

UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF PENNSYLVANIA

RALPH BRASINGTON JR., individually,  
and on behalf of others similarly situated,

Plaintiff,

vs.

THE OPERATIONS GROUP INC.,

Defendant.

Case No. 2:21-cv-02059-NIQA

**CONSENT TO JOIN**

1. I consent to the filing of this form in, and to join and become a plaintiff in the above-captioned collective action lawsuit, to pursue my claim of unpaid wages for all hours worked against The Operations Group Inc. while working as field organizer, at any time within the period of May 2018 to present.
2. I understand that this lawsuit seeks unpaid overtime wages, liquidated damages, attorneys' fees, costs and other relief under the FLSA and similar relief under applicable state wage-and-hour laws. I consent to be bound by the Court's orders and decisions in this case.
3. I designate the law firm and attorneys at Brown, LLC as my attorneys to represent me in this lawsuit.
4. I consent to having the Named Plaintiff Ralph Brasington Jr. pursue this lawsuit in my name, and on my behalf, and I designate the Named Plaintiff to make decisions on my behalf concerning the litigation, including decisions regarding settlement or trial, negotiating a resolution of my claims and entering into an agreement regarding attorneys' fees and costs, and I understand and agree to be bound by such decisions.
5. In the event my claims are dismissed or withdrawn from the above-captioned lawsuit without prejudice, I authorize Plaintiffs' counsel Brown, LLC to use this consent form to re-file my claims in a separate or related action against The Operations Group Inc.

**Signed:** \_\_\_\_\_

**Dated:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**ADDITIONAL INFORMATION**  
*(Privileged and Confidential)*

**Please enter the following information. This information will not be filed with the Court:**

**Address:** \_\_\_\_\_ **Tel. Number:** \_\_\_\_\_  
*Street*

\_\_\_\_\_ **E-mail Address:** \_\_\_\_\_  
*City, State, Zip Code*

*(Please provide any future updates to your contact information while the case is pending)*

**Dates Employed by  
Defendant:**

\_\_\_\_\_ *Starting month/year*                      \_\_\_\_\_ *Ending month/year*

**Position(s)  
Held:**

**Work Location(s):**

\_\_\_\_\_ *If you held multiple positions,  
please include dates for each*                      \_\_\_\_\_ *City/State*

**RETURN COMPLETED CONSENT-TO-JOIN FORM TO:**

Brown, LLC  
111 Town Square Place, Suite 400  
Jersey City, NJ 07310  
(877) 561-0000 (office); (855) 582-5297 (fax)  
[flsagroup@jtblawgroup.com](mailto:flsagroup@jtblawgroup.com)

*You may return your form by mail, fax, e-mail, or electronic signature.*