Period during which performed:	11.c. Extent performed: Completed	
6/15/2014-6/30/2014	Additional Name and address through whom performed, if any:	
11.d. Name and address through whom performed:	Nacellaa	
Name Carlos Restrepo		
Organization Persuasive Communications Inc.	Organization Employee Relations Group	
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No., if any	
Street 1474 West Price Road # 7599	Street 322 Culver Boulevard # 146	
City Brownsville	City Pl;aya del Rey	
State Texas ZIP Code + 4 78520	State California ZIP Code + 4 91729	
12.a. Identify subject groups of employees:	12.b. Identify subject labor organizations:	
All Employees	IBEW 387	