

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

DO NOT WRITE IN THIS SPACE	
Case No. <b>09-RD-252758</b>	Date Filed <b>December 4, 2019</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: 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**  
The Printing Plant

**2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)**  
1330 Tennessee Ave.  
OH Cincinnati 45229

**3a. Employer Representative - Name and Title**  
Tod Leonard President

**3b. Address (If same as 2b - state same)**  
1330 Tennessee Ave.  
OH Cincinnati 45229

**3c. Tel. No.**  
(513) 482-7500

**3d. Cell No.**

**3e. Fax No.**

**3f. E-Mail Address**  
Tod@printingplant.com

**4a. Type of Establishment (Factory, mine, wholesaler, etc.)**  
Printing Services

**4b. Principal product or service**  
Flexographic or blank labels

**5a. City and State where unit is located:**  
Cincinnati, OH

**5b. Description of Unit Involved**  
**Included:** See Attached Page 2 for additional details

**6a. No. of Employees in Unit:**  
26

**6b. 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? Yes  No**

**Excluded:** See Attached Page 2 for additional details

**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**  
Teamsters Local#100 Dave Hibbard Business Agent

**8b. Address**  
2100 Oak Rd  
OH Cincinnati 45241

**8c. Tel No.**  
(513) 769-5100

**8d. Cell No.**

**8e. Fax No.**

**8f. E-Mail Address**

**8g. Affiliation, if any**  
International Brotherhood of Teamsters

**8h. Date of Recognition or Certification**

**8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)**  
02/29/2020

**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 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-thursday

**11c. Election Time(s):**  
3:00pm

**11d. Election Location(s):**  
The Printing Plant

**12a. Full Name of Petitioner (b) (6), (b) (7)(C)**  
The Printing Plant

**12b. Address (street and number, city, state, and ZIP code)**  
(b) (6), (b) (7)(C)

**12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)**  
Teamsters Local 100

**12d. Tel No.**  
(b) (6), (b) (7)(C)

**12e. Cell No.**

**12f. Fax No.**

**12g. E-Mail Address**  
(b) (6), (b) (7)(C)

**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) (b) (6), (b) (7)(C)	Signature (b) (6), (b) (7)(C)	Title (b) (6), (b) (7)(C)	Date 12/2/2019 18:41:22
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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.

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Attachment

Employees Included  
Union Employees

Employees Excluded  
Non-Union Employees