

AGREEMENT AND ACTIVITIES REPORT



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 Reporting and Disclosure Act of 1959, as amended: (LMRDA)

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

544984

1. File Number: c 662

Person Filing

2. Name and mailing address (include ZIP Code):

Name Kenneth Cannon
Title Owner
Organization Cannon Labor Relations Consulting, LLC
P.O. Box, Bldg., Room No., if any
Street 2207 Ballantrae Dr
City Colleyville
State Texas ZIP Code + 4 76034

3. Any other address where records necessary to verify this report are kept:

Name
Title
Organization
P.O. Box, Bldg., Room No., if any
Street
City
State ZIP Code + 4

4. Date fiscal year ends:

Dec / 31

5. Type of person:

a. ☒ Individual b. ☐ Partnership c. ☐ Corporation d. ☐ Other (Specify):

Nature of Agreement or Arrangement

6. Full name and address of employer with whom made (include ZIP Code):

Name Blaine Salvator
Organization RTI International
Trade Name, if any
P.O. Box, Bldg., Room No., if any
Street 1935 Warner Rd
City Canton
State Ohio ZIP Code + 4 44707

7. Date entered into:

02 / 14 / 2014

8. Name of person(s) through whom made:

Name Blaine Salvator
Name
Name
Name
Name

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 Section VII on penalties in the instructions.)

13. Signed

President
(If other title, see instructions)

Title Sole Proprietor

14. Signed

Treasurer
(If other title, see instructions)

On 03/14/2014 1972-670-6159

Date

Telephone Number

On

Date

Telephone Number

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.):

Provide labor relations consulting to McConway & Torley during an organizing campaign. Compensation will be \$1500 per day plus expenses.

Specific Activities to be Performed

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

a. Nature of activity:

Train all managers and supervisors, conduct employees communications meeting to communicate the Company's position and ensure that employees rights are not violated.

11.b. Period during which performed:

02/14/2014 Through 3/21/2014

11.c. Extent performed:

11.d. Name and address through whom performed:

Name Blaine Salvator

Organization RTI Alloy

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

Street 1935 Warner Rd

City Canton

State Ohio ZIP Code + 4 44707

Additional Name and address through whom performed, if any:

Name

Organization

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

Street

City

State ZIP Code + 4

12.a. Identify subject groups of employees:

All hourly employees working at the above location.

12.b. Identify subject labor organizations:

International Association of Bridge, Structural, Ornamental and Reinforcing Iron Workers Union