

Filer:

File Number C-

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.):

- CONDUCTING PERSUASIVE employee meetings
- conducting MANAGEMENT meetings to inform client
INFORMED OF ALL work in progress.

Specific Activities to be Performed

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

- a. Nature of activity:
- SMALL GROUP Employee meetings
 - WALKING THE PLANT FLOOR + TALKING with employees and MANAGEMENT
 - Films FROM PROJECTIONS INC // projectionsinc.com

11.b. Period during which performed:

12-17-2019 - 01-16-2020

11.c. Extent performed:

11.d. Name and address through whom performed:

Name MATERION CORPORATION

Organization

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

Street 6070 PARKLAND BLVD.

City MAYFIELD HEIGHTS, OH

State OHIO ZIP Code + 4 44124

Additional Name and address through whom performed, if any:

Name

Organization MATERION CORP

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

Street 1470 W. PORTAGE RIVER S ROAD

City ELMORE

State OHIO ZIP Code + 4 43416

12.a. Identify subject groups of employees:

ALL hourly production
EMPLOYEE'S AT
MATERION CORP
1470 W. PORTAGE RIVER S. ROAD
ELMORE, OHIO 43416

12.b. Identify subject labor organizations:

UNITED STEEL WORKERS
USW

Name of Person Filing: <u>DAVID MARTIN NYSTROM</u>	File Number C- <u>736</u>
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B. Statement of Receipts Report all receipts from employers in connection with labor relations advice or services regardless of the purposes of the advice or services.

5.a. Name and Address of Employer (including trade name, if any). Mailing Address:

Employer MATERION CORPORATION P.O. Box, Bldg., Room No., if any _____

Trade Name _____ Street 6070 PARKLAND BLVD.

Attention To: ROBERT ROSEL City MAYFIELD HEIGHTS

Title DIRECTOR GLOBAL PROCUREMENT State OHIO ZIP Code + 4 44124

5.b. Termination Date 01-16-2020 5.c. Amount 376,367.⁶⁶

6. TOTAL RECEIPTS FROM ALL EMPLOYERS \$ 376,367.⁶⁶

C. Statement of Disbursements Report all disbursements made by the reporting organization in connection with labor relations advice or services rendered to the employers listed in Part B.

7. Disbursements to Officers and Employees:

(a) Name (b) Salary (c) Expenses (d) Totals

DAVID NYSTROM				9. Office and Administrative Expenses	
SHADE ZEBIB				10. Publicity	
ADAM ROBINSON				11. Fees for Professional Services	
MATTHEW YONKHA				12. Loans Made	
FELICIA LARK				13. Other Disbursements <u>EXP -</u>	<u>24,242.⁶⁶</u>
8. Total disbursements to officers and employees: <u>352,125.⁰⁰</u>				14. Total Disbursements (Sum of Items 8 - 13)	<u>376,367.⁶⁶</u>
THOMAS Aiken					
John Nystrom					

D. Schedule of Disbursements for Reportable Activity

Use this Schedule to report only disbursements made for the purposes described in Part D of the instructions.

15.a. Employer Name: <u>LABOR CONSULTING GROUP, INC</u>	15.b. Trade Name, if any:
15.c. To Whom Paid Name <u>DAVID NYSTROM</u> Title <u>CEO</u> Organization <u>OWNER - LABOR CONSULTING GROUP, INC</u> P.O. Box, Building and Room Number, if any _____ Street <u>535 GRISWOLD ST</u> City <u>DETROIT</u> State <u>MICHIGAN</u> ZIP Code + 4 <u>48228</u>	15.d. Amount 15.e. Purpose

16. TOTAL DISBURSEMENTS FOR ALL REPORTABLE ACTIVITY

\$ 376,367.⁶⁶

8. In the event of an NLRB Certified election loss to the Union, Labor Consulting Group, LLC will refund 25% of consultant billing hours cost.

9. Client agrees to pay all outstanding fees and costs within seven (7) days after receipt of invoice. Failure to pay any invoices within thirty days (30) of receipt shall result in a finance charge being added to the balance at the rate of one and one-half percent (1-1/2%) per month.

10. Client may terminate the services of Labor Consulting Group at any time by declaration of such intent to an officer or employee of Labor Consulting Group.

Dated: 12/17/2019

By:


For: Labor Consulting Group, LLC

Examined, Accepted and
Approved

Dated: 12/17/19

By:  (ROBERT W. RUSSELL)

Title: SRO DIRECTOR GLOBAL PRAC

For: MATHEWSON CORP.