UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

| DO NOT WRITE IN THIS SPACE | | | |
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| File an original with NLRB Regional Director for the region in which the | | g. | | | | |
|-----------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|-------------------------------------------|--|--|--|--|
| a. Name of Employer | GAINST WHOM CHARGE IS BROUGHT | b. Tel. No. 425-646-6136 | | | | |
| Cadence Aerospace/Giddens Operations | | 425-646-6136 | | | | |
| , | | c. Cell No. | | | | |
| | | f. Fax No. 425 646 6400 | | | | |
| d. Address (Street, city, state, and ZIP code) | e. Employer Representative | 1. Fax No. 425-646-6199 | | | | |
| 2600 94th Street SW, Ste. 105 Everett, WA 98204 | Kelsey M. Sheldon, Attorney Davis Wright Tremaine | g. e-Mail | | | | |
| LVEIGH, VVA 90204 | 777 108th Ave NE, Ste. 2300 | kelseysheldon@dwt.com | | | | |
| | Bellevue, WA 98004-5149 | h. Number of workers employed approx. 247 | | | | |
| i. Type of Establishment (factory, mine, wholesaler, etc.) factory | j. Identify principal product or service aerospace manufacturing | | | | | |
| k. The above-named employer has engaged in and is engaging i | | ion 8(a), subsections (1) and (list | | | | |
| subsections) (3) and (5) | | or Relations Act, and these unfair labor | | | | |
| practices are practices affecting commerce within the meaning within the meaning of the Act and the Postal Reorganization A | g of the Act, or these unfair labor practices are unf | | | | | |
| 2. Basis of the Charge (set forth a clear and concise statement of | | actices) | | | | |
| Within the six months preceding the filing of this cha | · · · · · · · · · · · · · · · · · · · | · | | | | |
| employees in the exercise of their Section 7 rights b | | | | | | |
| retaliation for forming a union. | | | | | | |
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| 3. Full name of party filing charge (if labor organization, give full International Assn. of Machinists and Aerospace W | name, including local name and number) | | | | | |
| international Assit. Of Machinists and Aerospace VV | orkers, District Loage 751 | | | | | |
| 4a. Address (Street and number, city, state, and ZIP code) | | ^{4b. Tel. No.} 206-763-1300 | | | | |
| 9125 15th Place South Seattle, WA 98108-5100 | ļ. | 4c. Cell No. | | | | |
| Seattle, VVA 90100-3100 | - | ^{4d. Fax No.} 206-764-0303 | | | | |
| | <u></u> | 4e. e-Mail | | | | |
| | | , 3 (4) | | | | |
| 5. Full name of national or international labor organization of wh | I lich it is an affiliate or constituent unit <i>(to be filled i</i> i | n when charge is filed by a labor | | | | |
| organization) International Association of Machinists and Aerospace Workers | | | | | | |
| 6. DECLARATION | | Tel. No. | | | | |
| I declare that I have read the above charge and that the statements | | 206-257-6006 | | | | |
| By My Than Cars | on Flora, Attorney | Office, if any, Cell No. | | | | |
| (signature of representative or person making charge) (| Print/type name and title or office, if any) | Fax No. 206-257-6041 | | | | |
| | 10/6/15 | e-Mail | | | | |
| 18 West Mercer Street, Ste. 400, Seattle, WA | (date) | flora@workerlaw.com | | | | |

WILLFUL FALSE STATEMENTS ON THIS CHARGE CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 *et seq.* The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing unfair labor practice and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information will cause the NLRB to decline to invoke its processes.

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| Cadence Aerospace/Giddens Operations | | b. Tel. No. 425-646-6136 | | | |
| Cadence Aerospace/Gladens Operations | | c. Cell No. | | | |
| d Address (Chrost alternation and 71D and a) | | f. Fax No. 425-646-6199 | | | |
| d. Address (Street, city, state, and ZIP code) 2600 94th Street SW, Ste. 105 | e. Employer Representative Kelsey M. Sheldon, Attorney | g. e-Mail | | | |
| Everett, WA 98204 | Davis Wright Tremaine | kelseysheldon@dwt.com | | | |
| | 777 108th Ave NE, Ste. 2300 | h. Number of workers employed | | | |
| | Bellevue, WA 98004-5149 | approx. 247 | | | |
| Type of Establishment (factory, mine, wholesaler, etc.) factory | j. Identify principal product or service aerospace manufacturing | | | | |
| k. The above-named employer has engaged in and is engaging | in unfair labor practices within the meaning of sec | tion 8(a), subsections (1) and (list | | | |
| subsections) | | or Relations Act, and these unfair labor | | | |
| practices are practices affecting commerce within the meanin within the meaning of the Act and the Postal Reorganization | | fair practices affecting commerce | | | |
| 2. Basis of the Charge (set forth a clear and concise statement | of the facts constituting the alleged unfair labor pr | actices) | | | |
| Within the six months preceding the filing of this ch | | and to requests for information by | | | |
| the union necessary for it to perform its duties as the | ne exclusive bargaining representative. | | | | |
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| 3. Full name of party filing charge (if labor organization, give full International Assn. of Machinists and Aerospace W | l name, including local name and number) | | | | |
| international Assn. of Machinists and Aerospace W | vorkers, District Lodge 751 | | | | |
| 4a. Address (Street and number, city, state, and ZIP code) | | ^{4b. Tel. No.} 206-763-1300 | | | |
| 9125 15th Place South | | 4c. Cell No. | | | |
| Seattle, WA 98108-5100 | | | | | |
| | | 4d. Fax No. 206-764-0303 | | | |
| | | 4e. e-Mail | | | |
| 5. Full name of national or international labor organization of when the second in the | nich it is an affiliate or constituent unit (to be filled | in when charge is filed by a labor | | | |
| organization) International Association of Machinists and Aerospace Workers | | | | | |
| 6. DECLARATION I declare that I have read the above charge and that the statements | are true to the best of my knowledge and belief | Tel. No. 206-257-6006 | | | |
| A The state of the | are that to the best of my knowledge and bellet. | | | | |
| | son Flora, Attorney | Office, if any, Cell No. | | | |
| (signature of representative or person making charge) | (Print/type name and title or office, if any) | Fax No. 206-257-6041 | | | |
| 18 West Mercer Street, Ste. 400, Seattle, WA | 10/6/15 | e-Mail | | | |
| Address | (date) | flora@workerlaw.com | | | |

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I hereby certify that on this 6^{th} day of October, 2015, I caused a copy of the foregoing Charge Against the Employer to be emailed to:

Kelsey M. Sheldon Davis Wright Tremaine 777 108th Ave NE Bellevue, WA 98004-5149 kelseysheldon@dwt.com

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UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD CHARGE AGAINST EMPLOYER

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| File an original with NLRB Regional Director for the region in which th | e alleged unfair labor practice occurred or is occurring GAINST WHOM CHARGE IS BROUGHT | g. | | | | |
|---------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|-----------------------------------------|--|--|--|--|
| a. Name of Employer | GAINST WHOM CHARGE IS BROUGHT | b. Tel. No. 425-646-6136 | | | | |
| Cadence Aerospace/Giddens Operations | | | | | | |
| | | c. Cell No. | | | | |
| | | f. Fax No. 425-646-6199 | | | | |
| d. Address (Street, city, state, and ZIP code) 2600 94th Street SW, Ste. 105 | e. Employer Representative Kelsey M. Sheldon, Attorney | g. e-Mail | | | | |
| Everett, WA 98204 | Davis Wright Tremaine | kelseysheldon@dwt.com | | | | |
| · | 777 108th Ave NE, Ste. 2300 | h. Number of workers employed | | | | |
| | Bellevue, WA 98004-5149 | approx. 247 | | | | |
| i. Type of Establishment (factory, mine, wholesaler, etc.) factory | j. Identify principal product or service aerospace manufacturing | | | | | |
| k. The above-named employer has engaged in and is engaging | in unfair labor practices within the meaning of sect | ion 8(a), subsections (1) and (list | | | | |
| subsections) | of the National Labo | r Relations Act, and these unfair labor | | | | |
| practices are practices affecting commerce within the meaning within the meaning of the Act and the Postal Reorganization | | air practices affecting commerce | | | | |
| 2. Basis of the Charge (set forth a clear and concise statement | of the facts constituting the alleged unfair labor pra | ctices) | | | | |
| Within the six months preceding the filing of this ch | | | | | | |
| employees in the exercise of their Section 7 rights | | | | | | |
| the company, that workers would loss benefits due discouraging employees from engaging in protecte | • | atements for the purpose of | | | | |
| discouraging employees from engaging in protecte | d activates. | | | | | |
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| 3. Full name of party filing charge (if labor organization, give ful International Assn. of Machinists and Aerospace W | l name, including local name and number) Jorkers, District Lodge 751 | | | | | |
| | iomere, bramer badge for | | | | | |
| 4a. Address (Street and number, city, state, and ZIP code) | | ^{4b. Tel. No.} 206-763-1300 | | | | |
| 9125 15th Place South | 7 | 4c. Cell No. | | | | |
| Seattle, WA 98108-5100 | | ^{4d. Fax No.} 206-764-0303 | | | | |
| | L. | 4e. e-Mail | | | | |
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| 5. Full name of national or international labor organization of wi | | n when charge is filed by a labor | | | | |
| International Association of Machinists and Aerospace Workers | | | | | | |
| 6. DECLARATION I declare that I have read the above charge and that the statements | | Tel. No. 206-257-6006 | | | | |
| Cus Tlan | | Office, if any, Cell No. | | | | |
| By | son Flora, Attorney | | | | | |
| (signature of representative or person making charge) | (Print/type name and title or office, if any) | Fax No. 206-257-6041 | | | | |
| 40 West Marson Otrest Ots 400 Oc. W. 111 | 10/6/15 | e-Mail | | | | |
| 18 West Mercer Street, Ste. 400, Seattle, WA | A 98119-3971 (date) | flora@workerlaw.com | | | | |

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| | 777 108th Ave NE, Ste. 2300 Bellevue, WA 98004-5149 | h. Number of workers employed approx. 247 | | | | |
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| 2. Basis of the Charge (set forth a clear and concise statement | of the facts constituting the alleged unfair labor p | ractices) | | | | |
| Within the six months preceding the filing of this ch | | · · | | | | |
| rules restricting the rights of its employees from en | gaging in Section 7 activity. | | | | | |
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| 3. Full name of party filing charge (if labor organization, give full name, including lead name and give hard | | | | | | |
| Full name of party filing charge (if labor organization, give ful International Assn. of Machinists and Aerospace W | Orkers, District Lodge 751 | | | | | |
| An Address (Christian day who will be 1710 | | | | | | |
| 4a. Address (Street and number, city, state, and ZIP code) | | ^{4b. Tel. No.} 206-763-1300 | | | | |
| 9125 15th Place South Seattle, WA 98108-5100 | | 4c. Cell No. | | | | |
| | | ^{4d. Fax No.} 206-764-0303 | | | | |
| | | 4e. e-Mail | | | | |
| E Full come of action of a | | | | | | |
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| International Association of Machinists | and Aerospace vvorkers | | | | | |
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| By My Tlara Cars | son Flora, Attorney | Office, if any, Cell No. | | | | |
| (signatule of representative or person making charge) | (Print/type name and title or office, if any) | Fax No. 206-257-6041 | | | | |
| | | e-Mail | | | | |
| 18 West Mercer Street, Ste. 400, Seattle, WA | A 98119-3971 10/6/15 | flora@workerlaw.com | | | | |
| Address | (date) | nora@workenaw.com | | | | |

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| File an original with NLRB Regional Director for the region in which the alleged unfair labor practice occurred or is occurring. 1. EMPLOYER AGAINST WHOM CHARGE IS BROUGHT | | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------|-------------------------------------------|--|--|--|--|
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| Within the six months preceding the filing of this cha | | | | | | |
| employees in the exercise of their Section 7 rights to | by withholding a 401(k) match in retaliat | ion for forming a union. | | | | |
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| C. Mara Care | Office, if any, Cell No. | | | | | |
| - 1 /V / Y · / | on Flora, Attorney (Print/type name and title or office, if any) | Foy No. | | | | |
| | | Fax No. 206-257-6041 | | | | |
| 19 Mont Moroor Street Ste 400 Co-1111 Mar | e-Mail | | | | | |
| 18 West Mercer Street, Ste. 400, Seattle, WA | flora@workerlaw.com | | | | | |

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