Agreement and Activities Report

U.S. Department of Labor

Office of Labor-Management Standards



This report is mandatory under P.L. 86-257 as amended. Failure to comply may result in criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 439, 440.

OMB No. 1214-0001 12/31/86

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).

File No. C. 363

Under Section 203(b) of the Labor-Management Reporting and Disclosure Ad	t of 1959, as amended (LMRDA).
A. Person Filing	Assistance
Name and mailing address (include ZIP code):	2. Any other address where records necessary to verify this report are kept:
William P. Wheeler - Suite 102	
2920 Van Aken Boulevard	N/A SEP 0 6 2000
Shaker Heights, Ohio 44120	1,
Shaker herghos, on to tribe	OLMS CLEVELAN
Date fiscal year ends:	
12/31/00 a. & Individual b. Parti	nership c. Corporation d. Other (Specify):
B. Nature of Agreement or Arrangement	00
5. Full name and address of employer with whom made (include ZIP code)	
WVIZ/PBS	August 17, 2000
4300 Brookpark Road	7. Names of persons through whom made:
Cleveland, Ohio 44134	Jerrold F. Wareham
O. Charles and the section of the posticities	undertaken in diseath erindiseathu
8. Check the appropriate box to indicate whether an object of the activities	
 a. X_X To persuade employees to exercise or not to exercise, or persuade collectively through representatives of their own choosing. 	de employees as to the manner of exercising, the right to organize and bargain
	of employees or a labor organization in connection with a labor dispute involv
	on with an administrative or arbitral proceeding or a criminal or civil judicial pro-
ceeding.	• • • • • • • • • • • • • • • • • • • •
9. Terms and conditions (Explain in detail; see Part B-9 of instructions):	
Agreement is for no specific tim	e and is terminable at the will of
either party at any time. All se	rvices performed at the rate of
\$100.00 per hour. This agreement	has never been reduced to writing.
\$100.00 per nour. This agreement	nas never seem reduced so mirorny.
C. Specific Activities to be Performed	· 1
10. For each activity, separately list in detail the information required (See	
	aign on behalf of the employer.
	giving speeches and preparing writ-
ten materials for mee	tings with employees/management.
b. Period during which performed: c. Extent perfor	med:
8/18/00 to present contin	
0,20,00	
d. Names and addresses of persons through whom performed:	
Mr. Jerrold F. Wareham, Presiden	t; WVIX/PBS; 4300 Brookpark Road;
Cleveland, Ohio 44134/Mr. Tony H	. Smith. Vice President Finance & Adm
11. Identify (a) Subject employees, groups of employees, and (b) labor orga	inizations;
(a) Engineers	
(b) National Association of Bro	adcast Employees & Technicians,
Communication Workers of Am	erica, AFL-CIO, Local Union No. 42
D. Verification and Signature. The person in item 1 above and each of h	his undersigned authorized officers declares, under penalty of law, that all in-
knowledge and belief, true, correct, and complete.	emitter on a time record tree causes we autition by rates and all to und built or one
Signed:	Signed
	Signed:
. President	Treasurer
	(If other title, cross out and write in correct title above.)
City State Date Cleveland, Ohio 9/3/00	City State Date

RECEIVED

Agreement and Activities Report

U.S. Department of Labor

AUG 2 1 2000

Office of Labor-Management Standards

OLMS CLEVELA

This report is mandatory under P.L. 86-257 as amended. Failure to comply may result in criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 439, 440. OMB No. 1214-0001 12/31/86

A. Person Filling 1. Name and mailing address (include ZIP code): Will liam P. Wheeler - Suite 102 2920 Van Aken Boulevard Shaker Heights, Ohio 44120 3. Date fiscal year ends: 12/31/00 a. © Individual b. Partnership c. Corporation d. Other (Specify): 01/ESA CLMS/DOE/SED B. Nature of Agreement or Arrangement 5. Full name and address of employer with whom made (include ZIP code): Mary C. Morris 5. Full name and address of employer with whom made (include ZIP code): Mary C. Morris 5. Check the appropriate box to indicate whether an object of the activities undertaken, is directly or indirectly: a. Ø 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. 9. Terms and conditions (Explain in detail; see Part B-9 of instructions): Agreement is for no specific time and is terminable at the will of either party at any time. All services performed at the rate of \$100.00 per hour. This agreement has never been reduced to writing. C. Specific Activities to be Performed 1. Separately list in detail the information required (See Part C-10 of Instructions): a. Nature of activity. Consult on union recognition on behalf of Mary Morris & Ned Gold at Northside Hospital in Youngstown, Ohio. Activity may include giving advice, making speeches and meeting with members of	Required of Persons, including Labor Relations Consultants and Other Individual Under Section 203(b) of the Labor-Management Reporting and Disclosure A	duals and Organizations, ct of 1959, as amended (LMRDA).
William P. Wheeler - Suite 102 2920 Van Aken Boulevard Shaker Heights, Ohio 44120 3. Date fiscal year ends: 12/31/00 4. Type of person: a. @ Individual b. Partnership c. Corporation d. Other (Specify) Pol/ESA OLMS/DDF/SBD B. Nature of Agreement or Arrangement 5. Full name and address of employer with whom made (include ZIP code): Mary C. Morris 561 South Main Street Hubbard, Ohio 44425 8. Check the appropriate box to indicate whether an object of the activities undertaken, is directly or indirectly: a. Ø 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 as to the manner of exercising, the right to organize and bargain collectively through representatives of their own choosing. b. To supply an employer, except information for use solely in conjunction with an administrative or arbitral proceeding or a criminal or civil judicial proceeding. 9. Terms and conditions (Explain in detail; see Part B-9 of instructions): Agreement is for no specific time and is terminable at the will of either party at any time. All services performed at the rate of \$100.00 per hour. This agreement has never been reduced to writing. C. Specific Activities to be Performed 1. To supply an exployer and the indentity of the activities of employees are alabor organization in connection with a labor dispute involving such employer. C. Specific Activities to be Performed 1. To supply an exployer and activity separately list in detail the information required (See Part C-100 of Instructions): a. Nature of activity. Separately list in detail the information required (See Part C-100 of Instructions): a. Nature of activity. Separately list in detail the information required (See Part C-100 of Instructions): a. Nature of activity. Separately list in detail the information required in Youngstown, Ohio. Activ	A. Person Filing	
2920 Van Aken Boulevard Shaker Heights, Ohio 44120 3. Date fiscal year ends: 12/31/00 4. Type of person: a. Q Individual b. Partnership c. Corporation d. Other (Specify):01/ESA OLMS/DDE/SED B. Nature of Agreement or Arrangement 5. Full name and address of employer with whom made (include ZIP code): Mary C. Morris 561 South Main Street Hubbard, Ohio 44425 8. Check the appropriate box to indicate whether an object of the activities undertaken, is directly or indirectly: a. Ø 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 as to the manner of exercising, the right to organize and bargain in guch employer, except information for use solely in conjunction with an administrative or arbitral proceeding or a criminal or civil judicial proceeding. 9. Terms and conditions (Explain in detail: see Part B-9 of instructions): Agreement is for no specific time and is terminable at the will of either party at any time. All services performed at the rate of \$100.00 per hour. This agreement has never been reduced to writing. C. Specific Activities to be Performed 1. To Foreach activity, separately list in detail the Information required (See Part C-10 of Instructions): a. Nature of activity. Consult on union recognition on behalf of Mary Morris & Ned Gold at Northside Hospital in Youngstown, Ohio. Activity may	Name and mailing address (include ZIP code):	2. Any other address where records necessary to verify this report are kept:
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B. Nature of Agreement or Arrangement 5. Full name and address of employer with whom made (include ZIP code): Mary C. Morris 5.61 South Main Street Hubbard, Ohio 44425 8. Check the appropriate box to indicate whether an object of the activities undertaken, is directly or indirectly: a. Ø 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. 9. Terms and conditions (Explain in detail; see Part B-9 of instructions): Agreement is for no specific time and is terminable at the will of either party at any time. All services performed at the rate of \$100.00 per hour. This agreement has never been reduced to writing. C. Specific Activities to be Performed 1. OF For each activity, separately list in detail the information required (See Part C-10 of Instructions): a. Nature of activity: Consult on union recognition on behalf of Mary Morris & Ned Gold at Northside Hospital in Youngstown, Ohio. Activity may	Date fiscal year ends:	· hux
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Mary C. Morris 561 South Main Street Hubbard, Ohio 44425 8. 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. 9. Terms and conditions (Explain in detail; see Part B-9 of instructions): Agreement is for no specific time and is terminable at the will of either party at any time. All services performed at the rate of \$100.00 per hour. This agreement has never been reduced to writing. C. Specific Activities to be Performed 1. 10. For each activity, separately list in detail the Information required (See Part C-10 of Instructions): a. Nature of activity: Consult on union recognition on behalf of Mary Morris & Ned Gold at Northside Hospital in Youngstown, Ohio. Activity may	B. Nature of Agreement or Arrangement	
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Hubbard, Ohio 44425 8. 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. 9. Terms and conditions (Explain in detail; see Part B-9 of instructions): Agreement is for no specific time and is terminable at the will of either party at any time. All services performed at the rate of \$100.00 per hour. This agreement has never been reduced to writing. C. Specific Activities to be Performed 4. 1 10. For each activity, separately list in detail the information required (See Part C-10 of instructions): a. Nature of activity: Consult on union recognition on behalf of Mary Morris & Ned Gold at Northside Hospital in Youngstown, Ohio. Activity may	Mary C. Morris	7/13/00
 8. 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. 9. Terms and conditions (Explain in detail; see Part B-9 of instructions): Agreement is for no specific time and is terminable at the will of either party at any time. All services performed at the rate of \$100.00 per hour. This agreement has never been reduced to writing. C. Specific Activities to be Performed 1 1 10. For each activity, separately list in detail the information required (See Part C-10 of Instructions): a. Nature of activity: Consult on union recognition on behalf of Mary Morris & Ned Gold at Northside Hospital in Youngstown, Ohio. Activity may 	561 South Main Street	7. Names of persons through whom made:
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. 9. Terms and conditions (Explain in detail; see Part B-9 of instructions): Agreement is for no specific time and is terminable at the will of either party at any time. All services performed at the rate of \$100.00 per hour. This agreement has never been reduced to writing. C. Specific Activities to be Performed 1. 1 10. For each activity, separately list in detail the information required (See Part C-10 of Instructions): a. Nature of activity: Consult on union recognition on behalf of Mary Morris & Ned Gold at Northside Hospital in Youngstown, Ohio. Activity may	Hubbard, Ohio 44425	Mary C. Morris/Ned Gold
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Ned Gold at Northside Hospital in Youngstown, Ohio. Activity may		7 PO 1 TO BOOK (1990) (1990) A PO 1 (1990) (
include diving advice making encoches and meeting with members of		
hospital social workers unit off the premises to furnish information.		

b. Period during which performed:

7/13/00 to present time

c. Extent performed:

continuing

d. Names and addresses of persons through whom performed:

Mary C. Morris/561 South Main Street/Hubbard, Ohio 44425

Ned C. Gold, Jr./Harrington, Hoppe & Mitchell/Youngstown, Ohio 44503

11. Identify (a) Subject employees, groups of employees, and (b) labor organizations:

Social Workers at Northside Hospital

Service Employees International Union, Local 627

D. Verification and Signature. The person in item 1 above and each of his undersigned authorized officers declares, under penalty of law, that all intormation in this report, including all attachments incorporated therein or referred to in this report, has been examined by him and is, to the best of his knowledge and belief, true, correct, and complete.

Signed:				Signed:		
MY	4		President		Treasurer	
(If other title, cross out and	d write in	correct title above.)		(If other title, cross out and write in correct title above.)		
City		State	Date	City State	Date	
at: Cleveland,	Ohio)	on: 8/11/0	Qt:	on:	

Agreement and Activities Report

U.S. Department of Labor



Office of Labor-Management Standards OMB No. 1214-0001 This report is mandatory under P.L. 86-257 as amended. Failure to comply may result in criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 439, 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). A. Person Filing 1. Name and mailing address (include ZIP code): Any other address where records necessary to verify this report are kept: William P. Wheeler - Suite 102 MAK 29 ZUUU N/A 2920 Van Aken Boulevard Shaker Heights, Ohio 44120 3. Date fiscal year ends: 4. Type of person: b.

Partnership c.

Corporation d. Other (Specify): 12/31/00 a. 🛭 Individual B. Nature of Agreement or Arrangement 6. Date entered into: 5. Full name and address of employer with whom made (include ZIP code): Buckeye Village Giant Eagle February 7, 2000 1800 West State Street 7. Names of persons through whom made: Alliance, Ohio 44601 Gerard Mastroianni 8. 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 9. Terms and conditions (Explain in detail; see Part B-9 of instructions): Agreement is for no specific time and is terminable at the will of either party at any time. All services performed at the rate of \$100.00 per hour. This agreement has never been reduced to writing. C. Specific Activities to be Performed 10. For each activity, separately list in detail the information required (See Part C-10 of instructions): a. Nature of activity: Consult on union(s) organizational campaign on behalf of the employer at their stores in Alliance, Louisville and Bolivar, Ohio. Campaign may include giving speeches, preparing written materials and conducting meetings with employees and management. c. Extent performed: b. Period during which performed: 2/7/00 to present continuing d. Names and addresses of persons through whom performed: Gerard Mastroianni, President; Buckeye Village Giant Eagle; 1800 West State Street; Alliance, Ohio 44601 11. Identify (a) Subject employees, groups of employees, and (b) labor organizations: Grocery and back bakery employees UFCW Union Local 880 and Bakers Union Local 19 D. Verification and Signature. The person in item 1 above and each of his undersigned authorized officers declares, under penalty of law, that all intormation in this report, including all attachments incorporated therein or referred to in this report, has been examined by him/and is knowledge and belief, true, correct, and complete. Signed: Signed: President Treasurer (If other title, cross out and write in correct title above.) (If other title, cross out and write in correct title above.)

Date

at: *Cleveland, Ohio

on: 3/27/0 A:

Date

Agreement and Activities Report

U.S. Department of Labor

Office of Labor-Management Standards



This report is mandatory under P.L. 86-257 as amended. Failure to comply may OMB No. 1214-000 result in criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 439, 440. Required of Persons, including Labor Relations Consultants and Other Individuals and Organizations, C File No. Under Section 203(b) of the Labor-Management Reporting and Disclosure Act of 1959, as amended (LMRDA). A. Person Filing 1. Name and mailing address (include ZIP code): 2. Any other address where records necessary to verify this report are kept: William P. Wheeler - Suite 102 MAK 29 ZU00 2920 Van Aken Boulevard N/A Shaker Heights, Ohio 44120 Date fiscal year ends: 4. Type of person: c.

Corporation d. Other (Specify): 12/31/00 a.
Individual b.

Partnership B. Nature of Agreement or Arrangement 5. Full name and address of employer with whom made (include ZIP code): 6. Date entered into: Ellwood Quality Steels Company March 10, 2000 700 Moravia Street 7. Names of persons through whom made: New Castle, Pennsylvania 16101 Robert E. Rumcik 8. Check the appropriate box to indicate whether an object of the activities undertaken, is directly or indirectly: a. 灯 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 pro-9. Terms and conditions (Explain in detail; see Part B-9 of instructions): Agreement is for no specific time and is terminable at the will of either party at any time. All services performed at the rate of \$100.00 per hour. This agreement has never been reduced to writing. C. Specific Activities to be Performed 10. For each activity, separately list in detail the information required (See Part C-10 of instructions): a. Nature of activity: Consult on union organizational campaign on behalf of the employer. Campaign may include giving speeches, preparing written materials and conducting meetings with employees and management. b. Period during which performed: c. Extent performed: 3/10/00 to present LL. continuing d. Names and addresses of persons through whom performed:

D. Verification and Signature. The person in item 1 above and each of his undersigned authorized officers declares, under penalty of law, that all information in this report, including all attachments incorporated therein or referred to in this report, has been examined by him and is, to the best of his knowledge and belief, true, correct, and complete.

Robert M. Rumcik, President; Ellwood Quality Steels Compar

700 Moravia Street; New Castle, Pennsylvania 16101

United Steelworkers of America, AFL-CIO,CLC

Production and maintenance employees

11. Identify (a) Subject employees, groups of employees, and (b) labor organizations:

Signed:	and h		Signed:		
NY	Mary .	. President			Treasurer
(If other title, cross out and	d write in correct title a	bove.)	(If other title, cross out and write i	n correct title above.)	
City	State	Date	City	State	Date
at: Cleveland,	Ohio	on: 3/27/0	Gat:		on:

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Agreement and Activities Report

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result in criminal prosecution, fines and civil penalties as provided by 29 U.S.C. 439, 440.

U.S. Department of Labor

Office of Labor-Management Standards



OMB No. 1214-0001

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) A. Person Filing 1. Name and mailing address (include ZIP code): 2. Any other address where records necessary to verify this report are kept: William P. Wheeler - Suite 102 N/A 2920 Van Aken Boulevard Shaker Heights, Ohio 44120 3. Date fiscal year ends: 4. Type of person: a. X Individual b.

Partnership c.

Corporation d.

Other (Specify): 12/31/00 B. Nature of Agreement or Arrangement 5. Full name and address of employer with whom made (include ZIP code): 6. Date entered into: Buckeye Village Giant Eagle February 7, 2000 1800 West State Street 7. Names of persons through whom made: Alliance, Ohio 44601 Glenn M. Olcerst 8. 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. \square 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.

C.	Specific Acti	vities to	be	Performed

- 10. For each activity, separately list in detail the information required (See Part C-10 of instructions):
 - a. Nature of activity: Consult on union(s) organization campaign on behalf of the employer at their stores in Alliance, Louisville and Bolivar, Ohio. Campaign may include giving speeches, preparing written materials and conducting meetings with employees and management.
 - b. Period during which performed:

2/7/00 to present

c. Extent performed:

continuing

Agreement is for no specific time and is terminable at the will of either party at any time. All services performed at the rate of \$100.00 per hour. This agreement has never been reduced to writing.

d. Names and addresses of persons through whom performed:

9. Terms and conditions (Explain in detail; see Part B-9 of instructions):

Gerard Mastroianni, President; Buckeye Village Giant Eagle;

1800 West State Street; Alliance, Ohio 44601

11. Identify (a) Subject employees, groups of employees, and (b) labor organizations:

- (a) Grocery and bakery employees
- (b) UFCW Union Local 880 and Bakers Union Local 19

D. Verification and Signature. The person in item 1 above and each of his undersigned authorized officers declares, under penalty of law, that all information in this report, including all attachments incorporated therein or referred to in this report, has been examined by him and is, to the best of his knowledge and belief, true, correct, and complete.

Sign	ned:	000	1		Signed:		
	NYA	100	The same of the sa	President			Treasurer
(If other title, cross out and write in correct title above.)					(If other title, cross out and write in c	correct title above.)	
	City		State	Date	City	State	Date
at:	Cleveland,	Ohio		on: 2/29/0	Qt:		on: