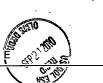
້ U.S. ປ້ອຍartment of Labor Office of Labor-Management Standards Washington, DC 20210

# FORM LM-20 AGREEMENT AND ACTIVITIES REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 09-30-2011

For Official Use Only



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)

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT. 1. File Number: C- 00525 Person Filing 3. Any other address where records necessary to verify this report are kept: 2. Name and mailing address (include ZIP Code): Name Name Title Title Organization Organization LRI Consulting Services, Inc. P.O. Box, Bldg., Room No., if any P.O. Box, Bldg., Room No., if any Street Street 7850 South Elm Place, Suite E City City Broken Arrow State Oklahoma ZIP Code + 4 74011 State ZIP Code + 4 5. Type of person: 4. Date fiscal year ends: c. Corporation d. Other (Specify): Individual b. Partnership Dec 31 Nature of Agreement or Arrangement 6. Full name and address of employer with whom made (include ZIP Code): 7. Date entered into: 18 2010 Name 8. Name of person(s) through whom made: Organization Haynes International Inc Name Jean Nell Trade Name, if any Name P.O. Box, Bldg., Room No., if any  $_{PO}$  Box  $_{9013}$ Name Street 1020 West Park Avenue City Kokomo Name ZIP Code + 4 45904 State Indiana Name

Signatures								
Each of the undersigned declares, under penalty of periury 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	John M.	IM	President (If other title, see	14. Signed	The	/////-	Treasurer (If other title, see	
			instructions)			, ,	instructions)	
Title	President		,,,,,,,	Title	Treasurer		,	
On	9/14/2010	918-455-9995		On	9/14/2010	918-455-9995		
	Date	Telephone Numbe	r		Date	Telephone Number		

Filer. LRI Consulting Services, Inc.		File Number <b>C</b> - 00525					
9. Check the appropriate box to indicate whether an object of the activities under	taken, is directly or indirectly:						
a. To persuade employees to exercise or not to exercise, or persuade emcollectively through representatives of their own choosing.	ployees as to the manner of $\epsilon$	exercising, the right to organize and bargain					
b. To supply an employer with information concerning the activities of em such employer, except information for use solely in conjunction with an	loyees or a labor organization in connection with a labor dispute involving administrative or arbitral proceeding or a criminal or civil judicial proceeding.						
40. Tame and applitions (Evaluis in dataily and instructions, Written agreements	must be attached ):						
10. Terms and conditions (Explain in detail; see instructions. Written agreements must be attached.):  see attached							
See debached							
Specific Activities to be Performed							
11. For each activity, separately list in detail the information required (See instruction	ions):						
a. Nature of activity:	a. Nature of activity:						
Engaged to communicate to employees regarding exercising their rights to organize and bargain							
collectively.							
11.b. Period during which performed:	11.c. Extent performed:	·					
various days beginning 8/23/10	Fully Performe	đ					
11.d. Name and address through whom performed:	Additional Name and addres	ss through whom performed, if any:					
Name	Name						
Organization Sprunger & Associates, LLC	Organization						
•	-						
P.O. Box, Bldg., Room No., if any	P.O. Box, Bldg., Room No.,	if any					
Street 208 E 113th Street	Street						
City Jenks	City						
State Oklahoma ZIP Code + 4 74037	State	ZIP Code + 4					
12.a. Identify subject groups of employees:	12.b. Identify subject labor of	organizations;					
Production, Maintenance, Quality Assurance, Shipping/Receiving	Steelworkers, Pape Workers	er, Rubber,Manufacturing, Energy					

## AGREEMENT FOR CONSULTING SERVICES

TO:

Jean Nell

Havnes International Inc

PO Box 9013 Kokomo, IN 45904 DATE:

August 18, 2010

#### PROPOSED INTERVENTION:

LRI Consulting Services, Inc. will provide consulting services to assist Haynes International Inc in communicating factual and legally accurate information to eligible voters in NLRB-conducted election to enable voters to make fully informed choices in voting.

#### TIMING:

The project will begin on or about 8/23/2010.

#### TERMS AND CONDITIONS:

Fees: The fee for this project is \$3000 per day or \$1500 per half day of consulting plus travel expenses. This fee is due upon the delivery of the consulting services and is non refundable. In the event the petition is withdrawn, you agree to pay an additional \$10,000 bonus.

Payment Terms: A \$15,000 retainer is required upon acceptance of this proposal. The consultant's time will be billed at \$3000 per day or \$1500 per half day and credited to the retainer. When the retainer is exhausted it will be replenished in \$5000 increments. You agree and acknowledge that failure to pay fees or expenses associated with this project under these terms will result in reassignment of the consultant(s) and a penalty of 2% per month until all outstanding invoices are paid in full.

Expenses: Expenses will be billed as actually incurred and are due on presentation of the invoice. Reasonable business expenses include, but are not limited to, transportation (air, rental car, taxi, etc.), lodging, food, and costs for campaign communication materials.

You further acknowledge that no representation by LRICS or its representatives were relied on by you or any member of your company in entering this agreement, and that this document represents the full understanding of the parties. Your deposit, in the absence of your signature below, indicates your acceptance of this project and the terms and conditions as stated herein.

### ACCEPTANCE:

We accept the Agreement and terms described above:

For LRI Consulting Services, Inc.

For Haynes International Inc

Phillip B. Wilson

President - General Counsel

Name: Jean Nell

Title: VP of Corporate Affairs

DATE: August 18, 2010

DATE: