FORM NURB-502 (RC) (4-16)

## UNITED STATES GÖVERNMENT NATIONAL LABOR RELATIONS BOARD R C PETITION

DO NOT WRITE IN THIS SPACE								
	07-RC-238926	Date Filed 4-2-2019						

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 NLR8-505); and (3) Descri	iption of Repres	entation Case P	rocedure	s (Form Ni.	RB 4812). The si	howing o	of intere	est should only be filed	
with the NLRB and should not be purpose of this permion. RC-	e served on the	employer or an	y other p	arty.					_
bargaining by Petitioner and Petitione	r desires to be certif	ied as representativ	ve of the em	rantial number ployees. The	or employees wish to Petitioner alleges th	o be repres nat the follo	sented for lowing of	r purposes of collective	
requests that the National Labor Re	lations Board pro-	god under its proj	per authori	ty pureuant to	Section 9 of the N	ational La	hor Relat	tions Act:	
2a. Name of Employer Ace Saginaw Paving Co.		1 .			t(s) involved (Street a	and numbe	er, city, St	tale, ZIP code)	
3a, Employer Representative Name a	and Title	See a	attachme		The plate as and				
Linda Wyatt	and I Me		3b. Address (If same as 2b - state same) 9300 Dix Ave, Dearborn, MI 48120						
3c. Tel. No.	3d Cell No.		3e, Fax N		3071. 1811 40120		il Adores	· · · · · · · · · · · · · · · · · · ·	
313 429-2355							· ·	wclevy.net	
4a. Type of Establishment (Factory, nilne	, wholesaler, etc.)	4b. Principal proc	duct or serv	ice				State where unit is focated:	j
		asphalt paving					rious lo		ĺ
5b. Description of Unit Involved					*******			a. No. of Employees in Unit:	1
Included: see attachment							85		1
· ·								b. Do a substantial number (30% more) of the employees in the	
Excluded:								nit wish to be represented by the	
							***************************************	etitioner? Yes V No	_
Check One: 7a. Request for				_ (efs(i) no eb	an	d Employe	er decline	d recognition on or about	
	(Date)								
8a. Name of Recognized or Certified B	argaining Agent (	d as Bargaining Re		e and desires 8b. Address	certification under the	Act.			-
None	an Banning a Sáine In	mano, aa ataroj.	1	00,710,5100,5					
8c, Tel No.	lid Cell No.		Be, Fax N	lo.		Bf. E-Ma	il Addres	ß	Ī
Bg. Affiliation, if any			0.00		0.46.		-15 B-1		_
ag. Attiliation, it any		8h. Date of Recognition or Certification:  8i. Expiration Date of Current or Most Contract, if any (Month, Day, Year)							
9. Is there now a strike or picketing at the	Employer's establi	shment(s) involved?	No	_ If so, approx	imately how:many or	nplayees e	aio battici	pating?	
(Name of lation organization)			eted the En	ployer 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	n any employees in	the unit described in	n item 5b.a	oove. (If none,	so state)			,	
10a Name	10b. Ad	droes			10c, Tel. No.			10d. Cell No.	
ion timite	100.70	414.35					!		
1					10e. Fax No.			10f. E-Mail Address	٦
***************************************							- 1		
<ol> <li>Election Details: If the NLRB condu any such election.</li> </ol>			***************************************				********	- 1	
GILL SUCH CIECUOIL	icis an election in th	is matter, state you	position w	th respect to	11a. Election Type	Mar	nual	Mail Mixed Manual/Mall	
11b. Election Onte(s):	11c. E	ection Time(s):	position w	th respect to	11d. Election Loca	nou(s).			_
11b. Election Data(s): Wednesday April 24, 2019	11c. E 7am-9a	ection Time(s):	position w	th respect to	11d. Election Loca Saginaw, Ulby, Bu	tion(s) non, Davi	sburg, Po	ort Huron, Michigan	-
11b. Election Onta(s): Wednesday April 24, 2019 12s. Full Name of Petitioner (Including	11c. E 7am-9a Jocal name and no	ection Time(s):	position w	th respect to	11d. Election Eoca Saginaw, Ulby, Bu 12b. Address (stre	tion(s) non, Davis	sburg, Po	ort Huron, Michigan state, and ZIP code)	
11b. Election Date(s): Wednesday April 24, 2015 12a. Full Name of Petitioner ( <i>Including</i> International Union of Operating Engine	11c. E 7am-9a Tocal name and neers, Local 324	ection Time(s): om umberj			11d. Election Eoca Saginaw, Ulby, Bu 12b. Address (stre 500 Hulet Orive, 8	tion(s) non, Davis	sburg, Po	ort Huron, Michigan state, and ZIP code)	
11b. Election Onta(s): Wednesday April 24, 2019 12s. Full Name of Petitioner (Including	11c. E 7am-9a local name and neers, Local 324	ection Time(s): om umberj			11d. Election Eoca Saginaw, Ulby, Bu 12b. Address (stre 500 Hulet Orive, 8	tion(s) non, Davis	sburg, Po	ort Huron, Michigan state, and ZIP code)	
11b. Election Date(s): Wednesday April 24, 2019 12a. Full Name of Petitioner (Including International Union of Operating Engine 12c. Full name of national or international Union of Operating Engine 12d. Tel No.	11c. E 7am-9a local name and neers, Local 324	ection Time(s): om umberj	is an alfiliat	e or constituen	11d. Election Eoca Saginaw, Ulby, Bu 12b. Address (stre 500 Hulet Orive, 8	tion(s) non, David et and nur loomfield	sburg, Po	ort Huron, Michigan slate, and ZIP code) p. Mil 48302	
11b. Election Date(s): Wednesday April 24, 2019 12a. Full Name of Petitioner (Including International Union of Operating Engine 12c. Full name of national or international International Union of Operating Engine 12d. Tel No. 1246:451-0324	11c. E 7am-9a Tocal name and mers, Local 324 Habor organization ers	ection Time(s): mm umberj of which Petitioner	is an official 121 Fax i 248 454-1	e or constituen	11d. Election Loca Saginaw, Ulby, Bu 12b. Address (stre 500 Highet Orive, 8 t (if none, so state)	tion(s) non, Davis et snd nur loomfield	sburg, Po nher, cily, Townshi	ort Huron, Michigan slate, and ZIP code) p. Mil 48302	
11b. Election Date(s): Wednesday April 24, 2019 12a. Full Name of Petitioner (Including International Union of Operating Engine 12c. Full name of national or international International Union of Operating Engine 12d. Tel No. 246: 451-0324  13. Representative of the Petitioner Wednesday (Including International Union of Operating Engine 12d. Tel No. 246: 451-0324	11c. E   7am-9a   Iocal name and mees, Local 324   Iabor organization   12c. Cell No.   12c. Cell No.	ection Time(s): m umberj of which Petitioner	121 Fax   248 454-1 r purposes	o or constituen No. 766 of the repres	11d. Election Loca Saginaw, Ulby, Bu 12b. Address (stre 500 Bullet Orive, B 1 (it none, so state)	tion(s) rion, Davis et and nun loomfield	sburg, Po nher, cily, Townshii	ort Huron, Michigan slate, and ZIP code) p. Mil 48302	-
11b. Election Date(s): Wednesday April 24, 2019 12a. Full Name of Petitioner (Including International Union of Operating Engine 12c. Full name of national or international International Union of Operating Engine 12d. Tel No. 1246:451-0324	11c. E   7am-9a   Iocal name and mees, Local 324   Iabor organization   12c. Cell No.   12c. Cell No.	ection Time(s): m umberj of which Petitioner	12i Fax   248 454-1 r purposes	o or constituen  10.  788  of the repres	11d. Election Loca Saginaw, Ulby, Bu 12b. Address (stre 500 Highel Orive, B 1 (il none, so state)	tion(s) rion, Davis et and nun loomfield	sburg, Po nher, cily, Townshii	ort Huron, Michigan slate, and ZIP code) p. Mil 48302	
11b. Election Date(s): Wednesday April 24, 2019 12a. Full Name of Petitioner (Including International Union of Operating Engine 12c. Full name of national or international International Union of Operating Engine 12d. Tel No. 246: 451-0324  13. Representative of the Petitioner Wednesday (Including International Union of Operating Engine 12d. Tel No. 246: 451-0324	11c. E   7am-9a   Iocal name and mees, Local 324   Iabor organization   12c. Cell No.   12c. Cell No.	ection Time(s): m umberj of which Petitioner	12i Fax   248 454-1 r purposes	o or constituen  10.  788  of the repres	11d. Election Loca Saginaw, Ulby, Bu 12b. Address (stre 500 Highel Orive, B 1 (il none, so state)	tion(s)- rion, Davider and nuri loomfield  120, E-N  g. and ZIP-c	sburg, Po nher, cily, Townshii	ort Huron, Michigan Slate, and ZIP code) p, MI 48302	
11b. Election Date(s): Wednesday April 24, 2019 12s. Full Name of Pottloner (Including International Union of Operating Engine 12c. Full name of national or international International Union of Operating Engine 12d. Tel No. 248 451-0324 13. Representative of the Potitioner with 13a. Name and Title Amy Bache 13c. Tel No. 313 496-9488	11c. E 7am-9s focal name and names, Local 324 Inbor organization ers 12c. Cell No. 12c. Cell No. 13d. Cell No.	rection Time(s):  amberj  of which Petitioner in the control of all papers for the control of th	12! Fax 248 454- r purposes 13b. Add 323 W. For 13e Fax 313 965-4	o or constituen 70. 786 s of the repres ress (street and 151, Datoit, M.I. 4	11d. Election Local Saginaw, Ulby, Bullion 12b. Address (streson Education Private Son Education Proceedings of the Communication Pr	tion(s)- non, Davided and number of section 120, E-N 120, E-N g. and 2IP c.	sburg, Ponber, city, Townshii Maii Addre	ort Huron, Michigan Slate, and ZIP code) p, MI 48302	
11b. Election Date(s): Wednesday April 24, 2019 12s. Full Name of Potitioner (Including International Union of Operating Engine 12c. Full name of national or international Union of Operating Engine 12d. Tel No. 248 451-0324 13. Representative of the Potitioner with 13a. Name and Title Amy Bache 13c. Tel No.	11c. E 7am-9s focal name and names, Local 324 Inbor organization ers 12c. Cell No. 12c. Cell No. 13d. Cell No.	rection Time(s):  amberj  of which Petitioner in the control of all papers for the control of th	12! Fax 248 454-1 13b. Add 333 W. For 13e Fax 313 965-4	o or constituen 70. 786 s of the repres ress (street and 151, Datoit, M.I. 4	11d. Election Local Saginaw, Ulby, Bullion 12b. Address (streson Education Private Son Education Proceedings of the Communication Pr	tion(s)- non, Davided and number of section 120, E-N 120, E-N g. and 2IP c.	sburg, Ponber, city, Townshii Maii Addre	ort Huron, Michigan , slate, and ZIP code) p. MI 48302	
11b. Election Onte(s): Wednesday April 24, 2019 12s. Full Name of Potitioner (Including International Union of Operating Engine 12c. Full name of national or international International Union of Operating Engine 12d. Tel No. 248 451-0324 13. Representative of the Potitioner with 13a; Name and Title Amy Bacht 13c; Tel No. 313 496-9408 I declare that I have read the above potential international Internation	11c. E 7am-9s focal name and names, Local 324 Inbor organization ers 12c. Cell No. 12c. Cell No. 13d. Cell No.	rection Time(s):  amberj  of which Petitioner in the control of all papers for the control of th	12f. Faxi 248 454-1 purposes 13b. Add 333 W. For 13e Fax 313 965-4 e to the bo	o or constituen 70. 786 s of the repres ress (street and 151, Datoit, M.I. 4	11d. Election Local Saginaw, Ulby, Bullion 12b. Address (streson Education Private Son Education Proceedings of the Communication Pr	tion(s)- non, Davided and number of section 120, E-N 120, E-N g. and 2IP c.	sburg, Po mher, cily, Townshij Mail Addre odel iail Addre der@mior	ort Huron, Michigan , slate, and ZIP code) p. MI 48302	
11b. Election Date(s): Wednesday April 24, 2019 12s. Full Name of Petitioner (Including International Union of Operating Engine 12c. Full name of national or international International Union of Operating Engine 12d. Tel No. 246: 451-0324 13. Representative of the Petitioner what is a Name and Title Amy Bache 13c. Tel No. 313: 496-9408 I declare that I have read the above policy.	11c. E 7am-9a Tocal name and mers, Local 324 Ilabor organization ers 12c. Cell No. To will accept service lder, Attor 13d. Cell No. Itilion and that the	cection Time(s):  amber)  of which Petitioner inco of all papers for the papers f	12f. Fax.i 248 454-1 13b. Addi 333 W. For 13e Fax 313 965-4 e to the bo	o or constituen  No.  766  of the repres  street and  151, Detroit All A  No.  602  st of my know	11d. Election Eoca Saginaw, Ujby, Bu 12b. Address (stre 500 Bulet Orive, 8 I (il none, so state) entation proceeding d number, city, state, 8236	tion(s) rion, Daviset and nun. loomfield  12o. E-M  9- and ZIP-o.  13f. E-M  abacheld	sburg, Po mber, cily Yawnshii Mail Addre ode) iail Addre der@micr	st Huron, Michigan state, and ZIP code) p. Mil 48302 ess	

PRIVACY ACT STATEMENT
Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29.U.S.C.(§ 151 of seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or Higation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2008). 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

## 2b. Addresses

- 1 4000 Veterans Memorial Pkwy, Saginaw, MI 48601;
- 2. 2747 Priemer Road, Ubly, MI 48475;
- 3. 4190 Jimbo Dr., Burton, MI 48529;
- 4. 16255 Tindall Rd., Davisburg, MI 48350;
- 5. 1750 Range Road, Port Huron, MI 48060

## 5b. Description of Unit Involved

Included: All full-time and regular part-time machine operators, plant operators and mechanics employed by the Employer in or out of its facilities located at 4711 Veterans Memorial Pkwy, Saginaw, MI 48601, 2747 Priemer Road, Ubly, MI 48475; 4190 Jimbo Dr., Burton, MI 48529; 16255 Tindall Rd., Davisburg, MI 48350; and 1750 Range Road, Port Huron, MI 48060.

Excluded: Guards and supervisors as defined in the Act.

P 1/1

FORM NURB-502 (RC) (2-16)

UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS SOARD RC PETITION

DO NOT WRITE IN THIS SPACE Dato Flod 4/11/2019 07-RC-239462

INSTRUCTIONS: Uniose e-Filed un employer concerned is located. To the employer and all other parties Case Procedures (Form NLRB 48:	he petition i named in t	must be the petiti	accompanie on of: (1) th	od by b o petiti	oth a sh on; (2) S	owing of interest (se tatement of Position	form	below) and (Form NL	i a cortificat RB-505); en:	e of service showld i (3) Description of	ng se Rop	rvice on resentation
PURPOSE OF THIS PETITION; F bargaining by Patitionor and Patiti requests that the National Labo	loner desire	10 be co	ordilled as rep	rosente	ulive of th	ne employees, The Pe	tillan	or allogos	that the follo	owing circumstance		
2s. Name of Employer:			2b.	Addres	s(ca) of	Establishment(s) invol	ved (	Street and I	number, City,	State, ZIP code):		
Nelson Tree Service, LLC	;		33	00 O	ffice I	Park Dr, Dayton	OF	I 45439				
3a. Employer Representative - Name and Title: 3b. Addr						10 B\$ 2b = Stato Samo):				,		
John Reis, Regional Man	ager		Sa	me								
3c. Tol. No.	3d. Celi No 815-34		5		, Fax No			john@r	ddrese elsontree	.com		
4s. Type of Establishment (Factory, I	nino, whole	salor, etc	4			al Product or Service				d State where unit is	loca	itod:
Utilities				1	ine C	learance				Michigan		
5b. Description of Unit Involved: included:									6a, Numbo	r of Employees in U	nit:	
See Attachment									75			
Excluded:									6b. Do a si	ibstantial number (3	0% 6	r mara)
See Attachement									of the e	mployees in the un! nied by the Potition	wis	Llo bo
Chock One:  x  7a. Request for rec	en noblego	Bargainir	ng Represent	ative w	es made	on (Date) 4/11	1/201	9 an		lectined recognition	<u></u>	
en or about (Date)	4/11/		(If no rep									
75, Patitioner is cui  8a. Name of Recognized or Certific					Rb. Ac		n und	er the ACL				
None	e outguith	in Wale	flii iivia, av	215.07	10.70							
8c, Tet, No. 8d. Coll No.				80	80. Fax No.		ľ	8f. E-Mail Address				
8g. Affiliation, if any:				8h. C				n Date of Current or Most Nract, if any (Month, Day, Your)				
9. Is there now a strike or picketing a	t the Employ	yer'n este	.blishment(s)	invalve	d? No	If so, approx	dmato	ly how mar	ry amployac	are participating?		
(Name of Labor Organization)							, h	as pickated	the Employe	or since (Month, Da)	y, Ya	ar)
<ol> <li>Organizations or individuals other individuals known to have a repre-</li> </ol>										s and other organiz	allon	s and
None												
10a, Namo		10b, Ad	dress				- 1	10c. Tol. N	٥.	10d. Cell No.		
								10e. Fax No.		10f. E-Mali Address		
11. Election Details: If the NLRB co.	nducts and	election i	o this metter.	state v	our posti	ion with respect to any	v such	election: I	11a, Election	Type:		
				,	p		,		Manua Manua		lxed	MenueVMell
11b. Election Data(s);		11c, Ele	ction Tima(s)	);	11d. Electi				on Location(s);			
12a. Full Name of Petitioner (Includ	ing local na	mo and n	umbor):			12b. Addrass (streat	end n	umber, city	, Stale and 2	(IP code):		
IBEW Local 876 5000 East Airport Road, Mt. Pleasant MI 48858												
12c. Full name of national or internal	onal labor o	rganizati	on of which f	Polition	e la en e	sfillate or constituent (	If non	o, so state)	:			
International Brotherhood	of Elect	trical \	Workers									
126, Tel. No. 12e, Cell No.					12f. Fax No.			12g, E-Mail Addross				
616-784-1133   616-446-0924   616-784-8342   pbarnett@ibewlocal876.org												
<ol> <li>Representative of the Petitioner who will accept service of all pap 13a. Name and Tille:</li> </ol>					pera for purposes of the representation proceeding.  13b. Address (street and number, city, State and ZIP code):							
					5000 East Airport Road, Mt.							
13c, Tal. No.   13d, Cell No.			15	13o, Fax No.			13/. E-Mail Address					
616-784-1133 616-446-0924				616-784-8342			pbarnett@ibewlocal876.org					
I declare that I have read the above	potition a	nd that t	he statemen				dge t					
Namo (Print)		18	Signatury )	100	3	1	Title					Date 11-7019
Phil Barnett					(fV)ovV ( <del>C) </del> M			Membership Development Dir. 4-11-2619				

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1601)
PRIVACY ACT STATEMENT
Solidization of the information on this form is outhorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 of seq. The principal use of the Information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or lifegation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74342-43 (Dec. 13, 2005). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, feiture to supply the information may cause the NLRB to decline to invoke its processes.

## Attachment

Includes: All regular and part time Groundsmen/Laborers, Brush Handlers, Machine Equipment Operators, Side Trimmers, Sprayers, D Trimmers, C Trimmers, B Trimmers, A Trimmers, Journeypersons, Forepersons.

Excluded: All Management Employees, Planners and General Forepersons

FORM NLRB-502 (RC) (2-18)

## UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD

DO NOT WRITE IN THIS SPACE						
Case No. 107-RC-240215	Date Filed. 4-24-2019					

**RC PETITION** INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nirb.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: 2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): First Student 959 Cesar Chavez Pontiac, MI 48340 3a. Employer Representative - Name and Title: 3b. Address (if same as 2b - state same): Brian Malinowski-Contract Manager Same 3c. Tel. No. 3d. Cell No. 3e. Fax No. 3f. E-Mail Address 248 3354921 248 9352640 248 3351949 brian.malinowski@firstgroup.com 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal Product or Service 5a. City and State where unit is located: school bus/charter service Pontiac, Michigan school bus/dispatch 5b. Description of Unit Involved: 6a. Number of Employees in Unit: included: All full and part time dispatchers Excluded: 6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? X Yes No all office clarical, managerial, administrative, guards & supervisors defined in the ACT Check One: 🗵 7a. Request for recognition as Bargaining Representative was made on (Date) April 24, 2019 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) 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 and 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): 11d. Election Location(s): 11c. Election Time(s): 959 Cesar Chavez Pontiac, MI 48340 May 15, 2019 12a. Full Name of Petitioner (including local name and number): 12b. Address (street and number, city, State and ZIP code): 75 N. Saginaw St. Pontiac, MI 48342 Teamsters Local 614 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 IBT 12d. Tel. No. 12e. Cell No. 12f. Fax No. 12g. E-Mail Address 248 3344573 248 6363044 248 3344848 sectreas614@gmail.com 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): Billee Hawkins - Business Agent 75 N. Saginaw St. Pontiac, MI 4342 13f. E-Mail Address 13c. Tel. No. 13d. Cell No. 13e. Fax No 248 3344573 248 6363044 248 3344848 sectreas614@gmail.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) Signature Date 04/24/19 Secretary-Treasurer, Business Agent Billee Hawkins

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

Case No. 07-RC-240374 Date Filed April 26, 2019

	1111011						
INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nirb.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 parti	es named in the petitic	on of: (1) the peti	ition: (2) State	ment of Position form		
(Form NLRB-505); and (3) Descript	tion of Representation Case	Procedures (Form NL	RB 4812). The s	howing of inte	erest should only be filed		
with the NLRB and should not be:				g or	cross should only be med		
1. PURPOSE OF THIS PETITION: RC-CE	RTIFICATION OF REPRESENTA	IVE - A substantial number	of employees wish t	n he represented	for numoses of collective		
bargaining by Petitioner and Petitioner d	esires to be certified as representa	ive of the employees. The	Petitioner alleges ti	hat the following	circumstances exist and		
requests that the National Labor Rela	tions Board proceed under its pr	oper authority pursuant to	Section 9 of the N	ational Labor Re	elations Act.		
2a. Name of Employer	• 1	ddress(es) of Establishmen		and number, city,	State, ZIP code)		
Keino Linen Sci	vice 18	400 Telegrap	p Lg Blos	wastown.	MI 48174		
3a. Employer Representative - Name and	Title	3b. Address (If same as	2b - state same)				
Alexandra Floyd-Hu	man Resources	541	MC				
3c. Tel. No.	3d. Cell No.	3e. Fax No.		3f. E-Mail Addr	ess		
(734)494-3 <del>55</del> 0	(877) 557-3466						
4a. Type of Establishment (Factory, mine, v		oduct or service		5a. City 6	and State where unit is located:		
Linen Factory		-inen		Brow	uastown, MI		
Ct. Consol dies stiffeld beset at					6a. No. of Employees in Unit:		
included: Any & All Full & F Excluded: All Affice 1265	eartime a DL. At	3 Deimes			18		
		, ll .	4		6b. Do a substantial number (30%		
Excluded: All Aller Jes	onal , Super visors,	Dispatches, 6	vanis, cob	ide	or more) of the employees in the unit wish to be represented by the		
	• • •	, ,	, 74.	vers	Petitioner? Yes K No		
Check One: Y 7a. Request for re	cognition as Bargaining Represent	ative was made on (Date)	4-25-A an	nd Employer decli			
-00hc	(Date) (If no reply receive	_			ine resegnation and about		
	urrently recognized as Bargaining F		certification under the	e Act			
8a. Name of Recognized or Certified Barr							
•							
8c. Tel No.	8d Cell No.	8e. Fax No.		8f. E-Mail Addn	ess		
		1					
8g. Affiliation, if any		8h. Date of Recognition or	Certification	8i. Expiration D	on Date of Current or Most Recent		
		_		Contract, if any	stract, if any (Month, Day, Year)		
9. Is there now a strike or picketing at the Employer's establishment(s) involved? No. approximately how many employees are participating?							
(Name of labor organization)	, has pic	keted the Employer since (A	Nonth, Day, Year)				
10. Organizations or individuals other than I				recentatives and	other omanizations and individuals		
known to have a representative interest in a				nesonauros ana	outer organizations and individuals		
•	• •		,				
10a, Name	10b. Address		10c. Tel. No.		10d, Cell No.		
	1						
	l		10e. Fax No.		10f. E-Mail Address		
11. Election Details: If the NLRB conducts	an election in this matter, state yo	ur position with respect to	11a. Election Type	: Manual _	Mail Mixed Manual/Mail		
any such election.	11c. Election Time(s):	11d. Election Location(s):					
11b. Election Date(s):	4am - 5a		1 Revenden 48174				
12a, Full Name of Petitioner (including lo		<u> </u>	18400 Telegraph to Brownston  12b. Address (street and number, city, state, and ZIP of				
Teamsters local 33			2801 Trum	whall are	Notes to 4 8216		
Teamsters /oca 337  12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)							
International Brokerhood of Transfers (IBT)							
12d, Tel No.	12e. Celi No.	12f. Fax No.		12g. E-Mail Add	tress		
313-945-9833	586-212-4820	313-445-65	70	Jim Ot	counters local 337. com		
13. Representative of the Petitioner who	will accept service of all papers t			g.			
13a. Name and Title					l		
13a. Name and Title  13b. Address (street and number, city, state, and ZIP code)  13b. Address (street and number, city, state, and ZIP code)							
13c, Tel No.	13d. Cell No.	13e, Fax No.		ress			
Same				Same	j		
I declare that I have read the above petition		ue to the best of my know	ledge and belief.				
Name (Print) D I Signature / III Title / 1 Date // 21/20/C							
James boring to Backage will VICE President 9/26/20/9.							
WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TIPLE 18, SECTION 1001)							
	~~ ~/r /r mg, ~ 1111001 0~m 0+						

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.

FORM NLR8-502 (RD) (2-18)

# UNITED STATES OF AMERICA NATIONAL LABOR RELATIONS BOARD RD PETITION

DO NOT WRITE IN THIS SPACE					
Case No.	Date Filed				
07-RD-240011	4/22/2019				

INSTRUCTIONS: Unless e-Filed using the Agency's website, | www.nirb.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 eny 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 2b. Address(es) of Establishment(s) involved (Street and number, city, state, ZIP code) MCPP 24060 HOOVER RD 3a. Employer Representative - Name and Title 3b. Address (If same as 2b - state same) EDWARD MELANSON 3c. Tel. No. 3d, Fax No. 3e. Cell No. 3f. E-Mail Address EDWARD MELANSON@M-CHEM.COM 4a. Type of Establishment (Factory, mine, wholesaler, etc.) 4b. Principal product or service FACTORY 5a. Description of Unit Involved 5b. City and State where unit included: is located: WARREN MICHIGAN ALL HOURLY EMPLOYEES Excluded: SALARY EMPLOYEES 6. No. of Employees in Unit 20 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? X Yes 8a. Name of Recognized or Certified Bargaining Agent 8b. Affiliation, if any LOCAL 2280 8c. Address 8d. Tel. No. Se. Cell No. 45116 CASS AAVE UTICA MI 48317 586 7310010 8f. Fax No. 8g. E-Mail Address Valu local 2280 @ anl 9. Date of Recognition or Certification 10. Expiration Date of Current or Most Recent Contract, if any (Month, Day, **AUGUST 2017** 11s. Is there now a strike or picketing at the Employer's establishment(s) involved? Yes X 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 since (Month, Day, Year) (Insert Address) 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) 12d. Fax No. 12e Cell No. 12f. E-Mail Address 13. Election Details: If the NLRB conducts an election in this 13a. Election Type: X Manual Mail Mixed Manual/Mail matter, state your position with respect to any such election. 13d. Election Location(s) 13b. Election Date(s) 13c. Election Time(s) ANY ANY WARREN MI (MCPP PLANT) 14. Full Name of Petitioner ddress (Street and number, city, state, ZIP code) 14b. Tel. No. 14c. Fax No. (6), (b) 14d, Cell No. 14e, E-Mail Address (b) (6), (b) (7)(C) (b) (6), (b) (7)(C) 15. Representative of the Patitioner who will accept service of all papers for purposes of the representation proceeding. 15a Name 15b.Tille (b) (6), (b) (7)(C) 15c. Address (Street and number, city, state, ZIP code) 15d. Tel. No. 15e Fax No. (b) (6), (b) (7)(C) 15f. Cell No. 15a, E-Mail Address I declare that I have read the above petition and (b) (6), (b) (7)(C) st of my knowledge and belief. Date Filed (b) (6), (b) (7)(C) (b) (6), (b) (7)(C)

WILLFUL FALSE STATEMENTS ON

BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)