



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. 1214-0001
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 1959, as amended (LMRDA)

File No.	C. 483
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A. Person Filing

1. Name and mailing address (include ZIP code): CRUZ & ASSOCIATES, INC. 10201 TRADEMARK, #C RANCHO CUCAMONGA, CA 91730		2. Any other address where records necessary to verify this report are kept:	
3. Date fiscal year ends: 12-31-00	4. Type of person: a. <input type="checkbox"/> Individual b. <input type="checkbox"/> Partnership c. <input checked="" type="checkbox"/> Corporation d. <input type="checkbox"/> Other (Specify):		

B. Nature of Agreement or Arrangement

5. Full name and address of employer with whom made (include ZIP code): AKIN'S POST ACUTE 3220 INDUSTRY SIGNAL HILL, CA 90806		6. Date entered into: 07/00
		7. Names of persons through whom made: DAN BUSBEE
8. Check the appropriate box to indicate whether an object of the activities undertaken, is directly or indirectly: a. <input checked="" type="checkbox"/> 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. <input type="checkbox"/> 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.		

9. Terms and conditions (Explain in detail; see Part B-9 of instructions):

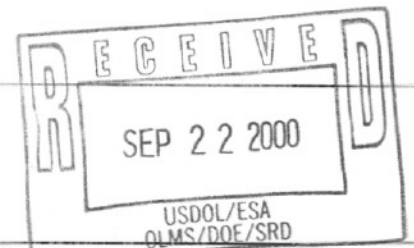
HOLD EMPLOYEE MEETINGS TO INFORM THEM OF THEIR SECTION (7) RIGHTS AND TO ANSWER QUESTIONS PERTAINING TO THE UNIONS, USING NLRB DOCUMENTS AND UNION DOCUMENTS FOR QUESTION AND ANSWER.

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: ON GOING	c. Extent performed: HELD MEETINGS WITH EMPLOYEES	
d. 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)



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.

Signed: <i>Jose Cruz</i> (If other title, cross out and write in correct title above.) City State Date at: RANCHO CUCAMONGA, CA on 8/00	CEO President Signed: (If other title, cross out and write in correct title above.) City State Date on:
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A. Person Filing

1. Name and mailing address (include ZIP code): CRUZ & ASSOCIATES, INC. 10201 TRADEMARK, #C RANCHO CUCAMONGA, CA 91730	2. Any other address where records necessary to verify this report are kept:
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3. Date fiscal year ends: 12-31-00	4. Type of person: a. <input type="checkbox"/> Individual b. <input type="checkbox"/> Partnership c. <input checked="" type="checkbox"/> Corporation d. <input type="checkbox"/> Other (Specify):
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B. Nature of Agreement or Arrangement

5. Full name and address of employer with whom made (include ZIP code): CALIFORNIA OVERNIGHT 3401 E. HARBOUR DRIVE PHOENIX, AZ 85034	6. Date entered into: 07/00
	7. Names of persons through whom made: ROBERTE HUMPHRYE, JR.

8. 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.

9. Terms and conditions (Explain in detail, see Part B-9 of instructions):

HOLD EMPLOYEE MEETINGS TO INFORM THEM OF THEIR SECTION (7) RIGHTS AND TO ANSWER QUESTIONS PERTAINING TO THE UNIONS, USING NLRB DOCUMENTS AND UNION DOCUMENTS FOR QUESTION AND ANSWER.

C. Specific Activities to be Performed

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

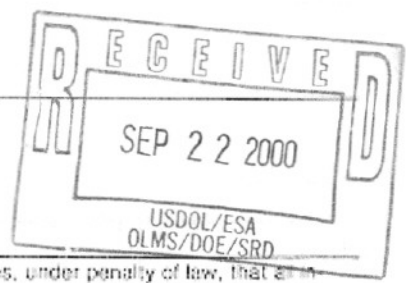
a. Nature of activity:
HELD EMPLOYEE MEETINGS IN SMALL GROUPS TO INFORM THEM ON UNIONS.

b. Period during which performed: ON GOING	c. Extent performed: HELD MEETINGS WITH EMPLOYEES
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d. Names and addresses of persons through whom performed:
LUPE CRUZ, RICHARD WATERS, BILL MEDRANO, BILL LEO PARDI

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

INTERNATIONAL BROTHERHOOD OF TEAMSTERS (IBT)



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.

Signed: <i>Lupe Cruz</i> (If other title, cross out and write in correct title above.) City: RANCHO CUCAMONGA, CA State: CA Date: 8/00	CEO President	Signed: _____ (If other title, cross out and write in correct title above.) City: _____ State: _____ Date: _____	Treasurer
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File No.	C. 483
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A. Person Filing

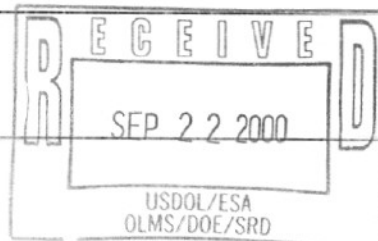
1. Name and mailing address (include ZIP code): CRUZ & ASSOCIATES, INC. 10201 TRADEMARK, #C RANCHO CUCAMONGA, CA 91730		2. Any other address where records necessary to verify this report are kept:	
3. Date fiscal year ends: 12-31-00	4. Type of person: a. <input type="checkbox"/> Individual b. <input type="checkbox"/> Partnership c. <input checked="" type="checkbox"/> Corporation d. <input type="checkbox"/> Other (Specify):		

B. Nature of Agreement or Arrangement

5. Full name and address of employer with whom made (include ZIP code): BIG SAVERS FOODS 4260 CHARTER STREET VERNON, CA 90058		6. Date entered into: 07/00
		7. Names of persons through whom made: TIM ORTIZ
8. Check the appropriate box to indicate whether an object of the activities undertaken, is directly or indirectly: a. <input checked="" type="checkbox"/> 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. <input type="checkbox"/> 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.		
9. Terms and conditions (Explain in detail; see Part B-9 of instructions): HOLD EMPLOYEE MEETINGS TO INFORM THEM OF THEIR SECTION (7) RIGHTS AND TO ANSWER QUESTIONS PERTAINING TO THE UNIONS, USING NLRB DOCUMENTS AND UNION DOCUMENTS FOR QUESTION AND ANSWER.		

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: ON GOING	c. Extent performed: HELD MEETINGS WITH EMPLOYEES	
d. Names and addresses of persons through whom performed: LUPE CRUZ, JUDY CASTILLO		



11. Identify (a) Subject employees, groups of employees, and (b) labor organizations: UNITED FOOD AND COMMERCIAL WORKERS (UFCW)
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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.

Signed: <i>Lupe Cruz</i> (If other title, cross out and write in correct title above.) City: RANCHO CUCAMONGA, CA State: CA Date: 8/00	CEO President	Signed: _____ (If other title, cross out and write in correct title above.) City: _____ State: _____ Date: _____	Treasurer
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