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

## FORM LM-21 RECEIPTS AND DISBURSEMENTS REPORT

Form approved Office of Management and Budget No. 1245-0003 Expires: 03-31-2019

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 Relations and Disclosure Act of 1959, as amended. (LMRDA) For Official Use Only READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT used 2 7 2019 696478 Month/Day/Year Month/Day/Year 2. Period Covered 1 . File Number C- 00662 (mm/dd/yyyy) By This Report From: / 2018 Through: 30 / 2018 A. Person Filing 3. Name and mailing address (include ZIP Code): 4. Any other address where records necessary to verify this report are kept: Name Name Kenneth Cannon Title Title Owner Organization Cannon Labor Relations, LLC Organization P.O. Box, Building and Room Number, if any P.O. Box, Building and Room Number, if any Street 2207 Ballantrae Der Street City Colleyville City ZIP Code + 4 76034 State State ZIP Code + 4 Texas **Signatures** Each of the undersigned declares, under penalty of perjury 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 the Section on penalties in the instructions). 17. Signed **4** President 18. Signed Treasurer (if other title, see (If other title, see Sole Proprietor instructions) instructions) 972-670-6159 2019 On Date Telephone Number Date Telephone Number

Name of Person Filing:	File Number C-		
B. Statement of Receipts Report all receipts from employers in connection work or services.	ith labor relations advice or services regardless of the purposes of the advice		
5.a. Name and Address of Employer (including trade name, if any).	Mailing Address:		
Employer Arconic Power & Propulsion	P.O. Box, Building and Room Number, if any		
Trade Name Acronic	Street One Misco Dr.		
Attention To Scott Deitrich	City Whitehall		
Title Attorney	State Michigan ZIP Code + 4 49461		
5.b. Termination Date 02/26/2018	5.c. Amount Acerx		
6. TOTAL RECEIPTS FROM ALL EMPLOYERS			
C. Statement of Disbursements Report all disbursements made by the re			
to the employers listed in Part B.	porting organization in connection with labor relations advice or services rendered		
7. Disbursements to Officers and Employees:	) Table		
(a) Name (b) Salary (c) Expenses (c	9. Office and Administrative Expenses		
	Onice and Administrative Expenses  10. Publicity		
	11. Fees for Professional Services		
	12. Loans Made		
	13. Other Disbursements		
8. Total disbursements to officers and employees:	14. Total Disbursements (Sum of Items 8-13)		
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	15.b. Trade Name, If any:		
Arconic Power & Propulsion	Arconic		
15.c. To Whom Paid	15.d. Amount \$8,536		
	13.d. Alliount   \$6,536		
	15.e. Purpose		
Title Owner	Engaged to communicate to employees regarding their right to organize and bargain collective and		
Organization Cannon Labor Relations, LLC	also the right to refain from all such activit so long as it does not intere with Section 8(a)3.		
P.O. Box, Building and Room Number, if any			
Street 2207 Ballantrae Dr	·		
City Colleyville			
State Texas ZIP Code + 4 76034	7.[[		
16. TOTAL DISBURSEMENTS FOR ALL REPORTABLE ACTIVITY			

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 regardless of the purposes of the advice or services regardless of the purposes of the advice or services regardless of the purposes of the advice or services.  Sa. Name and Address of Employer (including trade name, if any).  Employer   Acconic Power & Propulation   Street   201 Isabella St. at 7th St. Bridge    Pennsylvania   2/2P Code + 4   15212    State   Pennsylvania   2/2P Code + 4   15212    Sb. Termination Date   12/30/2018   Sc. Amount    S. TOTAL RECEIPTS FROM ALL EMPLOYERS    C. Statement of Disbursements   Report all disbursements made by the reporting organization in connection with labor relations advice or services rendered by the employers islated in Part 8.  7. Disbursements to Officers and Employees: (a) Name   (b) Salary   (c) Expenses (d) Totals    9. Office and Administrative Expenses    10. Publicity   1.  11. Foes for Professional Services    11. Foes for Professional Services    12. Learn Marde   13. Other Obsbursements   14. Total Disbursements   15. Trade Name, if any.  Arconic Power & Propulsion   15.b. Trade Name, if any.  Arconic Power & Propulsion   15.b. Trade Name, if any.  Arconic Power & Propulsion   15.b. Trade Name, if any.  Arconic Power & Propulsion   15.b. Trade Name, if any.  Street   1207 Ballantrae Dr   15. Trade Name, if any.  Brigated (Co Communicate to employees regarding their right to organize and bargain collective and also the right to reginite conductive and also the right to reginite and bargain collective and also the right to reginite and bargain collective and also the right to reginite from all also the right to reginite and bargain collective and also the right to reginite from all also the right to reginite from all also the right to reginite and bargain collective and also the right to reginite from the first power in the purpose services and also the right to reginite from the purpose ser	Name of Person Filing:	File Number C-	
Employer Acconic Power & Propulsion Trade Name Acconic Power & Propulsion Trade Name Acconic Power & Propulsion  Attention To Scott   Dietrich   City Fittaburgh  State   Pennsylvania   City City Fittaburgh  State   Pennsylvania   City City City City City City City City		with labor relations advice or services regardless of the purposes of the advice	
Employer Arconic Power & Propulsion Trade Name Arconic Power & Propulsion Attention To Scott Dietrich Pittsburgh Title Attorney State Pennsylvania Dietrich Title Attorney State Pennsylvania Dietrich Store Pennsylvania Dietrich Title Attorney State Pennsylvania Dietrich Store Pennsylvania Dietrich Title Attorney State Pennsylvania Dietrich  5. C. Amount  5. C. Amount  6. TOTAL RECEIPTS FROM ALL EMPLOYERS  C. Statement of Disbursements Report all disbursements made by the reporting organization in connection with labor relations advice or services rendered to the employees itseld in Part B.  7. Disbursements to Officers and Employees: (a) Name (b) State (c) Sponses (d) Totals  9. Office and Administrative Expenses 10. Publichy 11. Fees for Professional Services 11. Clean Made 1	5.a. Name and Address of Employer (including trade name, if any).	<del>-</del>	
Attention To Scott   Dietrich   Cay   Pittsburgh    State   Pennsylvania   ZiP Code + 4   15212    S.b. Termination Date   12/30/2018   S.c. Amount    S. TOTAL RECEIPTS FROM ALL EMPLOYERS  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.    (a) Name   (b) Salary   (c) Expenses (d) Totals    S. Total disbursements to Officer and Employees:   10. Publicity   11. Fees for Professional Services    1. Total disbursements to officers and employees:   14. Total Disbursements (Sum of items 8-13)    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:   15.b. Trade Name, if any:    Arconic Power & Propulation   15.b. Amount   15.c. Purpose    Eigagged to communicate to employees regarding their right to organize and bargain collective and long as it does not intere with Section 8 (a) 3.  P.O. Box, Building and Room Number, if any   Street   12207 Ballantrae Dr   1500 Collegy Ille   150	Employer Arconic Power & Propulsion	P.O. Box, Building and Room Number, if any	
Attention To Scott District State Pennsylvania DIP Code + 4 [15212]  5.b. Termination Date [12/30/2018]  5.c. Amount    5.c. Amount    5.c. Amount    6. TOTAL RECEIPTS FROM ALL EMPLOYERS  C. Statement of Disbursements Report all disbursements made by the reporting organization in connection with labor relations advice or services rendered to the employers fetted in Part B.  7. Disbursements to Officers and Employees: (c) Expenses (d) Totals  9. Office and Administrative Expenses    10. Publicity    11. Fees for Professional Services    12. Loans Made    13. Other Disbursements (Sum of Items 8-13)  D. Schedule of Disbursements to officers and employees:    14. Total Disbursements (Sum of Items 8-13)  D. Schedule of Disbursements for Reportable Activity    15.e. Employer Name:    15.c. To Whom Paid    Name   Renneth   Cannon    Title   Owner    Organization   Cannon Labor Relations, LLC    City   Colleyville    Street   2207 Ballantrae Dr    City   Colleyville    State   Texas    ZIP Code + 4   76034    State   Texas    State   T		Street 201 Isabella St. at 7th St. Bridge	
Title			
5.b. Termination Date			
6. TOTAL RECEIPTS FROM ALL EMPLOYERS  C. Statement of Disbursements to the employers isted in Part B. 7. Disbursements to Officers and Employees: (a) Name (b) Salary (c) Expenses (d) Totals  9. Office and Administrative Expenses 10. Publicity 11. Fees for Professional Services 12. Loans Made 13. Other Disbursements 14. Total Disbursements (Sum of Items 8-13)  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:  Acconic Power & Propulsion  15.b. Trade Name, If any:  Acconic Power & Propulsion  15.c. To Whom Paid Name Renneth Cannon Organization Cannon Labor Relations, LLC  City Colleyville State Texas  ZIP Code + 4 76034	Necorney	State Pennsylvania Vizir Code + 4 15212	
C. Statement of Disbursements to Officers and Employees: (a) Name (b) Salary (c) Expenses (d) Totals  9. Office and Administrative Expenses 10. Publicity 11. Fees for Professional Services 12. Loans Made 13. Other Disbursements 14. Total Disbursements (Sum of Items 8-13)  15.a. Employer Name: Arconic Power & Propulsion  15.c. To Whom Paid Name Corganization Cannon Labor Relations, LLC  15. Expenses  15. Downer	5.b. Termination Date 12/30/2018	5.c. Amount	
To Disbursements to Officers and Employees: (a) Name (b) Salary (c) Expenses (d) Totals  9. Office and Administrative Expenses  10. Publicity 11. Fees for Professional Services 12. Loans Made 13. Other Disbursements 13. Other Disbursements 14. Total Disbursements (Sum of Items 8-13)  D. Schedule of Disbursements for Reportable Activity 15.a. Employer Name: Arconic Power & Propulsion  15.c. To Whom Paid Name Renneth Organization Cannon Labor Relations, ILC  City Colleyville State Texas  2IP Code + 4 76034	6. TOTAL RECEIPTS FROM ALL EMPLOYERS		
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Name Kenneth Cannon  Title Owner  Organization Cannon Labor Relations, LLC  P.O. Box, Building and Room Number, if any  Street 2207 Ballantrae Dr  City Colleyville  State Texas  ZIP Code + 4 76034	Arconic Power & Propulsion	Arconic	
Title Owner  Organization Cannon Labor Relations, LLC  P.O. Box, Building and Room Number, if any  Street 2207 Ballantrae Dr  City Colleyville  State Texas  ZIP Code + 4 76034	15.c. To Whom Paid	15.d. Amount \$33,427	
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Organization Cannon Labor Relations, LLC  their right to organize and bargain collective and also the right to refain from all such activit so long as it does not intere with Section 8(a)3.  P.O. Box, Building and Room Number, if any  Street 2207 Ballantrae Dr  City Colleyville  State Texas ZIP Code + 4 76034	Title Owner		
P.O. Box, Building and Room Number, if any  Street 2207 Ballantrae Dr  City Colleyville  State Texas ZIP Code + 4 76034	Organization Cappon Labor Polations LLC	their right to organize and bargain collective and	
Street 2207 Ballantrae Dr  City Colleyville  State Texas ZIP Code + 4 76034	cannon babot Relations, like		
Street 2207 Ballantrae Dr  City Colleyville  State Texas ZIP Code + 4 76034	P.O. Box, Building and Room Number, if any	]	
City Colleyville State Texas ZIP Code + 4 76034			
City Colleyville State Texas ZIP Code + 4 76034	Street 2207 Ballantrae Dr		
	State Texas ZIP Code + 4 76034	<b>٦</b>	
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Name of Person Filing:	File Number C-		
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 Acero Junction Now JSW Steel USA Ohio S	P.O. Box, Building and Room Number, if any		
Trade Name Acero Junction Industries			
	1300 Boden Commercial Ave		
Attention To Steve Guzy	City Mingo Junction		
Title General Manager	State Ohio ZIP Code + 4 43938		
5.b. Termination Date 02/26/2018	5.c. Amount		
6. TOTAL RECEIPTS FROM ALL EMPLOYERS	ACSIX		
	The state of the s		
C. Statement of Disbursements Report all disbursements made by the to the employers listed in Part B.	reporting organization in connection with labor relations advice or services rendered		
Disbursements to Officers and Employees:			
(a) Name (b) Salary (c) Expenses	s (d) Totals		
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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:	15.b. Trade Name, if any:		
Acero Junction now JSW Steel	Acero Junction now JSW Steel		
15.c. To Whom Paid	15.d. Amount \$15,129		
Name Kenneth Cannon	15.e. Purpose		
Title Owner	Engaged to communicate to employees regarding their right to organize and bargain collective and		
Organization Cannon Labor Relations, LLC	also the right to refain from all such activit so long as it does not intere with Section 8(a)3.		
DO Pau Puilding and Paus North			
P.O. Box, Building and Room Number, if any			
Street 2207 Ballantrae Dr			
City Colleyville			
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16. TOTAL DISBURSEMENTS FOR ALL REPORTABLE ACTIVITY			