

DO NOT WRITE IN THIS SPACE

Case No.
25-RC-243735

Date Filed
06/21/19

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: Needham Excavating, Inc.		2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 137 North Main St. Walcott, IA 52773	
3a. Employer Representative - Name and Title: Joseph Needham, President		3b. Address (if same as 2b - state same):	
3c. Tel. No. 563/529-5840	3d. Cell No. 563/529-5834	3e. Fax No. 563/284-5036	3f. E-Mail Address needham@needhamex.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Excavating Services		4b. Principal Product or Service Earthmoving	5a. City and State where unit is located: Walcott and jobsites
5b. Description of Unit Involved: Included: All full-time heavy equipment operators. Excluded: Other classifications, supervisors, managers, office clericals, and guards.		6a. Number of Employees in Unit: 9	
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: <input type="checkbox"/> 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). <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) 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? <u>No</u> 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: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail
11b. Election Date(s): July 1, 2019	11c. Election Time(s): 7:00 a.m. - 8:30 a.m.	11d. Election Location(s): 6623 W Kimberly Rd, Davenport, IA 52806	
12a. Full Name of Petitioner (including local name and number): International Union of Operating Engineers, Local 150, AFL-CIO		12b. Address (street and number, city, State and ZIP code): 6200 Joliet Road, Countryside, IL 60525	
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, AFL-CIO			
12d. Tel. No. 708/482-8800	12e. Cell No. n/a (see below)	12f. Fax No. 708/482-7186	12g. E-Mail Address n/a (see below)
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
13a. Name and Title: Elizabeth A. LaRose, Attorney		13b. Address (street and number, city, State and ZIP code): Local 150 Legal Dept., 6140 Joliet Road, Countryside IL 60525	
13c. Tel. No. 708/579-6666	13d. Cell No. 708/420-7746	13e. Fax No. 708/588-1647	13f. E-Mail Address elarose@local150.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) Elizabeth A. LaRose	Signature /s/ Elizabeth A. LaRose	Title Attorney	Date 06/21/19

**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. 25-RC-244154	Date Filed 6/28/19

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
Titan Machinery Inc.

2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)
3137 76th Street, Davenport, Iowa

3a. Employer Representative - Name and Title
Mike Huth

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

3c. Tel. No.
515/681-2115

3d. Cell No.
N/A

3e. Fax No.
N/A

3f. E-Mail Address
mike.huth@titanmachinery.com

4a. Type of Establishment (Factory, mine, wholesaler, etc.)
Heavy aerial lift equipment shop

4b. Principal product or service
Rental/service construction equipment

5a. City and State where unit is located:
Davenport, Iowa

5b. Description of Unit Involved

Included: All regular full-time and part-time mechanics, yardmen, and truck-drivers.

Excluded: All supervisors, guards, and clericals as defined by the Act.

6a. No. of Employees in Unit:
6

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 N/A (Date) (If no reply received, so state). N/A

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
N/A

8c. Tel No.
N/A

8d. Cell No.
N/A

8e. Fax No.
N/A

8f. E-Mail Address
N/A

8g. Affiliation, if any
N/A

8h. Date of Recognition or Certification
N/A

8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)
N/A

9. Is there now a strike or picketing at the Employer's establishment(s) involved? No. If so, approximately how many employees are participating? N/A

(Name of labor organization) N/A, has picketed the Employer since (Month, Day, Year) N/A.

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
N/A

10b. Address
N/A

10c. Tel. No.
N/A

10d. Cell No.
N/A

10e. Fax No.
N/A

10f. E-Mail Address
N/A

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):
July 12, 2019

11c. Election Time(s):
6:00 a.m. - 6:45 a.m.

11d. Election Location(s):
Lunchroom, Employer's facility

12a. Full Name of Petitioner (including local name and number)
International Union of Operating Engineers, Local 150, AFL-CIO

12b. Address (street and number, city, state, and ZIP code)
6140 Joliet Road, Countryside, Illinois 60525

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, AFL-CIO

12d. Tel No.
708/482-8800

12e. Cell No.
N/A

12f. Fax No.
708/588-1629

12g. E-Mail Address
N/A

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

13a. Name and Title
Charles R. Kiser, Attorney

13b. Address (street and number, city, state, and ZIP code)
Local 150 Legal Department, 6140 Joliet Road, Countryside, Illinois 60525

13c. Tel No.
708/579-6663


13d. Cell No.
N/A

13e. Fax No.
708/588-1647

13f. E-Mail Address
ckiser@local150.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)
Charles R. Kiser

Signature


Title
Attorney

Date
June 28, 2019

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

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UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 25-RC-242535	Date Filed 6/3/19

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
Arconic-Howmet Castings & Services, INC

2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)
1110 E. Lincolnway, LaPorte, IN 46350 LaPorte County

3a. Employer Representative - Name and Title
Andy Sickinger, Plant Manager

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

3c. Tel. No.
(219) 326-7400

3d. Cell No.

3e. Fax No.
(219) 324-3193

3f. E-Mail Address

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

4b. Principal product or service
Castings for Aerospace and Investment Gas Turbine Applications

5a. City and State where unit is located:
LaPorte, IN

5b. Description of Unit Involved

Included: All full-time and regular part-time Production, maintenance, and production support employees including shipping, receiving, X-Ray, FPI, CMM, and blue light.

Excluded: All other employees, including non-production employees, engineers, Office clerical employees, professional employees, guards and supervisors, as defined by the Act.

6a. No. of Employees in Unit:
611

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):
June 27 & 28, 2019

11c. Election Time(s):
4:00 AM - 8:00 PM both days

11d. Election Location(s):
BC2 Breakroom

12a. Full Name of Petitioner (including local name and number)
Local Lodge 2018, 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
William J. LePinske, Grand Lodge 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)
William J. LePinske

Signature


Title
Grand Lodge Representative/TOL

Date
June 3, 2019

WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

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UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No. 25-RC-243638	Date Filed 6/20/19
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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: Opportunity House INC.	2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 357 N. California Street, Sycamore, IL 60178
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3a. Employer Representative - Name and Title: Bob Shipman, Executive Director	3b. Address (if same as 2b - state same): Same
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3c. Tel. No. 815-895-5108	3d. Cell No. 815-762-6315	3e. Fax No. 815-895-9840	3f. E-Mail Address bshipman@ohinc.org
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4a. Type of Establishment (Factory, mine, wholesaler, etc) Human Services	4b. Principal Product or Service Assisted Living/DT	5a. City and State where unit is located: Sycamore, IL
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5b. Description of Unit Involved: Included: All "Residential Trainers," "Residential Subs," and "Developmental Trainers" Excluded: All other employees.	6a. Number of Employees in Unit: 76
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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) _____ 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:
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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 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): July 16th, 2019	11c. Election Time(s): 10 AM to 2PM and 5PM to 6PM	11d. Election Location(s): CLF Living Room & Main Building
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12a. Full Name of Petitioner (including local name and number): RWDSU	12b. Address (street and number, city, State and ZIP code): 3181 Eastern Ave S.E. Grand Rapids, MI 49508
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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):
RWDSU-UFCW

12d. Tel. No. 616-241-4357	12e. Cell No. 774-282-0959	12f. Fax No. 616-241-1310	12g. E-Mail Address chennigar@rwdsu.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: Colin Hennigar	13b. Address (street and number, city, State and ZIP code): 5181 Zenith Pkwy #3 Machesney Park, IL 61115
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13c. Tel. No.	13d. Cell No. 774-282-0959	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) Colin Hennigar	Signature <i>Colin Hennigar</i>	Title Organizer	Date 06/20/19
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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**

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