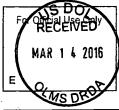
U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## 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)

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READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

| 1. File Number: <b>C-</b> 00680   |  |
|---|--|
|   |  |
| Person Filing   |  |
| 2. Name and mailing address (include ZIP Code):   | 3. Any other address where records necessary to verify this report are kept:   |
| Name Ronald L Mason   | Name Ronald L Mason  |
| Title President   | Title President  |
| Organization Midwest Management Consultants, Inc.   | Organization Midwest Management Consultants, Inc.  |
| P.O. Box, Bldg., Room No., if any P. O. Box 398   | P.O. Box, Bldg., Room No., if any P. O. Box 398  |
| Street  | Street   |
| City Dublin   | City (Dublin   |
| State Ohio ZIP Code + 4 143017-0398   | State Ohio ZIP Code + 4 43017-0398   |
| 4. Date fiscal year ends: 5. Type of person:  |  |
| Dec 31 a. Individual b. Partnership   | c. X 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: 02 / 14 / 2016   |
| Name Paul A McGrath, VP/Gen Counsel   | 8. Name of person(s) through whom made:  |
| Organization <u>Universal Stainless</u>   | Name Paul A. McGrath   |
| Trade Name, if any  | The state of the s |
| P.O. Box, Bldg., Room No., if any   | Name   |
| Street 600 Mayer Street   | Name   |
| City Bridgeville  | Name   |
| State PA ZIP Code + 41501.7   | Name   |
| Signatures  |  |
| Each of the undersigned declares, under penalty of perjury and other applicable the information contained in any accompanying documents) has been examined true, correct, and complete. (See Section VII on penalties in the instructions.) | penalties of law, that all of the information submitted in this report (including d by the signatory and is, to the best of the undersigned's knowledge and belief,  |
| 13. Signed Acros President (If other title, see instructions)   | Title Treasurer  Title Treasurer  Treasurer  In other title, see instructions)   |
|   |  |
| on 3-7-16 (014-734-9455   | on 3-7-16 614-734-9455   |
| Date Telephone Number   | Date Telephone Number  |

| Filer: Ronald Mason Midwest Management Consultants, I  | nc. File Number C- 00680  |  |
|--|---|--|
|  |   |  |
| 9. Check the appropriate box to indicate whether an object of the activities undertaken, is directly or indirectly:  |   |  |
|  |   |  |
| a. X To persuade employees to exercise or not to exercise, or persuade employees to exercise or not to exercise, or persuade employees to exercise or not to exercise, or persuade employees to exercise or not to exercise, or persuade employees to exercise or not to exercise, or persuade employees to exercise or not to exercise, or persuade employees to exercise or not to exercise, or persuade employees to exercise or not to exercise, or persuade employees to exercise or not to exercise.   | oloyees as to the manner of exercising, the right to organize and bargain   |  |
| 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.):  |   |  |
| And the state of t |   |  |
|  | nless in union campaign at their facility in reduced to writing, is for no specific time, time.   |  |
| All consultations billed at \$225/hourly, inc  | luding travel time and expenses.  |  |
|  |   |  |
|  | AND CONTRACTOR OF THE PARTY OF |  |
|  |   |  |
| Specific Activities to be Performed  |   |  |
| 11. For each activity, separately list in detail the information required (See instruction)  | ons):   |  |
| a. Nature of activity:   |   |  |
| Giving speeches, preparing written materials with management and employees for purpose of under the NLRA.  |   |  |
| Internation to the second of t | 11.c. Extent performed:   |  |
| 11.b. Period during which performed:   | continuing  |  |
| 02/14/2016 to present  11.d. Name and address through whom performed:  | Additional Name and address through whom performed, if any:   |  |
| - Compared to the compared that the compared to the compared t | Name  |  |
| Name Paul A. McGrath, VP/Gen_Counsel   |   |  |
| Organization Universal Stainless   | Organization  |  |
| P.O. Box, Bldg., Room No., if any  | P.O. Box, Bldg., Room No., if any   |  |
| Street 600 Mayer Street  | Street  |  |
| City Bridgeville   | City  |  |
| State PA ZIP Code + 4 15.017   | State ZIP Code + 4  |  |
| 12.a. Identify subject groups of employees:  | 12.b. Identify subject labor organizations:   |  |
| All production & maintenance employees employed at North Jackson (OH) facility   | United Steelworkers Union   |  |
|  |   |  |
|  |   |  |
|  |   |  |
|  |   |  |

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