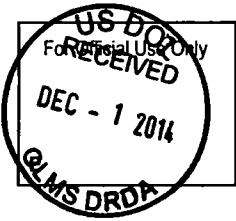


FORM LM-20

AGREEMENT AND ACTIVITIES REPORT



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)

573419

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number: **C- 00483**

Person Filing	
2. Name and mailing address (include ZIP Code): Name Title Organization Cruz & Associates. P.O. Box, Bldg., Room No., if any 1831 Street City Upland State California <input checked="" type="checkbox"/> ZIP Code + 4 91785	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 <input checked="" type="checkbox"/> / 31	5. Type of person: a. Individual b. Partnership c. <input checked="" type="checkbox"/> Corporation d. Other (Specify):

Nature of Agreement or Arrangement	
6. Full name and address of employer with whom made (include ZIP Code): Name John Heilman Organization Conway Irvine Trade Name, if any P.O. Box, Bldg., Room No., if any Street 20697 Prism Pl. City Lake Forest State California <input checked="" type="checkbox"/> ZIP Code + 4 92630	7. Date entered into: 10 / 27 / 2014 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 <u><i>Sepe Cruz</i></u> President (If other title, see instructions) Title <u>Other (Specify) <input checked="" type="checkbox"/></u> CEO	14. Signed _____ Treasurer (If other title, see instructions) Title <u>Treasurer</u>
On <u>11/21/2014</u> <u>909-980-8736</u> Date Telephone Number	On _____ _____ Date Telephone Number

Filer: Cruz & Associates.

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.):

hourly rate plus expenses

Specific Activities to be Performed

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

a. Nature of activity:

Held employee meetings to inform employees of the Section 7 rights and answer questions using NLRB documents.

11.b. Period during which performed:

Ongoing

11.c. Extent performed:

11.d. Name and address through whom performed:

Name Lupe Cruz

Organization Cruz & Associates.

P.O. Box, Bldg., Room No., if any 1831

Street

City Upland

State California ZIP Code + 4 91785

Additional Name and address through whom performed, if any:

Name Erick Cruz

Organization Cruz & Associates.

P.O. Box, Bldg., Room No., if any 1831

Street

City Upland

State California ZIP Code + 4 91785

12.a. Identify subject groups of employees:

12.b. Identify subject labor organizations:

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.):

Specific Activities to be Performed

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

a. Nature of activity:

<p>11.b. Period during which performed:</p> <div style="border: 1px solid black; height: 15px;"></div>	<p>11.c. Extent performed:</p> <div style="border: 1px solid black; height: 15px;"></div>
<p>11.d. Name and address through whom performed:</p> <p>Name <input type="text" value="Bill"/> <input type="checkbox"/> <input type="text" value="Michealis"/></p> <p>Organization <input type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input type="text"/></p> <p>Street <input type="text" value="6930 Parsons Trail"/></p> <p>City <input type="text" value="Tujunga"/></p> <p>State <input type="text" value="California"/> <input type="checkbox"/> ZIP Code + 4 <input type="text" value="91042"/></p>	<p>Additional Name and address through whom performed, if any:</p> <p>Name <input type="text" value="Gabrielle"/> <input type="checkbox"/> <input type="text" value="Mattes"/></p> <p>Organization <input type="text"/></p> <p>P.O. Box, Bldg., Room No., if any <input type="text"/></p> <p>Street <input type="text" value="16020 Elbert Circle."/></p> <p>City <input type="text" value="Fountain Valley"/></p> <p>State <input type="text" value="California"/> <input type="checkbox"/> ZIP Code + 4 <input type="text" value="92708"/></p>

<p>12.a. Identify subject groups of employees:</p> <div style="border: 1px solid black; height: 150px;"></div>	<p>12.b. Identify subject labor organizations:</p> <div style="border: 1px solid black; height: 150px;"></div>
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