

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: Ryder Truck Rentals, Inc		2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 26025 1st Street, Westlake, OH 44145	
3a. Employer Representative Name and Title: Alan Siegman, Senior Director, Labor Relations		3b. Address (if same as 2b - state same): 4957 Oakton Street, Suite 245, Skokie, IL 60077	

3c. Tel. No. (847) 213-0475	3d. Cell No. (847) 224-9564	3e. Fax No. (847) 278-8617	3f. E-Mail Address alan.siegman@ryder.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Garage		4b. Principal Product or Service Service Rental Trucks	5a. City and State where unit is located: Westlake, OH

5b. Description of Unit Involved: Included: Service and Maintenance Employees Excluded: All others		5c. Number of Employees in Unit 2	5d. 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
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Check One: 7a. Request for recognition as bargaining representative was made on (Date) April 28, 2020 and Employer declined recognition on or about (Date) May 4, 2020 (if no reply received, so state).
 7b. Petitioner is currently recognized as bargaining representative and desires certification under the Act.

6a. Name of Recognized or Certified Bargaining Agent (if none, so state) None	6b. Address:
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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)
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: 11a. Election Type:
 Manual Mail Mixed Manual/Mail

11b. Election Date(s): June 1, 2020	11c. Election Time(s): 1:30 PM - 2:00 PM	11d. Election Location(s): Employee Lunch Room
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12a. Full Name of Petitioner (including local name and number): International Association of Machinists and Aerospace Workers, Local Lodge 1363, AFL-CIO	12b. Address (street and number, city, State and ZIP code): 4614 Prospect Ave, Room 404, Cleveland, OH 44103
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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 Association of Machinists and Aerospace Workers, AFL-CIO

12d. Tel No (216) 241-4377	12e. Cell No. (216) 215-3810	12f. Fax No. (216) 685-0888	12g. E-Mail Address rtrowslee@local1363.net
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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: Nicholas A. Scotto, Special Representative		13b. Address (street and number, city, State and ZIP code): 26 Court St, Ste 1710, Brooklyn, NY 11242
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13c. Tel No (929) 226-1724	13d. Cell No. (631) 219-4116	13e. Fax No. (646) 902-5720	13f. E Mail Address nscotto@iamaw.org
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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) Signature Title Date
Nicholas A. Scotto  Special Representative 5/8/2020

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 GOVERNMENT
NATIONAL LABOR RELATIONS BOARD

RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.	08-RC-260727	Date Filed	5/22/20
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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 National Lime & Stone Company	2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 7250 State Route 95 East OH Chesterville 43317-
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3a. Employer Representative - Name and Title Carlton P. Palmer III	3b. Address (If same as 2b - state same) 551 Lake Cascade Parkway, OH Findlay 45840-
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3c. Tel. No. (419) 422-4341	3d. Cell No.	3e. Fax No. (419) 422-3952	3f. E-Mail Address
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4a. Type of Establishment (Factory, mine, wholesaler, etc.) Basic Materials	4b. Principal product or service sand and gravel	5a. City and State where unit is located: Chesterville, OH
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5b. Description of Unit Involved Included: See Attached Page 2 for additional details	6a. No. of Employees in Unit: 6
Excluded: 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"/>

Check One: **7a.** Request for recognition as Bargaining Representative was made on (Date) 05/22/2020 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: Manual Mail Mixed Manual/Mail

11b. Election Date(s): June 19, 2020	11c. Election Time(s): 11:30 a.m. to 12:30 p.m.	11d. Election Location(s): The Red Shop Building
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12a. Full Name of Petitioner (including local name and number) Scott R Stevenson International Union of Operating Engineers, Local 18	12b. Address (street and number, city, state, and ZIP code) 1188 Dublin Road OH Columbus 43215-7005
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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 Union of Operating Engineers

12d. Tel No. (614) 486-5281	12e. Cell No. (937) 974-2180	12f. Fax No. (614) 486-7258	12g. E-Mail Address scott@iuoelocal18.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 Timothy R. Fadel Attorney Lee Fadel & Beyer LLC	13b. Address (street and number, city, state, and ZIP code) The Bridge Building, 18500 Lake Road, Suite 120 OH Rocky River 44116-
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13c. Tel No. (440) 333-2050	13d. Cell No. (216) 308-1348	13e. Fax No. (440) 333-1695	13f. E-Mail Address tfadel@leefadelbeyer.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) Timothy R. Fadel	Signature Timothy R. Fadel	Title Attorney	Date 05/22/2020 10:00:09
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Attachment

DO NOT WRITE IN THIS SPACE	
Case	Date Filed

Employees Included

All full-time operators/laborers employed by the Employer at its facility located at 7250 State Rote 95 East

Employees Excluded

all scale house employees, over the road drivers, office clerical personnel, professional employees, guards, and supervisors as defined by the Act.