



1875 Century Park East, Suite 1000  
Los Angeles, California 90067  
310.556.4811 Main | 310.943.0396 Fax

SAIRAH BUDHWANI  
310.929.5455 Direct  
Sairah.Budhwani@capstonelawyers.com

---

February 5, 2025

VIA ONLINE SUBMISSION

California Labor & Workforce Development Agency  
ATTN: PAGA Administrator  
(<https://dir.govfa.net/310>)

Subject: *Kathy Koras v. Presents Temp Services, LLC, et al.*  
*LWDA Case No. LWDA-CM-1077938-25 - AMENDED NOTICE*

Dear PAGA Administrator:

This office represents Kathy Koras in connection with her claims under the California Labor Code. Ms. Koras was an employee of PRESENTS TEMP SERVICES, LLC; AEG PRESENTS LLC; ANSCHUTZ ENTERTAINMENT GROUP, INC.; GOLDENVOICE, LLC; and/or NEW C.A.P.S, LLC. For the purpose of this letter, Ms. Koras collectively refers to these entities as “AEG.”

We previously provided notice of Ms. Koras’ claims to the California Labor and Workforce Development Agency (“LWDA”) on February 4, 2025, and submitted the applicable filing fee pursuant to Labor Code section 2699.3(a)(1)(B). This amended notice supplements Ms. Koras’ prior LWDA notice and adds an additional claim.

The employers may be contacted directly at the addresses below:

PRESENTS TEMP SERVICES, LLC  
425 W. 11TH ST.  
LOS ANGELES, CA 90015

AEG PRESENTS LLC  
800 W. OLYMPIC BLVD, STE. 305  
LOS ANGELES, CA 90015

ANSCHUTZ ENTERTAINMENT GROUP, INC.  
800 W. OLYMPIC BLVD, STE. 305  
LOS ANGELES, CA 90015

GOLDENVOICE, LLC  
800 W. OLYMPIC BLVD, STE. 305  
LOS ANGELES, CA 90015

NEW C.A.P.S, LLC  
2300 W. EMPIRE AVE, FLOOR 5  
BURBANK, CA 91504

Ms. Koras intends to seek civil penalties, attorneys’ fees, costs, and other available relief for violations of the California Labor Code, which are recoverable under sections 2698, *et seq.*, the Labor Code Private Attorneys General Act of 2004 (“PAGA”). Ms. Koras seeks relief on behalf of

herself, the State of California, and other persons who are or were employed by AEG as a non-exempt, hourly paid employee in California and who received at least one wage statement (“aggrieved employees”). This letter is sent in compliance with the notice and reporting requirements of California Labor Code section 2699.3.

AEG employed Ms. Koras as an hourly paid, non-exempt employee from approximately September 2023 to April 2024. Ms. Koras worked for AEG as a Stagehand at various music festival venues throughout California. During her employment, Ms. Koras typically worked six (6) to twelve (12) hours or more hours per day, for a varied number of days per week. By the end of her employment, Ms. Koras was compensated approximately \$23.00 per hour. Her job duties included, without limitation, building and taking down stages, lighting, sound equipment, and decorations at concerts and other performances.

AEG committed each of the following Labor Code violations against Ms. Koras, the facts and theories of which follow, making her an “aggrieved employee” pursuant to California Labor Code section 2699(c)(1):<sup>1</sup>

### **Violation of California Labor Code §§ 6401 and 6403 – Failure to Provide Safety Devices and Safeguards**

California Labor Code section 6401 provides that employers must furnish and use safety devices and safeguards, and adopt and use practices, means, methods, operations, and processes which are reasonably adequate to render the employment and place of employment safe and healthy. California Labor Code Section 6401 further provides that an employer must do everything reasonably necessary to protect the life, safety and health of its employees. California Labor Code section 6403(a) requires that employers provide and use safety devices and safeguards reasonably adequate to render the employment and place of employment safe.

During the relevant period, AEG failed to provide Ms. Koras and other aggrieved employees with personal protective equipment, such as steel-toed safety boots, hard hats, and reflective vests, to keep them safe in the workplace. Despite the fact that AEG required Ms. Koras and other aggrieved employees to wear certain personal protective equipment, including steel-toed safety boots, hard hats, and reflective vests, while engaged in their work-related duties, AEG failed to provide such reasonably necessary equipment to Ms. Koras and other aggrieved employees to keep them safe.

AEG’s failure to provide Ms. Koras and other aggrieved employees with safety devices and safeguards for the workplace violates Labor Code sections 6401 and 6403. Ms. Koras and other aggrieved employees are entitled to recover civil penalties, attorneys’ fees, costs, and interest thereon, and seek injunctive relief to bring AEG into compliance with Labor Code sections 6401 and 6403, pursuant to Labor Code sections 2699(a), (f), and (k).

---

<sup>1</sup> These facts, theories, and claims are based on Ms. Koras’ experience and counsel’s review of those records currently available relating to Ms. Koras’ employment. Discovery conducted in litigation of wage and hour claims such as these often reveals additional claims that the aggrieved employee was not initially aware of (because the aggrieved employee was not aware of the law’s requirements, the employer misinformed its employee of the law’s requirements, or because the employer effectively hid the violations). Thus, Ms. Koras reserves the right to supplement this letter with additional facts, theories, and claims if she becomes aware of them subsequent to the submission of this letter.

Accordingly, pursuant to PAGA, and in particular California Labor Code sections 1194.5, 2699(a), 2699(k), 2699.3(a)-(c), and 2699.5, Ms. Koras, acting in the public interest as a private attorney general, seeks assessment and collection of civil penalties and injunctive relief for herself, all other aggrieved employees, and the State of California against AEG for violations of California Labor Code sections 6401 and 6403.

Thank you for your attention to this matter. If you have any questions, please contact me at the phone number or address below:

Sairah Budhwani  
Capstone Law APC  
1875 Century Park East, Suite 1000  
Los Angeles, CA 90067  
(310) 556-4811

Best Regards,

A handwritten signature in black ink, reading "Sairah Budhwani". The signature is fluid and cursive, with a small dot at the end.

Sairah Budhwani

Copy: PRESENTS TEMP SERVICES, LLC (via U.S. Certified Mail); AEG PRESENTS LLC (via U.S. Certified Mail); ANSCHUTZ ENTERTAINMENT GROUP, INC. (via U.S. Certified Mail); GOLDENVOICE, LLC (via U.S. Certified Mail); NEW C.A.P.S, LLC (via U.S. Certified Mail)

CAPSTONE LAW, APC  
1875 Century Park East  
Suite #1000  
Los Angeles, CA 90067

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

Complete items 1, 2, and 3.  
Print your name and address on the reverse

PRESENTS TEMP SERVICES, LLC  
425 W. 11<sup>th</sup> Street  
Los Angeles, CA 90015

9590 9402 7420 2055 5429 69

2. Article Number (Transfer from service label)  
7021 1970 0001 9028 3190

PS Form 3811, July 2020 PSN 7530-02-000-9053

A. Signature  
X

B. Received by (Printed Name)  
C. Date of Delivery

D. Is delivery address different from item 1?  
If YES, enter delivery address below: Yes No

3. Service Type  
Priority Mail Express®  
Registered Mail™  
Adult Signature Restricted Delivery  
Certified Mail®  
Certified Mail Restricted Delivery  
Collect on Delivery  
Collect on Delivery Restricted Delivery  
Restricted Delivery

Domestic Return Receipt

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

PRESENTS TEMP  
SERVICES, LLC  
425 W. 11<sup>th</sup> Street  
Los Angeles, CA 90015

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE.

CERTIFIED MAIL®

7021 1970 0001 9028 3190  
7021 1970 0001 9028 3190

U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT  
Domestic Mail Only  
For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

OFFICIAL USE

Certified Mail Fee  
Extra Services & Fees (check box, add fees as appropriate)  
Return Receipt (hardcopy)  
Return Receipt (electronic)  
Certified Mail  
Adult Sig  
Adult Sig  
Postage  
Total Postage  
Sent To  
Street and  
City, State

Korav v.  
Present Temp.  
Postmark

PRESENTS TEMP  
SERVICES, LLC  
425 W. 11<sup>th</sup> Street  
Los Angeles, CA 90015

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

CAPSTONE LAW, APC  
1875 Century Park East  
Suite #1000  
Los Angeles, CA 90067

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3.

Print your name and address on the reverse

AEG PRESENTS LLC

800 W. Olympic Blvd.

Ste. #305

Los Angeles, CA 90015

Signature

Agent

Addresssee

Received by (Printed Name)

Date of Delivery

Is delivery address different from item 1?

Yes

No

if YES, enter delivery address below:

3. Service Type

Priority Mail Express®

Registered Mail™

Registered Mail Restricted Delivery

Certified Mail®

Certified Mail Restricted Delivery

Collect on Delivery

Restricted Delivery

Adult Signature

Adult Signature Restricted Delivery

Certified Mail®

Certified Mail Restricted Delivery

Signature Confirmation™

Signature Confirmation Restricted Delivery

9590 9402 7420 2055 5429 76

7021 1970 0001 9028 3206

2. Article Number (Transfer from service label)

7021 1970 0001 9028 3206

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

AEG PRESENTS LLC  
800 W. Olympic Blvd.  
Ste. #305  
Los Angeles, CA 90015

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE.

CERTIFIED MAIL®

7021 1970 0001 9028 3206

7021 1970 0001 9028 3206

U.S. Postal Service™

CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

OFFICIAL USE

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy)

Return Receipt (electronic)

Certified by

Adult Sign

Adult Sign

Postage

Total Postage

Sent To

Street and A

City, State, ZIP

Postmark

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

**ANSCHUTZ  
ENTERTAINMENT  
GROUP, INC.**  
800 W. Olympic Blvd.  
Ste. #305  
Los Angeles, CA 90015

|                                                                                                  |                                            |
|--------------------------------------------------------------------------------------------------|--------------------------------------------|
| <b>U.S. Postal Service™</b><br><b>CERTIFIED MAIL® RECEIPT</b><br><i>Domestic Mail Only</i>       |                                            |
| For delivery information, visit our website at <a href="http://www.usps.com">www.usps.com</a> ®. |                                            |
| <b>OFFICIAL USE</b>                                                                              |                                            |
| Certified Mail Fee<br>\$ _____                                                                   | 10023 v.<br><i>Present Tem</i><br>Postmark |
| Extra Services & Fees (check box, add fee as appropriate)                                        |                                            |
| <input checked="" type="checkbox"/> Return Receipt (hardcopy)                                    | \$ _____                                   |
| <input type="checkbox"/> Return Receipt (electronic)                                             | \$ _____                                   |
| <input type="checkbox"/> Certified I                                                             |                                            |
| <input type="checkbox"/> Adult Sign                                                              |                                            |
| <input type="checkbox"/> Adult Sign                                                              |                                            |
| Postage<br>\$ _____<br><b>Total Postage</b><br>\$ _____<br>Sent To<br>Street and<br>City, State, |                                            |

**CAPSTONE LAW, APC**  
1875 Century Park East  
Suite #1000  
Los Angeles, CA 90067

| SENDER: COMPLETE THIS SECTION                                                                                               |  | COMPLETE THIS SECTION ON DELIVERY                                                                                                                                                                                                                                                                                                                                 |  |
|-----------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <input type="checkbox"/> Complete items 1, 2, and 3.<br><input type="checkbox"/> Print your name and address on the reverse |  | <b>1. Signature</b><br><div><input checked="" type="checkbox"/> Agent<br/><input type="checkbox"/> Addressee</div>                                                                                                                                                                                                                                                |  |
| <b>GOLDENVOICE, LLC</b><br>800 W. Olympic Blvd.<br>Ste. #305<br>Los Angeles, CA 90015                                       |  | <b>B. Received by (Printed Name)</b><br>C. Date of Delivery                                                                                                                                                                                                                                                                                                       |  |
| <b>2. Article Number (Transfer from service label)</b><br>9590 9402 7420 2055 5430 03<br>7021 1970 0001 9028 3220           |  | <b>3. Service Type</b><br><input type="checkbox"/> Adult Signature<br><input type="checkbox"/> Adult Signature Restricted Delivery<br><input checked="" type="checkbox"/> Certified Mail®<br><input type="checkbox"/> Collect on Delivery<br><input type="checkbox"/> Collect on Delivery Restricted Delivery<br><input type="checkbox"/> all Restricted Delivery |  |
| <b>PS Form 3811, July 2020 PSN 7530-02-000-9053</b>                                                                         |  | <b>Domestic Return Receipt</b>                                                                                                                                                                                                                                                                                                                                    |  |

**4. Signature**  
☒ Agent  
☐ Addressee

**B. Received by (Printed Name)**  
C. Date of Delivery

**D. Is delivery address different from item 1? ☐ Yes ☐ No**  
If YES, enter delivery address below:

**5. Service Type**  
☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☒ Certified Mail®  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ all Restricted Delivery

**GOLDENVOICE, LLC**  
800 W. Olympic Blvd.  
Ste. #305  
Los Angeles, CA 90015

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE.

**CERTIFIED MAIL®**

7021 1970 0001 9028 3220  
7021 1970 0001 9028 3220

**U.S. Postal Service™  
CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

**OFFICIAL USE**

Certified Mail Fee  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy)  
☐ Return Receipt (electronic)  
☐ Certify  
☐ Adult S  
☐ Adult S

Postage  
Total Pos  
Sent To  
Street and  
City, State

**GOLDENVOICE, LLC**  
800 W. Olympic Blvd.  
Ste. #305  
Los Angeles, CA 90015

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

**Postmark**  
Koraz v.  
Present Temp

CAPSTONE LAW, APC  
1875 Century Park East  
Suite #1000  
Los Angeles, CA 90067

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

Complete items 1, 2, and 3.

Print your name and address on the reverse

NEW C.A.P.S, LLC

2300 W. Empire Avenue

Floor 5

Burbank, CA 91504

Signature

Received by (Printed Name)

C. Date of Delivery

Is delivery address different from item 1? ☐ Yes ☐ No

If YES, enter delivery address below:

3. Service Type

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☒ Certified Mail®

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

☐ Adult Signature

☐ Adult Signature Restricted Delivery

☐ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

2. Article Number (Transfer from service label)

7021 1970 0001 9028 3237

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

NEW C.A.P.S, LLC  
2300 W. Empire Avenue  
Floor 5  
Burbank, CA 91504

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE.

CERTIFIED MAIL®

7021 1970 0001 9028 3237

7021 1970 0001 9028 3237

U.S. Postal Service™

CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)®.

OFFICIAL USE

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy)

☐ Return Receipt (electronic)

☐ Certified Mail

☐ Adult Sign

☐ Adult Sign

Postage

Total Postage

Sent To

Street and

City, State,

Postmark

NEW C.A.P.S, LLC

2300 W. Empire Avenue

Floor 5

Burbank, CA 91504

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions