

**LAVI & EBRAHIMIAN, LLP**  
8889 W. OLYMPIC BLVD., SUITE 200  
BEVERLY HILLS, CALIFORNIA 90211  
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WWW.LELAWFIRM.COM

June 29, 2026

**NOTICE OF LABOR CODE VIOLATIONS PURSUANT TO  
LABOR CODE SECTION 2699.3**

To: California Labor and Workforce Development Agency  
Attn. PAGA Administrator  
1515 Clay Street, Suite 801  
Oakland, California 94612  
*Via Online Submission Only*

|                                                                                                                                                                                                                                     |                                                                                                                                                                                               |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b><u>WAL-MART ASSOCIATES, INC.</u></b><br>Registered Agent for Process of Service<br>c/o C T Corporation System<br>330 N Brand Blvd., Suite 700<br>Glendale, California 91203<br><b>Certified No.: 9589 0710 5270 4047 1969 90</b> | <b><u>WAL-MART ASSOCIATES, INC.</u></b><br>Attention: Legal Department<br>702 S.W. 8 <sup>th</sup> Street<br>Bentonville, Arkansas 72716<br><b>Certified No.: 9589 0710 5270 4047 1969 83</b> |
| <b><u>WAL-MART ASSOCIATES, INC.</u></b><br>Attention: Legal Department<br>1 Customer Drive<br>Bentonville, Arkansas 72716<br><b>Certified No.: 9589 0710 5270 4047 1970 10</b>                                                      | <b><u>WAL-MART ASSOCIATES, INC.</u></b><br>Attention: Legal Department<br>10655 Folsom Blvd.<br>Rancho Cordova, California 95670<br><b>Certified No.: 9589 0710 5270 4047 1970 03</b>         |

From: CITLALLY S. ROSALES, on behalf of herself and all other current and former aggrieved California-based hourly non-exempt employees of WAL-MART ASSOCIATES, INC.

c/o Joseph Lavi, Esq.  
Vincent C. Granberry, Esq.  
Jeffrey D. Klein, Esq.  
Michael L. Huggins, Esq.  
**LAVI & EBRAHIMIAN, LLP**  
8889 W. Olympic Boulevard, Suite 200  
Beverly Hills, California 90211  
Email: jlavi@lelawfirm.com  
vgranberry@lelawfirm.com  
jklein@lelawfirm.com  
mhuggins@lelawfirm.com

Our firm has been retained by aggrieved employee CITLALLY S. ROSALES concerning a representative action pursuant to the Private Attorneys General Act of 2004, Labor Code sections 2698, *et seq.* ("PAGA") against her employers, WAL-MART ASSOCIATES, INC.

We are filing this written notice with the Labor and Workforce Development Agency (“LWDA”) pursuant to the provisions of the California Labor Code Sections 2699, 2699.3, and 2698, *et seq.* The purpose of this letter is to inquire whether LWDA intends to investigate and seek civil penalties associated with my client’s allegations of violations of the Labor Code by her Employer. In addition to submitting this letter and the \$75.00 filing fee via the online PAGA filing system, I am causing a copy of this letter to be mailed to the Department of Industrial Relations – Accounting Unit.

### **FACTUAL STATEMENT AND THEORIES OF LABOR CODE VIOLATIONS**

Aggrieved employee CITLALLY S. ROSALES (“Plaintiff” or “Employee”) was employed by WAL-MART ASSOCIATES, INC. (“Defendants” or “Employers”) as an hourly non-exempt employee from on or around February 22, 2024, until on or around May 22, 2026. Plaintiff believes Defendant(s) employed more than one hundred (100) employees in total during the period covered by this notice, and Labor Code section 2999.3(c)(2) does not apply.

1. *Failure to Authorize and Permit All Legally Required and Legally Compliant Lactation Accommodation Breaks and/or Failure to Pay Lactation Accommodation Premiums in Violation of Labor Code Sections 1030, 1031, and 1033*

Employers often employed non-exempt employees, including the named Employee and other current and former aggrieved California-based hourly non-exempt employees, who desired to express breast milk for the employees’ infant children.

California law requires every employer to provide a reasonable amount of break time to accommodate an employee’s desire to express breast milk for the employee’s infant child each time the employee needs to express milk. California law also requires that an employer provide an employee with a room or location for the employee to express milk in private which shall:

- (a) not be a bathroom, shall be in close proximity to the employee’s work area, shielded from view and free from intrusion while the employee is expressing milk;
- (b) shall be safe, clean, and free of hazardous materials as defined in Labor Code section 6382;
- (c) shall contain a surface to place a breast pump and personal items;
- (d) shall contain a place to sit; and
- (e) shall have access to electricity or alternative devices, including, but not limited to, extension cords or charging stations, needed to operate an electric or battery-powered breast pump.

California law also requires the employer provide access to a sink with running water and a refrigerator suitable for storing milk in close proximity to the employee’s workspace or other suitable colling device if a refrigerator cannot be provided. If an employer fails to provide

reasonable break time or adequate space to express milk, the employer must pay the employee an additional hour of pay at the employee's regular rate for each workday the adequate space or reasonable time is not provided. (Lab. Code §§1033, subd. (a), 226.7, subd. (c).)

In this case, Employee and other current and former aggrieved California-based hourly non-exempt employees of Employers sought to express breast milk for the employees' infant children; however, Employers employed policies, practices, and/or procedures or lack of such policies, practices, and/or procedures which resulted in its failure to provide Employee and other current and former aggrieved California-based hourly non-exempt employees with reasonable break time for lactation or a room which complied with the requirements of California law, including but not limited to, the room not being private and shielded from view or free from intrusion while the employee is expressing milk. For example, the rooms where Employee and other current and former aggrieved California-based hourly non-exempt employees were permitted to express milk (a) was not in close proximity to the employees' work areas; (b) had no blinds or other forms of shielding view of the inside of the room; (c) had no locking mechanism on the door(s); (d) which other employees were permitted to enter the room while Employee and other current and former aggrieved California-based hourly non-exempt employees were expressing milk; (e) was not clean, and free of hazardous materials; and (f) did not have access to running water.

Additionally, Employers failed to pay Employee and other current and former aggrieved California-based hourly non-exempt employees an additional hour of pay at their regular rate of compensation for each workday the employees did not receive all legally required and compliant lactation periods, i.e., legally compliant time or space. Employers employed policies and procedures which ensured that employees did not receive any lactation period premium wages to compensate them for workdays in which they did not receive all legally required and compliant lactation periods.

The aforementioned policies, practices, and/or procedures of Employers resulted in Employee and other current and former aggrieved California-based hourly non-exempt employees not being provided with all legally required and compliant lactation periods and/or not receiving premium wages to compensate them for such instances, all in violation of California law.

### **CONCLUSION**

Our client intends to file a representative action pursuant to PAGA concerning her wage claims as warranted by Employer's violations of Labor Code sections 1030, 1031, and 1033 and sections 3, 4, 11 and 12 of the applicable IWC Wage Orders. This letter is being sent to you as an inquiry into whether LWDA wishes to investigate my client's claims for civil penalties associated with Employer's violations of the Labor Code, as alleged herein. Thank you for your assistance and cooperation in this matter. If you have any questions or concerns, please contact me at the above-listed information.

Very truly yours,  
**LAVI & EBRAHIMIAN, LLP**  
  
Vincent C. Granberry, Esq.

9589 0710 5270 4047 1969 90

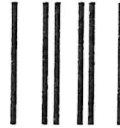
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| <b>WAL-MART ASSOCIATES, INC.</b><br>Registered Agent for Process of Service<br>c/o C T Corporation System<br>330 N Brand Blvd., Suite 700<br>Glendale, California 91203 |                  |
| Street and Apt. No., or PO Box No. _____                                                                                                                                |                  |
| City, State, ZIP+4® _____                                                                                                                                               |                  |
| PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions                                                                                            |                  |

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| 1. Article Addressed to:<br><br><div style="text-align: center;"> <b>WAL-MART ASSOCIATES, INC.</b><br/>         Registered Agent for Process of Service<br/>         c/o C T Corporation System<br/>         330 N Brand Blvd., Suite 700<br/>         Glendale, California 91203       </div> | B. Received by (Printed Name) _____ C. Date of Delivery _____<br><br>D. Is delivery address different from item 1? <input type="checkbox"/> Yes<br>If YES, enter delivery address below: <input type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
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| PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |

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*Rosales v. Wal-Mart Associates, Inc. (PAA)*  
*(CPA Letter) JL/VB/KR*

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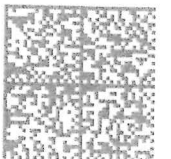
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| <b>WAL-MART ASSOCIATES, INC.</b>                                                                 |    |
| Attention: Legal Department                                                                      |    |
| 702 S.W. 8th Street                                                                              |    |
| Bentonville, Arkansas 72716                                                                      |    |
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*ROSENBERG v. WAL-MART ASSOCIATES, INC. (PABA)*  
*(PABA letter) JUL 16/ KR*

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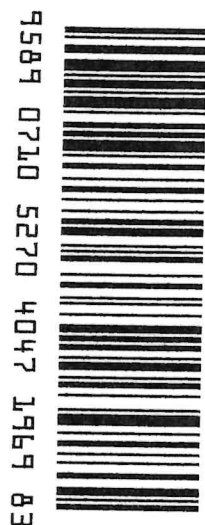
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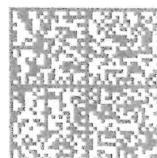
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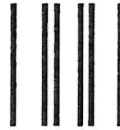
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| 1. Article Addressed to:<br><br><b>WAL-MART ASSOCIATES, INC.</b><br>Attention: Legal Department<br>1 Customer Drive<br>Bentonville, Arkansas 72716                                                                                                                                                                                                                                                                              |  | B. Received by (Printed Name) _____                                                                                                                                                                                                                                                                | C. Date of Delivery _____ |
| 2. Article Number (Transfer from service label)<br><b>9589 0710 5270 4047 1970 10</b>                                                                                                                                                                                                                                                                                                                                           |  | D. Is delivery address different from item 1? <input type="checkbox"/> Yes<br>If YES, enter delivery address below: <input type="checkbox"/> No                                                                                                                                                    |                           |
| 3. Service Type<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"/> Certified Mail Restricted Delivery<br><input type="checkbox"/> Collect on Delivery<br><input type="checkbox"/> Collect on Delivery Restricted Delivery<br><input type="checkbox"/> Mail Restricted Delivery (00) |  | <input type="checkbox"/> Priority Mail Express®<br><input type="checkbox"/> Registered Mail™<br><input type="checkbox"/> Registered Mail Restricted Delivery<br><input checked="" type="checkbox"/> Signature Confirmation™<br><input type="checkbox"/> Signature Confirmation Restricted Delivery |                           |
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8889 W. Olympic Blvd., Suite 200  
Beverly Hills, CA 90211

*ROBERTS V. WAL-MART ASSOCIATES, INC. (PAGA)*  
*(PAGA letter) 06/16/18*

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

**WAL-MART ASSOCIATES, INC.**

Attention: Legal Department  
1 Customer Drive  
Bentonville, Arkansas 72716

2. Article Number (Transfer from service label)

9589 0710 5270 4047 1970 10

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X**

☐ Agent  
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery

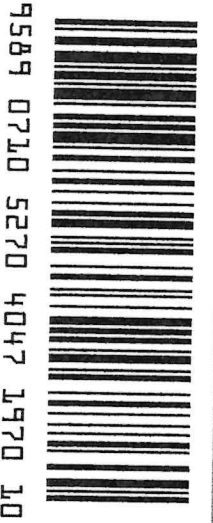
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☒ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

☐ Mail  
☐ Mail Restricted Delivery

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

Domestic Return Receipt

LAHIMIYAN, LLP  
10000 Wilshire Blvd., Suite 200  
Beverly Hills, CA 90211



**WAL-MART ASSOCIATES, INC.**  
Attention: Legal Department  
1 Customer Drive  
Bentonville, Arkansas 72716

FIRST-CLASS

US POSTAGE  
PAID BY ADDRESSEE  
ZIP 90211  
02 7H  
0006127620 JUN 29 2026

\$012.420

| SENDER: COMPLETE THIS SECTION                                                                                                                                                                                                                       |  | COMPLETE THIS SECTION ON DELIVERY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <p>1. Article Addressed to:</p> <p>■ Complete items 1, 2, and 3.<br/>■ Print your name and address on the reverse so that we can return the card to you.<br/>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p> |  | <p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery _____</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br/>If YES, enter delivery address below:</p>                                                                                                                                                                                                                                                                                                                                   |  |
| <p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 4047 1970 10</p>                                                                                                                                                           |  | <p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Mail <input type="checkbox"/> Mail Restricted Delivery</p> |  |
| <p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>                                                                                                                                                                                                 |  | <p>Domestic Return Receipt</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |

9589 0710 5270 4047 1970 03

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 Restricted Delivery

\$

Postmark  
Here

**WAL-MART ASSOCIATES, INC.**

Attention: Legal Department

10655 Folsom Blvd.

Rancho Cordova, California 95670

Street and Apt. No., or PO Box No.

City, State, Zip+4®

PS Form 3800, January 2023 PSN 7530-02-000-9047

See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
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1. Article Addressed to:

**WAL-MART ASSOCIATES, INC.**

Attention: Legal Department

10655 Folsom Blvd.

Rancho Cordova, California 95670

2. Article Number (Transfer from service label)

9589 0710 5270 4047 1970 03

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

☐ Agent

**X**

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☐ Adult Signature

☐ Adult Signature Restricted Delivery

☒ Certified Mail®

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

☐ Insured Mail

☐ Priority Mail Express®

☐ Registered Mail™

☐ Registered Mail Restricted Delivery

☒ Signature Confirmation™

☐ Signature Confirmation Restricted Delivery

Mail Restricted Delivery  
(0)

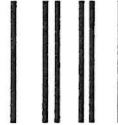
PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

USPS TRACKING #



9590 9402 9516 5069 4605 88



First-Class Mail  
Postage & Fees Paid  
USPS  
Permit No. G-10

United States  
Postal Service

• Sender: Please print your name, address, and ZIP+4® in this box•

LAVI & EBRAHIMIAN, LLP  
8889 W. Olympic Blvd., Suite 200  
Beverly Hills, CA 90211

Rosales v. Wal-Mart Associates, Inc. (PATA)  
(PATA Letter) JL/VB/KR

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**WAL-MART ASSOCIATES, INC.**

Attention: Legal Department  
10655 Folsom Blvd.  
Rancho Cordova, California 95670

2. Article Number (Transfer from service label)

9589 0710 5270 4047 1970 03

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

**X**

- ☐ Agent  
☐ Addressee

B. Received by (Printed Name)

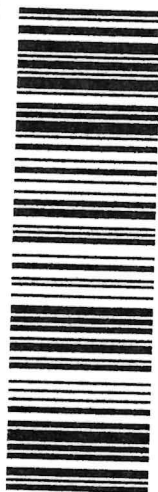
C. Date of Delivery

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

**3. Service Type**

- |                                                                  |                                                                     |
|------------------------------------------------------------------|---------------------------------------------------------------------|
| <input type="checkbox"/> Adult Signature                         | <input type="checkbox"/> Priority Mail Express®                     |
| <input type="checkbox"/> Adult Signature Restricted Delivery     | <input type="checkbox"/> Registered Mail™                           |
| <input checked="" type="checkbox"/> Certified Mail®              | <input type="checkbox"/> Registered Mail Restricted Delivery        |
| <input type="checkbox"/> Certified Mail Restricted Delivery      | <input checked="" type="checkbox"/> Signature Confirmation™         |
| <input type="checkbox"/> Collect on Delivery                     | <input type="checkbox"/> Signature Confirmation Restricted Delivery |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery |                                                                     |
| <input type="checkbox"/> Insured Mail                            |                                                                     |
| Mail Restricted Delivery (0)                                     |                                                                     |

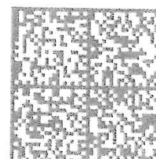
AHIMIAN, LLP  
ic Blvd., Suite 200  
ills, CA 90211



9589 0710 5270 4047 1970 03

**WAL-MART ASSOCIATES, INC.**  
Attention: Legal Department  
10655 Folsom Blvd.  
Rancho Cordova, California 95670

FIRST-CLASS



US POSTAGE  
02 7H  
00061 27620  
JUN 29 2026  
\$012.420  
ZIP 90211

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

B. Received by (Printed Name)

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

Addresssee ☐  
Agent ☐

C. Date of Delivery

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Registered Mail®  
☐ Registered Mail Restricted Delivery  
☐ Signature Confirmation™  
☒ Signature Confirmation Restricted Delivery

Domestic Return Receipt