

UNITED STATES GOVERNMENT  
NATIONAL LABOR RELATIONS BOARD

**RC PETITION**

**DO NOT WRITE IN THIS SPACE**

Case No. 10-RC-256093	Date Filed 02/11/2020
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**INSTRUCTIONS: Unless e-Filed using the Agency's website, [www.nlr.gov](http://www.nlr.gov), submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.**

**1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE** - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. **The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.**

<b>2a. Name of Employer</b> Faurecia	<b>2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)</b> 3555 Cleburne Rd TN Spring Hill 37174-
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<b>3a. Employer Representative - Name and Title</b> Alejandra Sandoval	<b>3b. Address (If same as 2b - state same)</b> 3555 Cleburne Rd TN Spring Hill 37174-
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<b>3c. Tel. No.</b> (734) 292-5801	<b>3d. Cell No.</b>	<b>3e. Fax No.</b>	<b>3f. E-Mail Address</b> Alejandra.Sandoval@faurecia.com
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<b>4a. Type of Establishment (Factory, mine, wholesaler, etc.)</b> Auto & Truck Parts	<b>4b. Principal product or service</b> Auto Door Panels	<b>5a. City and State where unit is located:</b> Spring Hill, TN
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<b>5b. Description of Unit Involved</b> <b>Included:</b> See Attached Page 2 for additional details <b>Excluded:</b> See Attached Page 2 for additional details	<b>6a. No. of Employees in Unit:</b> 150	<b>6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></b>
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**Check One:**  **7a.** Request for recognition as Bargaining Representative was made on (Date) \_\_\_\_\_ and Employer declined recognition on or about \_\_\_\_\_ (Date) (If no reply received, so state).  
 **7b.** Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

<b>8a. Name of Recognized or Certified Bargaining Agent (if none, so state).</b>	<b>8b. Address</b>
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<b>8c. Tel No.</b>	<b>8d Cell No.</b>	<b>8e. Fax No.</b>	<b>8f. E-Mail Address</b>
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<b>8g. Affiliation, if any</b>	<b>8h. Date of Recognition or Certification</b>	<b>8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)</b>
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**9. Is there now a strike or picketing at the Employer's establishment(s) involved? No** If so, approximately how many employees are participating? \_\_\_\_\_  
(Name of labor organization) \_\_\_\_\_, has picketed the Employer since (Month, Day, Year) \_\_\_\_\_.

**10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)**

<b>10a. Name</b>	<b>10b. Address</b>	<b>10c. Tel. No.</b>	<b>10d. Cell No.</b>
		<b>10e. Fax No.</b>	<b>10f. E-Mail Address</b>

**11. Election Details:** If the NLRB conducts an election in this matter, state your position with respect to any such election.

<b>11b. Election Date(s):</b> 3/3/2020	<b>11c. Election Time(s):</b> 5am-7:30pm; 1pm-3:30pm; 9pm-11:30pm	<b>11d. Election Location(s):</b> Break Room
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<b>12a. Full Name of Petitioner (including local name and number)</b> Dale Arthur United Auto Workers	<b>12b. Address (street and number, city, state, and ZIP code)</b> 10 Dharma Court KY Cold Spring 41076-
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**12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)**  
United Automobile, Aerospace and Agricultural Implement Workers of America, UAW

<b>12d. Tel No.</b> (859) 803-3225	<b>12e. Cell No.</b>	<b>12f. Fax No.</b>	<b>12g. E-Mail Address</b> darthur@uaw.net
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<b>13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.</b>	
<b>13a. Name and Title</b>	<b>13b. Address (street and number, city, state, and ZIP code)</b>

<b>13c. Tel No.</b>	<b>13d. Cell No.</b>	<b>13e. Fax No.</b>	<b>13f. E-Mail Address</b>
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**I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.**

<b>Name (Print)</b> Dale Arthur	<b>Signature</b> Dale Arthur	<b>Title</b> Organizer	<b>Date</b> 02/11/2020 10:08:37
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**WILLFUL FALSE STATEMENTS ON THIS PETITION 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 representation 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.

Attachment

<b>DO NOT WRITE IN THIS SPACE</b>	
Case	Date Filed
10-RC-256093	02/11/2020

**Employees Included**

All full time and regular part time production and maintenance employees.

**Employees Excluded**

All other employees including contract temporary employees, office employees, clerical employees, professional and managerial employees, guards and supervisors as defined by the act.



UNITED STATES GOVERNMENT  
NATIONAL LABOR RELATIONS BOARD  
**RC PETITION**

DO NOT WRITE IN THIS SPACE	
Case No. <b>10-RC-256885</b>	Date Filed <b>February 25, 2020</b>

**INSTRUCTIONS: Unless e-Filed using the Agency's website, [www.nlr.gov](http://www.nlr.gov), submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.**

**1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE** - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. **The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.**

<b>2a. Name of Employer</b> Appalachian Power Company	<b>2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)</b> 2255 Prospect Dr VA Christiansburg 24073-
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<b>3a. Employer Representative - Name and Title</b> Jaime Beckelhimer	<b>3b. Address (If same as 2b - state same)</b> 500 Lee St East WV Charleston 25301-
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<b>3c. Tel. No.</b> (304) 348-4163	<b>3d. Cell No.</b> (304) 552-7517	<b>3e. Fax No.</b> (304) 348-4159	<b>3f. E-Mail Address</b> jbeckelhimer@aep.com
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<b>4a. Type of Establishment (Factory, mine, wholesaler, etc.)</b> Electric Utilities	<b>4b. Principal product or service</b> Electricity distribution and service.	<b>5a. City and State where unit is located:</b> Christiansburg, VA
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<b>5b. Description of Unit Involved</b> <b>Included:</b> See Attached Page 2 for additional details <b>Excluded:</b> See Attached Page 2 for additional details	<b>6a. No. of Employees in Unit:</b> 13	<b>6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/></b>
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**Check One:**  **7a.** Request for recognition as Bargaining Representative was made on (Date) \_\_\_\_\_ and Employer declined recognition on or about \_\_\_\_\_ (Date) (If no reply received, so state).  
 **7b.** Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

<b>8a. Name of Recognized or Certified Bargaining Agent (If none, so state).</b>	<b>8b. Address</b>
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<b>8c. Tel. No.</b>	<b>8d. Cell No.</b>	<b>8e. Fax No.</b>	<b>8f. E-Mail Address</b>
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<b>8g. Affiliation, if any</b>	<b>8h. Date of Recognition or Certification</b>	<b>8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)</b>
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**9. Is there now a strike or picketing at the Employer's establishment(s) involved? No** If so, approximately how many employees are participating? \_\_\_\_\_  
(Name of labor organization) \_\_\_\_\_, has picketed the Employer since (Month, Day, Year) \_\_\_\_\_.

**10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)**

<b>10a. Name</b>	<b>10b. Address</b>	<b>10c. Tel. No.</b>	<b>10d. Cell No.</b>
		<b>10e. Fax No.</b>	<b>10f. E-Mail Address</b>

**11. Election Details:** If the NLRB conducts an election in this matter, state your position with respect to any such election.

<b>11a. Election Type:</b> <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail
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<b>11b. Election Date(s):</b> 03/19/2020	<b>11c. Election Time(s):</b> 7:00 AM to 7:30 AM	<b>11d. Election Location(s):</b> Appalachian Power at its Christiansburg/Glen Lyn, VA facilities located at
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<b>12a. Full Name of Petitioner (including local name and number)</b> DALE MCCRAY LOCAL UNION 978, INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS, AFL-CIO	<b>12b. Address (street and number, city, state, and ZIP code)</b> 25049 VETERANS MEM HWY WV TERRA ALTA 26764-
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**12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)**  
INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS, AFL-CIO

<b>12d. Tel. No.</b> (304) 841-2140	<b>12e. Cell No.</b> (304) 841-2140	<b>12f. Fax No.</b>	<b>12g. E-Mail Address</b> dale_mccray@ibew.org
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**13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.**

<b>13a. Name and Title</b>	<b>13b. Address (street and number, city, state, and ZIP code)</b>
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<b>13c. Tel. No.</b>	<b>13d. Cell No.</b>	<b>13e. Fax No.</b>	<b>13f. E-Mail Address</b>
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**I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.**

<b>Name (Print)</b> DALE MCCRAY	<b>Signature</b> Dale McCray	<b>Title</b> Lead Organizer	<b>Date</b> 02/25/2020 09:20:19
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**WILLFUL FALSE STATEMENTS ON THIS PETITION 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 representation 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.

Attachment

<b>DO NOT WRITE IN THIS SPACE</b>	
Case	Date Filed

**Employees Included**

All full-time and part-time Line Mechanics and Line Servicer employees employed by the Employer at its Christiansburg/Glen Lyn, VA facilities located at 2255 Prospect Dr, Christiansburg, VA 24073 and 167 Houston Ln, Glen Lyn, VA 24093.

**Employees Excluded**

All other employees, office clerical employees, confidential employees, managers, and all professional employees, guards and supervisors as defined in the Act.



INSTRUCTIONS: Unless e-Filed using the Agency's website, [www.nlr.gov](http://www.nlr.gov), submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 7 below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RD- DECERTIFICATION (REMOVAL OF REPRESENTATIVE) - A substantial number of employees assert that the certified or currently recognized bargaining representative is no longer their representative. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer <b>Spire</b>		2b. Address(es) of Establishment(s) involved (Street and number, city, state, ZIP code) <b>700 Market St. Louis Mo 63101</b>	
3a. Employer Representative - Name and Title <b>Bill Stovall Human Resources</b>		3b. Address (If same as 2b - state same) <b>Same</b>	
3c. Tel. No. <b>314-342-0726</b>	3d. Fax No. <b>314-641-2152</b>	3e. Cell No. <b>678-463-6631</b>	3f. E-Mail Address <b>bill.stovall@Spire Energy.com</b>
4a. Type of Establishment (Factory, mine, wholesaler, etc.) <b>Utility Provider</b>		4b. Principal product or service <b>695</b>	

5a. Description of Unit Involved Included: <b>Dispatcher, Dispatcher/Clerk, Storekeeper, Storekeeper/Clerk, Dispatcher/Collector, Meter Reader, Collector, Collector/Clerk, Collector, crewman, Sanitor/Sanitress, and General clerk</b> Excluded: <b>All employees in classifications presently represented by Local Union 10548 of the United States and Canada AFL-CIO, all Birmingham Division employees, all General office employees, all clerical employees, guards, and all employees supervisors as defined in the Act.</b>		5b. City and State where unit is located: <b>Anniston, Gadsden, East Gadsden, St. Clair, Montgomery, Opelika, Phenix City, Selma and Tuscaloosa Alabama</b>
6. No. of Employees in Unit <b>55</b>	7. Do a substantial number (50% or more) of the employees in the unit no longer wish to be represented by the certified or currently recognized bargaining representative? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

8a. Name of Recognized or Certified Bargaining Agent <b>United Steelworker Local Union #12030-A</b>		8b. Affiliation, if any <b>AFL-CIO</b>
8c. Address <b>1413 Thompson Circle suite 101 Gardendale AL 35071</b>		8d. Tel. No. <b>205-681-035</b>
		8e. Cell No. <b>205-681-0138</b>
		8f. Fax No.
		8g. E-Mail Address

9. Date of Recognition or Certification <b>May 1st 2017</b>	10. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) <b>April 30 2020</b>
11a. Is there now a strike or picketing at the Employer's establishment(s) involved? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
11b. If so, approximately how many employees are participating?	

11c. The Employer has been picketed by or on behalf of (Insert Name) \_\_\_\_\_ a labor organization, of (Insert Address) \_\_\_\_\_ since (Month, Day, Year) \_\_\_\_\_

12. Organizations or individuals other those named in items 8 and 11c, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5 above. (If none, so state)

12a. Name	12b. Address	12c. Tel. No.	12d. Fax No.
		12e. Cell No.	12f. E-Mail Address

13. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election. <b>Mail</b>		13a. Election Type: <input type="checkbox"/> Manual <input checked="" type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail
13b. Election Date(s) <b>Proposed date Feb 25, 2020</b>	13c. Election Time(s) <b>N/A</b>	13d. Election Location(s) <b>Mail Ballot</b>

14. Full Name of Petitioner  
**(b) (6), (b) (7)(C)**

14a. Address (Street and number, city, state, ZIP code) <b>(b) (6), (b) (7)(C)</b>	14b. Tel. No. <b>(b) (6), (b) (7)(C)</b>	14c. Fax No.
	14d. E-Mail Address <b>(b) (6), (b) (7)(C)</b>	

14f. Affiliation, if any **(b) (6), (b) (7)(C)**

15. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

15a. Name <b>(b) (6), (b) (7)(C)</b>	15b. Title <b>(b) (6), (b) (7)(C)</b>
15c. Address (Street and number, city, state, ZIP code) <b>(b) (6), (b) (7)(C)</b>	15d. Tel. No. <b>(b) (6), (b) (7)(C)</b>
	15e. Fax No.
	15f. Cell No. <b>(b) (6), (b) (7)(C)</b>
	15g. E-Mail Address <b>(b) (6), (b) (7)(C)</b>

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

<b>(b) (6), (b) (7)(C)</b>	<b>(b) (6), (b) (7)(C)</b>	<b>(b) (6), (b) (7)(C)</b>	Date Filed <b>Feb 3 2020</b>
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UNITED STATES OF AMERICA  
NATIONAL LABOR RELATIONS BOARD  
RD PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 10-RD-257071	Date Filed February 27, 2020

**INSTRUCTIONS:** Unless e-Filed using the Agency's website, [www.nlr.gov](http://www.nlr.gov), submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 7 below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

**1. PURPOSE OF THIS PETITION - RD - DECERTIFICATION (REMOVAL OF REPRESENTATIVE)** - A substantial number of employees assert that the certified or currently recognized bargaining representative is no longer their representative. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer Altec inc	2b. Address(es) of Establishment(s) involved (Street and number, city, state, ZIP code) 1730 Vanderbilt rd. Birmingham AL. 35234
3a. Employer Representative - Name and Title Jay Eichelberger General Manager	3b. Address (if same as 2b - state same) Same

3c. Tel. No. 205-458-1599	3d. Fax No.	3e. Cell No.	3f. E-Mail Address
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4a. Type of Establishment (Factory, mine, wholesaler, etc.) Factory	4b. Principal product or service Utility bodies
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5a. Description of Unit Involved Included: All bargaining unit employees Excluded:	5b. City and State where unit is located: Birmingham, AL.
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6. No. of Employees in Unit 330	7. Do a substantial number (30% or more) of the employees in the unit no longer wish to be represented by the certified or currently recognized bargaining representative? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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8a. Name of Recognized or Certified Bargaining Agent United Steelworkers local #7740	8b. Affiliation, if any
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8c. Address 1413 Thompson cir. #101 Gardendale, AL. 35071	8d. Tel. No. (205) 331-0137	8e. Cell No.	8f. Fax No.	8g. E-Mail Address
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9. Date of Recognition or Certification March 18, 1970	10. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) April 30, 2020
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11a. Is there now a strike or picketing at the Employer's establishment(s) involved? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	11b. If so, approximately how many employees are participating?
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11c. The Employer has been picketed by or on behalf of (Insert Name) (Insert Address) N/A	11b. If so, approximately how many employees are participating? a labor organization, of since (Month, Day, Year)
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12. Organizations or individuals other than those named in items 8 and 11c, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5 above. (If none, so state) None

12a. Name	12b. Address	12c. Tel. No.	12d. Fax No.
		12e. Cell No.	12f. E-Mail Address

13. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.	13a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input checked="" type="checkbox"/> Mixed Manual/Mail
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13b. Election Date(s) 3/24/20	13c. Election Time(s) 12:00pm	13d. Election Location(s)
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14. Full Name (b) (6), (b) (7)(C)	14b. Tel. No.	14c. Fax No.
14a. Address (b) (6), (b) (7)(C)	14d. Cell No. (b) (6), (b) (7)(C)	14e. E-Mail Address (b) (6), (b) (7)(C)

15. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

15a. Name Same	15b. Title	
15c. Address (Street and number, city, state, ZIP code)	15d. Tel. No.	15e. Fax No.
	15f. Cell No.	15g. E-Mail Address

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print) (b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	(b) (6), (b) (7)(C)	Date Filed 02/25/20
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