

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 13-RC-225054	Date Filed 8/6/18

INSTRUCTIONS: Unless e-Filed using the Agency's website, 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.**

2a. Name of Employer
John B. Sanfilippo & Son, Inc.

2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)
1703 N. Randall Road, Elgin, IL 60123

3a. Employer Representative - Name and Title
Julia Pronitcheva Human Resources Director

3b. Address (if same as 2b - state same)
Same

3c. Tel. No. (847) 289-1800 **3d. Cell No.** N/A **3e. Fax No.** (847) 289-1843 **3f. E-Mail Address** JPronitcheva@JBSSINC.com

4a. Type of Establishment (Factory, mine, wholesaler, etc.)
Warehouse

4b. Principal product or service
Nut mix

5a. City and State where unit is located:
Elgin, IL

5b. Description of Unit Involved
Included: See attachment
Excluded: All other employees, including production and maintenance employees, managerial employees, confidential employees, office clerical employees and guards, professional employees and supervisors as defined in the Act.

6a. No. of Employees in Unit:
70

6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes No

Check One: **7a.** Request for recognition as Bargaining Representative was made on (Date) by this petition 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.

8a. Name of Recognized or Certified Bargaining Agent (if none, so state).
None

8b. Address

8c. Tel No. **8d. Cell No.** **8e. Fax No.** **8f. E-Mail Address**

8g. Affiliation, if any **8h. Date of Recognition or Certification** **8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)**

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)

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

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

11a. Election Type: Manual Mail Mixed Manual/Mail

11b. Election Date(s): Monday, August 27, 2018 **11c. Election Time(s):** From 1:30 p.m. to 4:30 p.m. **11d. Election Location(s):** TTP Conference Room

12a. Full Name of Petitioner (including local name and number)
Teamsters Local Union 330

12b. Address (street and number, city, state, and ZIP code)
2400 Big Timber, Bldg. B, Suite 201, Elgin, IL 60124

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
International Brotherhood of Teamsters

12d. Tel No. (847) 695-1516 **12e. Cell No.** (708) 927-8966 **12f. Fax No.** (847) 695-1579 **12g. E-Mail Address** eduardo@teamstersjc25.com

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

13a. Name and Title Eduardo Farrera, Organizer **13b. Address (street and number, city, state, and ZIP code)** 1300 W Higgins Rd suite 220 Park Ridge, IL 60068

13c. Tel No. (847) 292-1225 **13d. Cell No.** (708) 927-8966 **13e. Fax No.** (847) 292-1412 **13f. E-Mail Address** eduardo@teamstersjc25.com

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) Eduardo Farrera	Signature 	Title Organizer	Date 8/6/2018
--	----------------------	---------------------------	-------------------------

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.

5. Unit Involved

Included:

All full-time and regular part-time warehouse employees, including:

Loaders

Material warehousemen

Forklift operators

Order pickers

Auditors

Wave planners

Scale operators

Cycle counters and

Plant shipping and receiving clerks

Employed by the employer at its facility currently located at 1703 N. Randall Road, Elgin, IL 60123

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 13-RC-226034	Date Filed 8/22/18

INSTRUCTIONS: Unless e-Filed using the Agency's website, 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.**

2a. Name of Employer
Naperville Chrysler Jeep Dodge Ram

2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)
1565 W. Ogden Ave. Naperville, IL 60540 Dupage County

3a. Employer Representative - Name and Title
Tim McKay, Service Manager

3b. Address (If same as 2b - state same)
SAME

3c. Tel. No. 630-505-8282 **3d. Cell No.** 847-209-2277 **3e. Fax No.** 630-505-0799 **3f. E-Mail Address** tim@napervillejeep.com

4a. Type of Establishment (Factory, mine, wholesaler, etc.) Car Dealership **4b. Principal product or service** New/Used Vehicle Sales and Service **5a. City and State where unit is located:** Naperville, IL

5b. Description of Unit Involved
Included: All Full Time and Regular Part time technicians, including Journeymen, Apprentices, Semiskilled and Lube Techs who are employed at the employer's facility located at 1565 W. Ogden Ave Naperville, IL.
Excluded: All Other employees, including Service Writers, Porters, Parts Department, Office Clerical, Professional, Managerial, Guards and Supervisors, as defined by the Act.

6a. No. of Employees in Unit: 14
6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes No

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). **Petition to serve as request.**
 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (If none, so state). None **8b. Address**

8c. Tel No. **8d Cell No.** **8e. Fax No.** **8f. E-Mail Address**

8g. Affiliation, if any **8h. Date of Recognition or Certification** **8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)**

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)

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

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

11b. Election Date(s): September 11, 2018 **11c. Election Time(s):** 10:00 am - 11:00 am **11d. Election Location(s):** Break Room

12a. Full Name of Petitioner (including local name and number) Local Lodge 701, International Association of Machinists & Aerospace Workers AFL-CIO **12b. Address (street and number, city, state, and ZIP code)** 113 Republic Avenue, Ste. 100, Joliet, IL 60435


12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) International Association of Machinists & Aerospace Workers AFL-CIO

12d. Tel No. 815-280-6400 **12e. Cell No.** 815-214-4587 **12f. Fax No.** 815-280-6345 **12g. E-Mail Address** wlepinske@iamaw.org

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.
13a. Name and Title Bill LePinske, Special Representative/TOL **13b. Address (street and number, city, state, and ZIP code)** 113 Republic Avenue, Ste. 100, Joliet, IL 60435

13c. Tel No. 815-280-6400 **13d. Cell No.** 815-214-4587 **13e. Fax No.** 815-280-6345 **13f. E-Mail Address** wlepinske@iamaw.org

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) Bill LePinske	Signature 	Title Special Representative/TOL	Date August 22, 2018
--------------------------------------	---	--	--------------------------------

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.

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 13-RC-226298	Date Filed 8/27/18

INSTRUCTIONS: Unless e-Filed using the Agency's website, 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.**

2a. Name of Employer: Lipari Foods	2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 26661 Bunert Rd, Warren, MI 48089
--	--

3a. Employer Representative - Name and Title: Thom Lipari	3b. Address (if same as 2b - state same): Same
---	--

3c. Tel. No. 586-447-3500	3d. Cell No.	3e. Fax No.	3f. E-Mail Address thom@liparifoods.com; info@liparifoods.com
-------------------------------------	---------------------	--------------------	---

4a. Type of Establishment (Factory, mine, wholesaler, etc.): Wholesaler	4b. Principal Product or Service Food	5a. City and State where unit is located: Melrose Park, IL
---	---	--

5b. Description of Unit Involved: Included: See attached.	6a. Number of Employees in Unit: 26
---	---

Excluded:	6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
------------------	---

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.

8a. Name of Recognized or Certified Bargaining Agent (If none, so state) None	8b. Address:
---	---------------------

8c. Tel. No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
---------------------	---------------------	--------------------	---------------------------

8g. Affiliation, if any:	8h. Date of Recognition or Certification	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)
---------------------------------	---	--

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)

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

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

11b. Election Date(s): August 12, 2018	11c. Election Time(s): 4:30 a.m. to 6:30 a.m.	11d. Election Location(s): To be determined
--	---	---

12a. Full Name of Petitioner (including local name and number): Teamsters Local Union No. 703	12b. Address (street and number, city, State and ZIP code): 1333 Butterfield Rd #110, Downers Grove, IL 60515
---	---

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state):
International Brotherhood of Teamsters

12d. Tel. No. (312) 738-1350	12e. Cell No.	12f. Fax No.	12g. E-Mail Address
--	----------------------	---------------------	----------------------------

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

13a. Name and Title: Robert S. Cervone	13b. Address (street and number, city, State and ZIP code): 8 S. Michigan Ave., 1900, Chicago, IL 60603
--	---

13c. Tel. No. (312) 372-1361	13d. Cell No.	13e. Fax No. (312) 372-6599	13f. E-Mail Address rcervone@laboradvocates.com
--	----------------------	---------------------------------------	---

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) Robert S. Cervone	Signature 	Title Attorney	Date 08/27/18
--	---	--------------------------	-------------------------

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 may cause the NLRB to decline to invoke its processes.

Lipari Foods bargaining unit:

Included: All full-time and regular part-time drivers and helpers employed at the depot current located at 3400 West Lake Street, Melrose Park, IL 60160;

Excluded: All other employees, office clerical employees, and guards, professional employees and supervisors as defined in the Act.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 13-RC-226643	Date Filed 8/31/18

INSTRUCTIONS: Unless e-Filed using the Agency's website, 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.			
2a. Name of Employer United Parcel Service-CSI		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 501 Busse Rd IL Elk Grove Village 60007-6761	
3a. Employer Representative - Name and Title Scott Gossett		3b. Address (if same as 2b - state same) 501 Busse Rd IL Elk Grove Village 60007-6761	
3c. Tel. No. (630) 274-1609	3d. Cell No. (630) 749-8743	3e. Fax No. (630) 274-1895	3f. E-Mail Address sgossett@ups.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Trucking		4b. Principal product or service Freight and Air Freight	
5a. City and State where unit is located: Elk Grove Village, IL			6a. No. of Employees in Unit: 1
5b. Description of Unit Involved Included: See Attached Page 2 for additional details			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"/>
Excluded: See Attached Page 2 for additional details			
Check One: <input checked="" type="checkbox"/> 7a. Request for recognition as Bargaining Representative was made on (Date) 08/27/2018 and Employer declined recognition on or about 08/27/2018 (Date) (if no reply received, so state). Yes			
<input type="checkbox"/> 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.			
8a. Name of Recognized or Certified Bargaining Agent (if none, so state).		8b. Address	
8c. Tel No.	8d Cell No.	8e. Fax No.	8f. E-Mail Address
8g. Affiliation, if any		8h. Date of Recognition or Certification	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)
9. Is there now a strike or picketing at the Employer's establishment(s) involved? _____ 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)			
10a. Name		10b. Address	
10c. Tel. No.		10d. Cell No.	
10e. Fax No.		10f. E-Mail Address	
11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.		11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail	
11b. Election Date(s): September 4, 2018		11c. Election Time(s): 6:00 a.m. 7:00 a.m.	
11d. Election Location(s): Conference Room		12a. Full Name of Petitioner (including local name and number) Alex Juanita Tillett-Saks Teamsters Local Union No. 705	
12b. Address (street and number, city, state, and ZIP code) 1645 W. Jackson Blvd. 7th Floor IL Chicago 60612		12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) International Brotherhood of Teamsters	
12d. Tel No. (312) 738-2800	12e. Cell No.	12f. Fax No. (312) 738-2823	12g. E-Mail Address ats@L705ibt.org
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
13a. Name and Title		13b. Address (street and number, city, state, and ZIP code)	
13c. Tel No.	13d. Cell No.	13e. Fax No.	13f. 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) Alex Juanita Tillett-Saks	Signature Alex Tillett-Saks	Title Legal Counsel	Date 08/29/2018 10:45:55

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.

DO NOT WRITE IN THIS SPACE

Case

Date Filed

Attachment

Employees Included
Screener Specialist

Employees Excluded
Managers, Supervisors, and Sales Representatives, and Security Personnel