

Case No. 09-RC-238532	Date Filed 3-28-2019
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INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.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: Altice Technical Services U.S. Corp.	2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 130 Upton Street, Shrewsbury, West Virginia 25125
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3a. Employer Representative - Name and Title: Larry Hoyle, Supervisor	3b. Address (if same as 2b - state same): (same as 2b)
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3c. Tel. No. 304-890-6791	3d. Cell No.	3e. Fax No.	3f. E-Mail Address larry.hoyle@AlticeTechServicesUSA.com
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4a. Type of Establishment (Factory, mine, wholesaler, etc.) technical services	4b. Principal Product or Service telecommunications	5a. City and State where unit is located: Shrewsbury, West Virginia
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5b. Description of Unit Involved: Included: All full-time and regular part-time Broad Band Technicians and Warehouse Employees Excluded: All other employees, guards and supervisors as defined in the Act	6a. Number of Employees in Unit: 32
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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) _____ (If no reply received, so state) and Employer declined recognition
 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:
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8c. Tel. No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
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8g. Affiliation, if any:	8h. Date of Recognition or Certification	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)
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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)
None

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

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

11b. Election Date(s): April 10, 2019	11c. Election Time(s): 8 a.m. to 12:00 noon	11d. Election Location(s): Conference Room
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12a. Full Name of Petitioner (including local name and number): Communications Workers of America, AFL-CIO, CLC	12b. Address (street and number, city, State and ZIP code): 9602-D Martin Luther King Jr. Highway, Lanham, MD 20806
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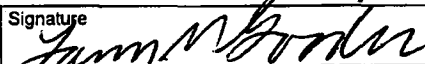
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state):

12d. Tel. No. 301-429-2500	12e. Cell No.	12f. Fax No. 301-429-2501	12g. E-Mail Address icosgrove@cwa-union.org
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13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.	
13a. Name and Title: Laurence M. Goodman, Legal Counsel	13b. Address (street and number, city, State and ZIP code): Willig, Williams & Davidson, 1845 Walnut Street, 24th Floor, Phil., PA 19103

13c. Tel. No. (215) 656-3608	13d. Cell No.	13e. Fax No. (215) 561-5135	13f. E-Mail Address lgoodman@wwdlaw.com
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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.

Name (Print) Laurence M. Goodman	Signature 	Title Legal Counsel	Date 3/27/19
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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 may 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. 09-RC-238553	Date Filed 3-28-2019
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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: Altice Technical Services U.S. Corp.	2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 405 George Kostas Drive, Logan, West Virginia 25601
3a. Employer Representative - Name and Title: Lee Hall, Supervisor	3b. Address (if same as 2b - state same): (same as 2b)

3c. Tel. No. 304-549-9265	3d. Cell No.	3e. Fax No.	3f. E-Mail Address lee.hall@AlticeTechServicesUSA.com
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4a. Type of Establishment (Factory, mine, wholesaler, etc.) technical services	4b. Principal Product or Service telecommunications	5a. City and State where unit is located: Logan, West Virginia
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5b. Description of Unit Involved: Included: All full-time and regular part-time Broad Band Technicians and Warehouse Employees Excluded: All other employees, guards and supervisors as defined in the Act	6a. Number of Employees in Unit: 10
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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) _____ N/A 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:
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8c. Tel. No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
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8g. Affiliation, if any:	8h. Date of Recognition or Certification	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)
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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)
None

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): April 10, 2019	11c. Election Time(s): 8 a.m. to 12:00 noon	11d. Election Location(s): Conference Room
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12a. Full Name of Petitioner (including local name and number): Communications Workers of America, AFL-CIO, CLC	12b. Address (street and number, city, State and ZIP code): 9602-D Martin Luther King Jr. Highway, Lanham, MD 20806
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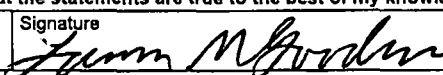
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state):

12d. Tel. No. 301-429-2500	12e. Cell No.	12f. Fax No. 301-429-2501	12g. E-Mail Address jcosgrove@cwa-union.org
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13a. Name and Title: Laurence M. Goodman, Legal Counsel	13b. Address (street and number, city, State and ZIP code): Willig, Williams & Davidson, 1845 Walnut Street, 24th Floor, Phil., PA 19103
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13c. Tel. No. (215) 656-3608	13d. Cell No.	13e. Fax No. (215) 561-5135	13f. E-Mail Address lgoodman@wwdlaw.com
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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.

Name (Print) Laurence M. Goodman	Signature 	Title Legal Counsel	Date 3/27/19
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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

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 09-RC-238692	Date Filed March 29, 2019

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 Plibrico, LLC	2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 454 County Road 33 OH Oak Hill 45656-
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3a. Employer Representative - Name and Title Jeff Smith	3b. Address (If same as 2b - state same) 454 County Road 33 OH Oak Hill 45656-
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3c. Tel. No. (740) 682-7755	3d. Cell No.	3e. Fax No.	3f. E-Mail Address jsmith@plibrico.com
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4a. Type of Establishment (Factory, mine, wholesaler, etc.) Others	4b. Principal product or service Refractories	5a. City and State where unit is located: Oak Hill, OH
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5b. Description of Unit Involved Included: See Attached Page 2 for additional details Excluded: See Attached Page 2 for additional details	6a. No. of Employees in Unit: 12 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"/>
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Check One: **7a.** Request for recognition as Bargaining Representative was made on (Date) 03/29/2019 and Employer declined recognition on or about _____ (Date) (If no reply received, so state). No reply received
 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
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8c. Tel No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
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8g. Affiliation, if any	8h. Date of Recognition or Certification	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)
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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)

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
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11b. Election Date(s): April 15, 2019	11c. Election Time(s): 5-9am and 5-9pm	11d. Election Location(s): Main break room
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12a. Full Name of Petitioner (including local name and number) Randy Basham United Steelworkers-District 1	12b. Address (street and number, city, state, and ZIP code) 8520B Ohio River Rd OH Wheelersburg 45946-
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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 Steel, Paper and Forestry, Manufacturing, Energy, allied and Industrial Service Workers International Union

12d. Tel No. (740) 574-1950	12e. Cell No. (740) 412-4674	12f. Fax No. (740) 574-1920	12g. E-Mail Address rbasham@usw.org
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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)
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13c. Tel No.	13d. Cell No.	13e. Fax No.	13f. E-Mail Address
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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.

Name (Print) Randy Basham	Signature Donald E. Blatt, Assistant to the	Title USW District 1 Organizing Coordinator	Date 03/29/2019 11:37:54
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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.

DO NOT WRITE IN THIS SPACE

Attachment

Case	Date Filed
09-RC-238692	March 29, 2019

Employees Included

All full-time and part-time production and maintenance employees at the Oak Hill facility

Employees Excluded

Office and clerical, professional employees, guards and supervisors as defined by the Act.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RM PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 09-RM-236888	Date Filed March 1, 2019

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 a certificate of service showing service on all parties named in the petition of the following: (1) the petition; (2) Statement of Position form; and (3) Description of Procedures in Certification and Decertification Cases (Form NLRB 4812). The petition must also be accompanied by evidence supporting the statement that a labor organization has made a demand for recognition on the employer or that the employer has good faith uncertainty about majority support for an existing representative. However, if the evidence reveals the names and/or number of employees who no longer wish to be represented, the evidence shall not be served on any party.

1. PURPOSE OF THIS PETITION: RM-CERTIFICATION OF REPRESENTATIVE - One or more individuals or labor organizations have presented a claim to the Employer/Petitioner to be recognized as the representative of employees of the Employer/Petitioner or the Employer/Petitioner has a good faith uncertainty about majority support for an existing representative. If a charge under Section 8(b)(7) of the Act has been filed involving the Employer/Petitioner named in this petition, this statement shall not be deemed made. 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/Petitioner
Airgas USA, LLC

2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)
1 Oregon Street, Charleston, WV 25387

3a. Employer/Petitioner Representative - Name and Title
Jim Lord, Vice President of Operations, Mid-American Region

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

3c. Tel. No.
270-791-4706

3d. Cell No.
270-791-4706

3e. Fax No.
304-414-3383

3f. E-Mail Address
jim.lord@airgas.com

4a. Type of Establishment (Factory, mine, wholesaler, etc.)
Gases fill plant

4b. Principal product or service
Industrial and medical packaged gases

5a. Description of Unit Involved

Included: All plant employees including truck loaders, order pullers, cylinder re-qualifiers, re-testers, plant drivers, lab employees, cylinder repair/sorters, fillers, plant admin assistants and cylinder shipper/coordinators

Excluded: All fire protection employees, sales branch employees, route drivers, counter sales employees, office clerical employees and all professional employees, guards and supervisors as defined in the Act.

5b. City and State where unit is located:
Charleston, WV

6. No. of Employees in Unit:
14

Unless a charge alleging a violation of Section 8(b)(7) is pending, check EITHER item 7a or 7b, whichever is applicable

7a. A labor organization made a demand for recognition on the Employer/Petitioner on (Date) _____

7b. The Employer/Petitioner has a good faith uncertainty about majority support for an existing representative.

8a. Recognized or Certified Bargaining Agent - Name
Chauffeurs, Teamsters and Helpers Local No. 175

8b. Affiliation, if any
IBT

8c. Address
267 Staunton Avenue SW, South Charleston, WV 25303

8d. Tel. No.
304-744-2193

8e. Cell No.

8f. Fax No.
304-744-5649

8g. E-Mail Address
lfarley.175@suddenlinkmail.com

9. Date of Recognition or Certification
July 10, 2014

10. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)
5.22.2019

11. Is there now a strike or picketing at the Employer's establishment(s) involved? No If so, approximately how many employees are participating? NA
(Name of labor organization) NA has picketed the Employer since (Month, Day, Year) NA

12. Organizations or individuals other than those named in item 8, which have a contract with the Employer/Petitioner or represent employees of the Employer/Petitioner or demanded 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 and affiliation if any
NA

12b. Address
NA

12c. Tel. No.
NA

12d. Cell No.
NA

12e. Fax No.
NA

12f. E-Mail Address
NA

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

13a. Election Type: Manual Mail Mixed Manual/Mail

13b. Election Date(s):
March 8, 2019 or March 15, 2019

13c. Election Time(s):
6:00 AM - 8:00 AM

13d. Election Location(s):
Branch Training Room

14. Representative of the Employer/Petitioner who will accept service of all papers for purposes of the representation proceeding.

14a. Name and Title
Michael C. Murphy, VP & Counsel, Labor Practice Group

14b. Address (street and number, city, state, and ZIP code)
3223 N. Elston Avenue, Chicago, IL 60618

14c. Tel No.
215-990-4867


14d. Cell No.
215-990-4867

14e. Fax No.

14f. E-Mail Address
michael.murphy@airgas.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)
Michael C. Murphy

Signature


Title
VP & Counsel, Airgas Labor Practice Group

Date
3.1.2019

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.