| UNITED STATES GOVERNMENT  |  |                                  |                  | DO NOT WRITE IN THIS SPACE                             |   |                     |  |  |  |
|---|--|----------------------------------|------------------|--|---|---------------------|--|--|--|
| RC PETITION<br>RC PETITION  |  |                                  |                  | Case No. 25  | 5-RC-226850                                 | Date                | e Filed 9/6/18   |  |  |
| INSTRUCTIONS: Unless e-Filed us   | ina the Aaeno  | cv's website. w                  | ww.nlrb.         | gov. submit a  | n 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   |  |                                  |                  |  |   |                     |  |  |  |
|   |  |                                  |                  |  | RB 4812). The s                             | nowing of ii        | iterest should only be filed   |  |  |
| with the NLRB and should <u>not</u> be s  | erved on the   | employer or an                   | y other p        | barty.   |   |                     |  |  |  |
| 1. PURPOSE OF THIS PETITION: RC-CEI<br>bargaining by Petitioner and Petitioner de   | RTIFICATION O  | F REPRESENTATI                   | VE - A sub       | ostantial number                                       | of employees wish t                         | o be represent      | ed for purposes of collective  |  |  |
| requests that the National Labor Relat  | ions Board pro   | ceed under its pro               | ve of the e      | mployees. The  | Petitioner alleges to<br>Section 9 of the N | hat the follow      | ng circumstances exist and<br>Relations Act                          |  |  |
| 2a. Name of Employer  | ions board pro   |                                  |                  |  | t(s) involved (Street a                     |                     |  |  |  |
| Meggitt Control Systems   |  |                                  |                  | Drive, Troy,   |   |                     | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,                              |  |  |
| 3a. Employer Representative – Name and  | Title  | 10 110                           |                  |  | s 2b - state same)                          |                     |  |  |  |
| Stephen Young, CEO  | 1100   |                                  | SAME             |  | 525 State Same)                             |                     |  |  |  |
| 3c. Tel. No.  | 3d. Cell No.   |                                  | 3e. Fax          | -  |   | 3f. E-Mail Ad       | dross  |  |  |
| 812-547-7071  | Su. Cell No.   |                                  |                  | 47-2488  |   | SI. E-IVIAII AC     | uless  |  |  |
|   |  | the Distant                      |                  |  |   |                     |  |  |  |
| 4a. Type of Establishment (Factory, mine, w   | nolesaler, etc.)   | 4b. Principal pro                |                  |  | -   |                     | y and State where unit is located:                                   |  |  |
| Factory   |  | Aerospace I                      | ans w            | lanufacture  | r   | Troy,               |  |  |  |
| 5b. Description of Unit Involved  |  |                                  |                  |  |   |                     | 6a. No. of Employees in Unit:  |  |  |
| Included: All full time and regular part time<br>Drive, Troy, IN 47588  | e Production and   | Maintenance empl                 | oyees emp        | ployed at the em                                       | ployers facility locate                     | ed at 3 Industria   |  |  |  |
|   |  |                                  |                  |  |   |                     | 6b. Do a substantial number (30%<br>or more) of the employees in the |  |  |
| Excluded: All other employees including   | office clerical en   | ployees, profession              | nal employ       | ees, managerial  | l employees, guards                         | and                 | unit wish to be represented by the                                   |  |  |
| supervisors, as defined by the  | Act.   |                                  |                  |  |   |                     | Petitioner? Yes 🗸 No   |  |  |
| Check One: 7a. Request for re   | cognition as Bar   | gaining Representa               | tive was m       | nade on (Date)   | ar  | nd Employer de      | clined recognition on or about                                       |  |  |
|   |  |                                  |                  |  | serve as reques                             |                     |  |  |  |
| 7b Petitioner is cu   |  |                                  |                  |  | certification under the                     |                     |  |  |  |
| 8a. Name of Recognized or Certified Bar   |  |                                  | opresentat       | 8b. Address  |   | e Au.               |  |  |  |
| None  | ,  |                                  |                  |  |   |                     |  |  |  |
| 8c. Tel No.   | 8d Cell No.  |                                  | 8e. Fax          | No.  |   | 8f. E-Mail Ad       | dress  |  |  |
|   |  |                                  |                  |  |   |                     |  |  |  |
| 8g. Affiliation, if any   |  |                                  | 8h. Date o       | of Recognition or Certification 8i. Expiration Date of |   |                     | Date of Current or Most Recent                                       |  |  |
|   |  |                                  |                  |  |   | Contract, if a      | ny (Month, Day, Year)  |  |  |
|   |  |                                  |                  |  |   |                     |  |  |  |
| 9. Is there now a strike or picketing at the Er   | mployer's establi  | shment(s) involved               | ? <u>NO</u>      | If so, approx  | imately how many er                         | mployees are p      | participating?   |  |  |
| (Name of labor organization)  |  | , has pick                       | eted the E       | mployer since (/                                       | Month, Day, Year)                           |                     |  |  |  |
| 10. Organizations or individuals other than F   |  |                                  |                  |  |   |                     | nd other organizations and individuals                               |  |  |
| known to have a representative interest in a  |  |                                  |                  |  |   | 103011011403 a      | ne other organizations and individuals                               |  |  |
|   |  |                                  |                  |  | ,   |                     |  |  |  |
| 10a. Name   | 10b. Ad  | dress                            |                  |  | 10c. Tel. No.                               | 10d. Cell No.       |  |  |  |
|   |  |                                  |                  |  |   |                     |  |  |  |
|   |  |                                  |                  |  | 10e. Fax No.                                | 10f. E-Mail Address |  |  |  |
|   |  |                                  |                  |  |   |                     |  |  |  |
| 11. Election Details: If the NLRB conducts  | an election in th  | is matter, state you             | r position       | with respect to  | 11a. Election Type                          | e: 🗸 Manual         | Mail Mixed Manual/Mail   |  |  |
| any such election.  | 44-5   |                                  |                  |  | 11d. Election Loca                          | 11(-)               |  |  |  |
| 11b. Election Date(s):<br>September 20, 2018  |  | lection Time(s):<br>.m 9:00 a.m. |                  |  |   |                     |  |  |  |
| 12a. Full Name of Petitioner (including lo  | and the second   |                                  |                  |  | Conference Roo                              |                     | , city, state, and ZIP code)   |  |  |
| Local Lodge 2018, International Assoc   |  |                                  | ace Work         | ers AFL-CIO  | 113 Republic Av                             | enue Ste 1          | 00 loliet II 60435   |  |  |
| 12c. Full name of national or international la  |  |                                  |                  |  |   |                     | 00,00101,12 00400  |  |  |
| International Association of Machinist  | 0  |                                  |                  |  | it (ii none, 30 state)                      |                     |  |  |  |
| 12d. Tel No.  | 12e. Cell No.  |                                  | 12f. Fax         | No.  |   | 12g. E-Mail         | Address  |  |  |
| 815-280-6400  | 630-430-645  | 5                                | 815-280          |  |   | rmickschl@          |  |  |  |
| 13. Representative of the Petitioner who  | will accept serv   | ice of all papers for            | or purpose       | es of the repres                                       | entation proceedin                          |                     | j  |  |  |
|   |  |                                  |                  |  | d number, city, state,                      |                     |  |  |  |
| 13a. Name and Title Rick Mickschl, Gr   | and Lodge R  | epresentative                    |                  |  | ue, Ste. 100, Jo                            |                     |  |  |  |
| 13c. Tel No.  | 13d. Cell No.  |                                  | 13e. Fa:         |  | ide, Ste. 100, 00                           | 13f. E-Mail A       |  |  |  |
| 815-280-6400  | 630-430-645  | 5                                | 815-280          |  |   | rmickschl@          |  |  |  |
| I declare that I have read the above petition   |  |                                  |                  |  | ledge and belief.                           |                     |  |  |  |
|   |  | ~                                |                  | ,  |   | Data                |  |  |  |
| Name (Print) Sig  | nature M   | bul                              | Title<br>Grand I | _odge Repres   | entative                                    | Date                | ber 6, 2018  |  |  |
|   | the second secon |                                  | -                | <u> </u>   |   |                     | LE 18, SECTION 1001)   |  |  |
|   | NTS ON THIS D  | ETITION CAN BE D                 |                  |  |   |                     |  |  |  |

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 NLRB-502 (RC) (4-15)

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| UNITED STATES GOVERNMENT  |  |   |  | DO NOT WRITE IN THIS SPACE   |   |  |  |  |
|---|--|---|--|--|---|--|--|--|
| NATIONAL LABOR RELATIONS BOARD  |  |   |  | Case No. Date Filed  |   |  |  |  |
| RC PE   | 25-RC  | -227352   |  | 9/14/18  |   |  |  |  |
| INSTRUCTIONS: Unless e-Filed us   | ina the Aaen   | cv's website, w   | ww.nlrb.gov.submit   | an original of thi   | s Petition to   |  |  |  |
|   |  |   |  |  |   |  |  |  |
| 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   |  |   |  |  |   |  |  |  |
|   |  |   |  | .RB 4812). The s   | showing of ir   | terest should only be filed  |  |  |
| with the NLRB and should not be s   | erved on the   | employer or ar  | y other party.   |  |   |  |  |  |
| 1. PURPOSE OF THIS PETITION: RC-CE  | RTIFICATION C  | F REPRESENTAT   | IVE - A substantial numbe  | r of employees wish  | to be represent   | ed for purposes of collective  |  |  |
| bargaining by Petitioner and Petitioner de<br>requests that the National Labor Relat  |  |   |  |  |   |  |  |  |
| 2a. Name of Employer  | uons Board pro   |   | ddress(es) of Establishme  |  |   |  |  |  |
| Republic Services, Inc.   |  |   | East 13th Road, Ot   |  | and namber, o   |  |  |  |
| 3a. Employer Representative – Name and  | Title  |   | 3b. Address (If same a   |  |   |  |  |  |
| Jim Allen   | i ilue   |   | same   | is 20 - state same)  |   |  |  |  |
| 3c. Tel. No.  |  |   |  | ······································   |   |  |  |  |
|   | 3d. Cell No.   |   | 3e. Fax No.  |  | 3f. E-Mail Ad   |  |  |  |
| 815-434-1808  |  |   | 815-434-1885   |  |   | Republicservices.com   |  |  |
| 4a. Type of Establishment (Factory, mine, v   | vholesaler, etc.)  |   |  |  |   | and State where unit is located:   |  |  |
| landfill  |  | waste remov   | ai   |  | Ottaw   | a, Illinois  |  |  |
| 5b. Description of Unit Involved  |  |   |  |  |   | 6a. No. of Employees in Unit:  |  |  |
| Included: See attached  |  |   |  |  |   | 19   |  |  |
|   |  |   |  |  |   | 6b. Do a substantial number (30%   |  |  |
| Excluded:   |  |   |  |  |   | or more) of the employees in the<br>unit wish to be represented by the   |  |  |
| See attached  |  |   |  |  |   | Petitioner? Yes V No   |  |  |
| Check One: 7a. Request for re   | cognition as Ba  | ragining Represent  | ative was made on (Date)   | 0/12/2010  | nd Employer de  | clined recognition on or about   |  |  |
|   |  |   | ed, so state). no repl   |  | nd Employer de  | chilled recognition on or about  |  |  |
| 7h Betitioner is o  |  | ad as Parasising P  | Representative and desires   | V<br>contification under th  | a Act   |  |  |  |
| 8a. Name of Recognized or Certified Bar   | naining Agent /  | If none so state  | 8b. Address  | ceruncation under th   | e Au.   | ·  |  |  |
| none  | anning Agent (   | n none, so suitoj.  | ob. Address  |  |   |  |  |  |
| 8c. Tel No.   | 8d Cell No.  |   | 8e. Fax No.  |  | 8f. E-Mail Ad   | dress  |  |  |
|   |  |   |  |  |   |  |  |  |
|   |  | Ph. Date of Besegnition   | f Recognition or Certification 8i. Expiration Date of Current or M   |  |   |  |  |  |
| 8g. Affiliation, if any   | on. Date   |   |  |  |   | Date of Current or Most Recent   |  |  |
| 8g. Affiliation, if any   |  |   | on. Date of Recognition (  | or Certification   |   | ny (Month, Day, Year)  |  |  |
|   |  |   |  |  | Contract, if a  | ny (Month, Day, Year)  |  |  |
| 8g. Affiliation, if any<br>9. Is there now a strike or picketing at the E   | mployer's establ   | lishment(s) involved  |  |  | Contract, if a  | ny (Month, Day, Year)  |  |  |
| 9. Is there now a strike or picketing at the E  |  |   | i? If so, appro  | ximately how many e  | Contract, if a mployees are p   | ny (Month, Day, Year)<br>Participating?  |  |  |
| 9. Is there now a strike or picketing at the E (Name of labor organization)   |  | , has pic   | 1?_ <b>no</b> If so, appro<br>keted the Employer since   | ximately how many e<br>(Month, Day, Year)  | Contract, if a mployees are p   | ny (Month, Day, Year)<br>varticipating?  |  |  |
| <ul> <li>9. Is there now a strike or picketing at the E (Name of labor organization)</li></ul>  | Petitioner and th  | has pic<br>ose named in items   | 1? _ <b>no</b> If so, appro<br>keted the Employer since<br>s 8 and 9, which have clain   | ximately how many e<br>(Month, Day, Year)<br>ned recognition as re   | Contract, if a mployees are p   | ny (Month, Day, Year)<br>varticipating?  |  |  |
| 9. Is there now a strike or picketing at the E (Name of labor organization)   | Petitioner and th  | has pic<br>ose named in items   | 1? _ <b>no</b> If so, appro<br>keted the Employer since<br>s 8 and 9, which have clain   | ximately how many e<br>(Month, Day, Year)<br>ned recognition as re   | Contract, if a mployees are p   | ny (Month, Day, Year)<br>varticipating?  |  |  |
| <ul> <li>9. Is there now a strike or picketing at the E (Name of labor organization)</li></ul>  | Petitioner and th  | , has pic<br>ose named in items<br>n the unit described   | 1? _ <b>no</b> If so, appro<br>keted the Employer since<br>s 8 and 9, which have clain   | ximately how many e<br>(Month, Day, Year)<br>ned recognition as re   | Contract, if a mployees are p   | ny (Month, Day, Year)<br>varticipating?  |  |  |
| <ul> <li>9. Is there now a strike or picketing at the E (Name of labor organization)</li></ul>  | Petitioner and th<br>iny employees in  | , has pic<br>ose named in items<br>n the unit described   | 1? _ <b>no</b> If so, appro<br>keted the Employer since<br>s 8 and 9, which have clain   | ximately how many e<br>(Month, Day, Year) _<br>ned recognition as re<br>e, so state)   | Contract, if a mployees are p   | ny (Month, Day, Year)<br>varticipating?<br>nd other organizations and individuals  |  |  |
| <ul> <li>9. Is there now a strike or picketing at the E (Name of labor organization)</li></ul>  | Petitioner and th<br>iny employees in  | , has pic<br>ose named in items<br>n the unit described   | 1? _ <b>no</b> If so, appro<br>keted the Employer since<br>s 8 and 9, which have clain   | ximately how many e<br>(Month, Day, Year) _<br>ned recognition as re<br>e, so state)   | Contract, if a mployees are p   | ny (Month, Day, Year)<br>varticipating?<br>nd other organizations and individuals  |  |  |
| <ul> <li>9. Is there now a strike or picketing at the E (Name of labor organization)</li></ul>  | Petitioner and th<br>iny employees in  | , has pic<br>ose named in items<br>n the unit described   | 1? _ <b>no</b> If so, appro<br>keted the Employer since<br>s 8 and 9, which have clain   | ximately how many e<br>(Month, Day, Year)<br>ned recognition as re<br>e, so state)<br>10c. Tel. No.  | Contract, if a mployees are p   | ny (Month, Day, Year)<br>participating?  |  |  |
| <ul> <li>9. Is there now a strike or picketing at the E (Name of labor organization)</li></ul>  | Petitioner and th<br>Iny employees ir<br>10b. A  | , has pic<br>lose named in items<br>n the unit described<br>ddress  | I? <u>no</u> If so, appro<br>keted the Employer since<br>s 8 and 9, which have clain<br>in item 5b above. <i>(If none</i>  | ximately how many e<br>(Month, Day, Year) _<br>ned recognition as re<br>e, so state)<br>10c. Tel. No.<br>10e. Fax No.  | Contract, if a  | ny (Month, Day, Year)<br>participating?  |  |  |
| 9. Is there now a strike or picketing at the E (Name of labor organization) 10. Organizations or individuals other than known to have a representative interest in a none 10a. Name 11. Election Details: If the NLRB conducts any such election.   | Petitioner and th<br>iny employees in<br>10b. A<br>s an election in t  | , has pic<br>nose named in items<br>in the unit described<br>ddress<br>his matter, state you  | I? <u>no</u> If so, appro<br>keted the Employer since<br>s 8 and 9, which have clain<br>in item 5b above. <i>(If none</i>  | ximately how many e<br>(Month, Day, Year) _<br>hed recognition as re<br>e, so state)<br>10c. Tel. No.<br>10e. Fax No.<br>11a. Election Typ   | Contract, if a<br>employees are p<br>presentatives a<br>e:  | ny (Month, Day, Year) Participating? Ind other organizations and individuals 10d. Cell No. 10f. E-Mail Address   |  |  |
| 9. Is there now a strike or picketing at the E (Name of labor organization) 10. Organizations or individuals other than known to have a representative interest in a none 10a. Name 11. Election Details: If the NLRB conducts any such election. 11b. Election Date(s):  | Petitioner and th<br>Iny employees in<br>10b. A<br>an election in t  | , has pic<br>lose named in items<br>n the unit described<br>ddress<br>his matter, state you<br>Election Time(s):  | I? <u>no</u> If so, appro<br>keted the Employer since<br>s 8 and 9, which have clain<br>in item 5b above. <i>(If none</i>  | ximately how many e<br>(Month, Day, Year)<br>ned recognition as re<br>, so state)<br>10c. Tel. No.<br>10e. Fax No.<br>11a. Election Typ<br>11d. Election Loc   | Contract, if a<br>employees are p<br>presentatives a<br>e:<br>Manual<br>ation(s):   | ny (Month, Day, Year)<br>participating?<br>nd other organizations and individuals<br>10d. Cell No.<br>10f. E-Mail Address<br>Mail Mixed Manual/Mail  |  |  |
| 9. Is there now a strike or picketing at the E (Name of labor organization) 10. Organizations or individuals other than known to have a representative interest in a none 10a. Name 11. Election Details: If the NLRB conducts any such election. 11b. Election Date(s): 10/10/18   | Petitioner and th<br>Iny employees in<br>10b. A<br>an election in t<br>11c. I<br>5:00 te   | , has pic<br>ose named in items<br>n the unit described<br>ddress<br>his matter, state you<br>Election Time(s):<br>o 8:00 a.m.  | I? <u>no</u> If so, appro<br>keted the Employer since<br>s 8 and 9, which have clain<br>in item 5b above. <i>(If none</i>  | ximately how many e<br>(Month, Day, Year)<br>ned recognition as re<br>, so state)<br>10c. Tel. No.<br>10e. Fax No.<br>11a. Election Typ<br>11d. Election Loc<br>2840 East 13th R   | Contract, if a<br>employees are p<br>presentatives a<br>e:  | ny (Month, Day, Year)<br>participating?<br>nd other organizations and individuals<br>10d. Cell No.<br>10f. E-Mail Address<br>Mail Mixed Manual/Mail<br>. 61350, downstairs conference room   |  |  |
| 9. Is there now a strike or picketing at the E (Name of labor organization) 10. Organizations or individuals other than I known to have a representative interest in a none 10a. Name 11. Election Details: If the NLRB conducts any such election. 11b. Election Date(s): 10/10/18 12a. Full Name of Petitioner (including log   | Petitioner and th<br>Iny employees in<br>10b. A<br>an election in t<br>11c. I<br>5:00 te   | , has pic<br>ose named in items<br>n the unit described<br>ddress<br>his matter, state you<br>Election Time(s):<br>o 8:00 a.m.  | I? <u>no</u> If so, appro<br>keted the Employer since<br>s 8 and 9, which have clain<br>in item 5b above. <i>(If none</i>  | ximately how many e<br>(Month, Day, Year)<br>ned recognition as re<br>, so state)<br>10c. Tel. No.<br>10e. Fax No.<br>11a. Election Typ<br>11d. Election Loc.<br>2840 East 13th Re<br>12b. Address (stre   | Contract, if a<br>employees are p<br>presentatives a<br>e:<br>Manual<br>ation(s):<br>oad, Ottawa, IL<br>eet and number  | ny (Month, Day, Year) Participating? Ind other organizations and individuals 10d. Cell No. 10f. E-Mail Address Mail Mixed Manual/Mail 61350, downstairs conference room city, state, and ZIP code)   |  |  |
| 9. Is there now a strike or picketing at the E (Name of labor organization) 10. Organizations or individuals other than I known to have a representative interest in a none 10a. Name 11b. Election Details: If the NLRB conducts any such election. 11b. Election Date(s): 10/10/18 12a. Full Name of Petitioner (including Io Teamsters Local No. 179   | Petitioner and th<br>Iny employees in<br>10b. A<br>s an election in t<br>11c. I<br>5:00 tr<br>ccal name and r  | has pic<br>ose named in items<br>n the unit described<br>ddress<br>his matter, state you<br>Election Time(s):<br>o 8:00 a.m.<br>number)   | I? no If so, appro<br>keted the Employer since<br>a 8 and 9, which have clain<br>in item 5b above. (If none<br>ur position with respect to   | ximately how many e<br>(Month, Day, Year)<br>ned recognition as re<br>, so state)<br>10c. Tel. No.<br>10e. Fax No.<br>11a. Election Typ<br>11d. Election Loc<br>2840 East 13th R<br>12b. Address (stra<br>1000 N.E. Fronta   | Contract, if a<br>employees are p<br>presentatives a<br>e:<br>Manual<br>ation(s):<br>oad, Ottawa, IL<br>eet and number  | ny (Month, Day, Year) Participating? Ind other organizations and individuals 10d. Cell No. 10f. E-Mail Address Mail Mixed Manual/Mail 61350, downstairs conference room city, state, and ZIP code)   |  |  |
| <ol> <li>Is there now a strike or picketing at the E         (Name of labor organization)</li></ol>   | Petitioner and th<br>Iny employees in<br>10b. A<br>s an election in t<br>11c. I<br>5:00 tr<br>ccal name and r  | has pic<br>ose named in items<br>n the unit described<br>ddress<br>his matter, state you<br>Election Time(s):<br>o 8:00 a.m.<br>number)   | I? no If so, appro<br>keted the Employer since<br>a 8 and 9, which have clain<br>in item 5b above. (If none<br>ur position with respect to   | ximately how many e<br>(Month, Day, Year)<br>ned recognition as re<br>, so state)<br>10c. Tel. No.<br>10e. Fax No.<br>11a. Election Typ<br>11d. Election Loc<br>2840 East 13th R<br>12b. Address (stra<br>1000 N.E. Fronta   | Contract, if a<br>employees are p<br>presentatives a<br>e:<br>Manual<br>ation(s):<br>oad, Ottawa, IL<br>eet and number  | ny (Month, Day, Year) Participating? Ind other organizations and individuals 10d. Cell No. 10f. E-Mail Address Mail Mixed Manual/Mail 61350, downstairs conference room city, state, and ZIP code)   |  |  |
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Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 ef 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 routifiely set of the information are july set for the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routifiely set of the information are july set for the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routifiely set of the information are july set for the information will cause the NLRB (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.



# Attachment to RC Petition Filed by

### **Teamsters Local Union No. 179**

# regarding employees of

## **Republic Services, Inc.**

### 5B. Unit Involved

#### Included:

÷ -

**.**\*\*

All full-time or regular part-time truck drivers at the Ottawa, Illinois facility.

#### **Excluded:**

All loaders, clerical, janitors, mechanics, supervisors, managers, professional employees, guards, business-office clerical employees, and all other employees.

|  |   |  |  | DO NOT WRITE IN THIS SPACE   |  |   |  |  |
|--|---|--|--|--|--|---|--|--|
| FORM NLRB-602 (RC)<br>(2-18)   | -   | ED STATES OF AMÉRIA<br>L LABOR RELATIONS E   |  | Case No.   | Date Filed   |   |  |  |
| (2-10)   |   | RC PETITION  |  | 25-RC-2  | 27520  | 9/18/18   |  |  |
| employer concerned is loca<br>the employer and all other p   | eted. The petition<br>parties named in t  | must be accompanied<br>the petition of: (1) the p  | thirtigour, submit an originu<br>by both a showing of interest<br>petition; (2) Statement of Posi<br>id only be filed with the NLRB  | al of this Petition to<br>(see 6b below) and<br>tion form (Form NL   | an NLRB office in the Re<br>d a certificate of service s<br>RB-505); and (3) Descripti   | gion in which the<br>howing service on<br>on of Representation  |  |  |
| batgaining by Petitioner an  | d Petitioner desire:  | s to be certified as repre   | ENTATIVE - A substantial number<br>esentative of the employees. The<br>lts proper authority pursuant   | Petitioner alleges   | that the following circums   | stances exist and   |  |  |
| 2s. Name of Employer:  | 1 1   |  | ddress(es) of Establishment(s) i   |  | A  |   |  |  |
|  | nternat   |  | 46 N Grand 1   |  | nstield, IL  | 62707   |  |  |
| 3a. Employer Representative  |   |  | dáress (if same as 2b - state sai  | <b>me)</b> :   |  |   |  |  |
| Ramesh .   |   |  | Same   |  |  |   |  |  |
| 3c. Tel. No.<br>(2・7) よころ -よころ   | 3d. Cell No   | D.   | 3e, Fax No.  | St. E-Mail   |  | gus, com  |  |  |
| 4a. Type of Establishment (Fa  |   | salar, stc.)   | 4b. Principal Product or Serv  |  | 5a. City and State where   |   |  |  |
| 6b. Description of Unit Invol  |   |  | - 21001119   |  | 5a. Number of Employee   | s în Unit:  |  |  |
| Included: SECURIT  | y guards  | 5  |  |  | (7) SEUL.  | n   |  |  |
| Excluded:  |   | 1 6 1  | · · · · · · · · · · · · · · · · · · ·  | 1  | 65. Do a substantial num<br>of the employees in th   |   |  |  |
| Check One: 7a. Request   | 15n Ond   | Bargaining Representat   | GUARO SCISEN   | 29-18 **   | represented by the Pe<br>d Employer declined recogn  | nitioner? X Yes No  |  |  |
| on or about  | (Date)  | (If no reply   | received, so state).   |  |  |   |  |  |
| 8a. Name of Recognized or (  |   |  | presentative and desires certific<br>tate) 8b. Address:  | ation under the Act.   |  |   |  |  |
|  |   |  |  |  |  |   |  |  |
| N  | ONE   |  |  |  |  |   |  |  |
| SC. Tel. No.   | 8d. Cell No   | o.   | ðe. Fax No   | 8f. E-Mail A   | Address  |   |  |  |
| 8g. Affiliation, if any:   | 1   |  | 8h. Date of Recognition or Cert  |  | on Date of Current or Most<br>ntract, if any (Month, Oay, Y  |   |  |  |
| 9. is there now a strike or pick   | ating at the Employ   |  | wahad? If so as  |  |  |   |  |  |
| (Name of Labor Organizatio   |   | yers establishment(s) in   |  | •  | ny employees are participet<br>i the Employer since (Monti   |   |  |  |
|  |   |  |  |  |  |   |  |  |
|  | is other than Petitic   | oner and those named in  | n items 8 and 9, which have dai  | med recognilion as r   |  |   |  |  |
| 10. Organizations or individua   |   |  | n items 8 and 9, which have clai<br>s in the unit described in item 5b   |  |  | F SE SU   |  |  |
| 10. Organizations or individua   |   | iterest in any employees   |  | above. (If none, so  | state)   |   |  |  |
| 10. Organizations or individua<br>Individuals known to have  |   |  |  |  | state)   | SUBREG<br>SEP 18<br>PEORI   |  |  |
| 10. Organizations or individua<br>Individuals known to have  |   | iterest in any employees   |  | above. (If none, so  | o. 10d. Cell No.   |   |  |  |
| <ol> <li>Organizations or individua<br/>individuals known to have</li> <li>Name</li> </ol>   | a representative in   | nterest in any employees   | s in the unit described in item 5b   | above. (If none, so  | stale)<br>o. 10d. Cell No.<br>lo. 10f. E-Mail Ad   | NECLIVED  |  |  |
| <ol> <li>Organizations or individual<br/>individuals known to have</li> <li>Name</li> <li>10s. Name</li> <li>11. Election Details: If the Ni</li> </ol>  | a representative in   | nterest in any employees   |  | above. (If none, so  | stale)<br>o. 10d. Cell No.<br>o. 10f. E-Mail Ac<br>11a, Election Type:   | NEGON 3<br>REGON 3<br>18 PM 3   |  |  |
| <ol> <li>Organizations or individual<br/>individuals known to have</li> <li>Name</li> <li>10s. Name</li> <li>11. Election Details: If the Ni</li> </ol>  | a representative in   | nterest in any employees   | s in the unit described in item 5b   | above. (If none, so .<br>10c. Tel. N<br>10c. Fax N<br>0 any such election:   | stale)<br>o. 10d. Cell No.<br>o. 10f. E-Mail Ac<br>11a, Election Type:   | NECLIVED  |  |  |
| <ol> <li>Organizations or individual<br/>individuals known to have</li> <li>Name</li> <li>11. Election Details: If the Ni</li> <li>11b. Election Date(s): 9-2</li> </ol>   | ERB conducts and C - ( 8  | therest in any employees<br>10b. Address<br>election in this matter, s<br>11c. Election Time(s):   | s in the unit described in item 5b<br>tate your position with respect to   | above. (If none, so<br>10c. Tel. N<br>10c. Fex N<br>5 any such election:<br>11d. Election  | o. 10d. Cell No.<br>o. 10f. E-Mail Ao<br>11a. Election Type:<br>Manuat Mail<br>on Location(s):<br>A Used Mall  | NEGON 3<br>REGON 3<br>18 PM 3   |  |  |
| <ol> <li>Organizations or individua<br/>individuals known to have</li> <li>Name</li> <li>Election Details: If the Ni</li> </ol>  | ERB conducts and C - ( 8  | therest in any employees<br>10b. Address<br>election in this matter, s<br>11c. Election Time(s):   | s in the unit described in item 5b<br>tate your position with respect to   | above. (If none, so<br>10c. Tel. N<br>10c. Fex N<br>5 any such election:<br>11d. Election  | stale)<br>o. 10d. Cell No.<br>lo. 10f. E-Mail Ac<br>11a. Election Type:<br>Manual Mail   | NEGON 3<br>REGON 3<br>18 PM 3   |  |  |
| 10. Organizations or individual<br>individuals known to have<br>10a. Name<br>11. Election Details: If the Ni<br>11b. Election Date(s):<br>12a. Full Name of Petitioner<br>TEAMSHIF Loca  | RB conducts and<br>C-18<br>(including local na.   | terest in any employees<br>10b. Address<br>election in this matter, s<br>11c. Election Time(s):<br>me and number):<br><b>Up.</b> 627   | tate your position with respect to   | above. (If none, so .<br>10c. Tel. N<br>10e. Fax N<br>D any such election:<br>11d. Election:<br>Nood<br>reet and number, clip  | stale)<br>o. 10d. Cell No.<br>o. 10f. E-Mail Ac<br>11a. Election Type:<br>Manual Mail<br>on Location(s):<br>Lucation(s):<br>Lucation(s):<br>KJ. Rodice   | NEGON 3<br>REGON 3<br>18 PM 3   |  |  |
| 10. Organizations or individual<br>individuals known to have<br>10p. Name<br>11. Election Details: If the Ni<br>11b. Election Date(s):<br>12a. Full Name of Petitioner<br><u>TEAMSTIC Laca</u><br>12c. Full name of Petitioner<br><u>IEAMSTIC Laca</u><br>12c. Full name of national or is<br>INTERMENTION   | a representative in<br>LRB conducts and of<br>O - 18<br>(including local national<br>International labor of<br>L Broths   | Interest in any employees<br>10b. Address<br>election in this matter, s<br>11c. Election Time(s):<br>Inter and number):<br>100. 627<br>organization of which Pe<br>100. 64   | tate your position with respect to   | above. (If none, so<br>10c. Tel. N<br>10e. Fax N<br>10e. Fax N<br>10e. Fax N<br>10e. Fax N<br>11d. Election:<br>11d. Ele   | stale)<br>o. 10d. Cell No.<br>(o. 10f. E-Mail Ac<br>11a. Election Type:<br>Manual Mail<br>on Location(s):<br>A Used Mall<br>y, State and ZIP code):<br>Rd, Restice   | REGION 33   |  |  |
| <ol> <li>10. Organizations or individual<br/>individuals known to have</li> <li>109. Name</li> <li>110. Election Details: If the Ni</li> <li>11b. Election Date(s): 9-2</li> <li>12a. Full Name of Petitioner</li> <li>12a. Full name of petitioner</li> <li>12b. Full name of national or is</li> <li>12c. Full name of national or is</li> <li>12c. Full name of national or is</li> <li>12d. Tel. No.</li> </ol>  | RB conducts and<br>C-18<br>(including local national labor of<br>L Union   bord   bo   | 10b. Address<br>10b. Address<br>election in this matter, s<br>11c. Election Time(s):<br>Ine and number):<br>U  | tate your position with respect to<br>12b. Address (str<br>12b. Address (str) 12b. Address (str<br>12b. Address (str) 12b. Address (s   | above. (If none, so any such election:<br>10c. Tel. N<br>10c. Fax N<br>10c. Fax N<br>10c. Fax N<br>10c. Fax N<br>10c. Fax N<br>10c. Tel. N<br>10c. Fax N<br>11d. Election:<br>11d. Election:  | stale)<br>o. 10d. Cell No.<br>o. 10f. E-Mail Ac<br>11a. Election Type:<br>Manual Mail<br>on Location(s):<br>Lucous Mall,<br>y, State and ZIP code):<br>RJ, Restice   | ORIERON SAINT   |  |  |
| 10. Organizations or individual<br>individuals known to have<br>10p. Name<br>11. Election Details: If the Ni<br>11b. Election Date(s): 9-2<br>12a. Full Name of Petitioner<br><u>TEAMSTIC Laca</u><br>12c. Full name of Petitioner<br><u>12. Full name of Petitioner</u><br>12. Full name of retional or is<br>12. Tel. No.<br>(30) 689-9092   | a representative in<br>LRB conducts and of<br>O - 18<br>(including local national<br>International labor of<br>A Broth K<br>(12e, Cell N<br>Socy 9  | 10b. Address<br>10b. Address<br>election in this matter, s<br>11c. Election Time(s):<br>11c. Election Time(s): | tate your position with respect to<br>12b. Address (str<br>12b. Address (str<br>12b. Address (str<br>101 A<br>12b. Address (str<br>12b. Address (str) 12b. Add   | above. (If none, so .<br>10c. Tel. N<br>10e. Fax N<br>10e. Fax N<br>10e. Fax N<br>10e. Fax N<br>10e. Fax N<br>10e. Fax N<br>11d. Elect<br>Nor<br>11d. Elect<br>11d. Elect<br>1 | stale)<br>o. 10d. Cell No.<br>o. 10f. E-Mail Ac<br>11a. Election Type:<br>Manual Mail<br>on Location(s):<br>Location(s):<br>Location(s):<br>Kol, Restucción<br>Address<br>Location(s):<br>Address  | ORIERON SAINT   |  |  |
| 10. Organizations or individual<br>individuals known to have<br>10p. Name<br>11. Election Details: If the Ni<br>11b. Election Date(s): 9-2<br>12a. Full Name of Petitioner<br><u>TEAMSTIC Laca</u><br>12c. Full name of Petitioner<br><u>12. Full name of Petitioner</u><br>12. Full name of retional or is<br>12. Tel. No.<br>(30) 689-9092   | a representative in<br>LRB conducts and of<br>O - 18<br>(including local national<br>International labor of<br>A Broth K<br>(12e, Cell N<br>Socy 9  | Interest in any employees<br>10b. Address<br>election in this matter, s<br>11c. Election Time(s):<br>Internation of which Performance<br>internation of  | tate your position with respect to<br>12b. Address (str<br>12b. Address (str<br>12b. Address (str<br>12b. Address (str<br>12b. Address (street and nut   | above. (If none, so :<br>10c. Tel. N<br>10e. Fax N<br>10e. Fax N<br>10e. Fax N<br>10e. Fax N<br>10e. Fax N<br>10e. Fax N<br>11d. Elect<br>Nor<br>11d. Elect<br>Nor<br>11d. Elect<br>11d. Elect<br>12g. E-Mai<br>esentation proceed   | stale)<br>o. 10d. Cell No.<br>o. 10f. E-Mail Ac<br>11a. Election Type:<br>St Manual Mail<br>on Location(e):<br>Lucous Mall<br>y, State and ZIP code):<br>RJ, Restice<br>a Address<br>Comparison of the star back<br>State and Star back<br>Comparison of the star back<br>State and Star back   | ORIERON SAINT   |  |  |
| 10. Organizations or individual<br>individuals known to have<br>10p. Name<br>11. Election Details: If the Ni<br>11b. Election Date(s): 9-2<br>12a. Full Name of Petitioner<br><u>TEAMSTIC Laca</u><br>12c. Full name of Petitioner<br><u>12d. Full name of petitioner</u><br>12d. Tel. No.<br>(30) <u>LB9-9092</u><br>13. Refresentative of the Pe   | a representative in<br>LRB conducts and of<br>O - 18<br>(including local national<br>International labor of<br>A Broth K<br>(12e, Cell N<br>Socy 9  | 10b. Address<br>10b. Address<br>election in this matter, s<br>11c. Election Time(s):<br>11c. Election Time(s): | tate your position with respect to<br>12b. Address (str<br>12b. Address (str<br>12b. Address (str<br>12b. Address (str<br>12b. Address (street and number)<br>13b. Address (street and number)   | above. (If none, so :<br>10c. Tel. N<br>10e. Fax N<br>10e. Fax N<br>10e. Fax N<br>10e. Fax N<br>10e. Fax N<br>11d. Election:<br>11d. Election:   | stale)<br>o. 10d. Cell No.<br>to. 10f. E-Mail Ac<br>11a. Election Type:<br>Stanual Mail<br>on Location(s):<br>A Useds Mall<br>y, State and ZIP code):<br>Rd, Restucces<br>State and ZIP code):<br>Rd, Restucces<br>State and ZIP code):<br>101. Cell No.<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Mail<br>Ma | ORIERON SAINT   |  |  |
| 10. Organizations or individual<br>individuals known to have<br>10p. Name<br>11. Election Details: If the Ni<br>11b. Election Date(s): 9-2<br>12a. Full Name of Petitioner<br><u>TEAMSTER Laca</u><br>12c. Full name of netional or is<br><u>Internetione</u><br>12d. Tel. No.<br>(306) <u>LB9-9092</u><br>13. Representative of the Petitioner<br>13. Name and Title:<br><u>Christepher</u> He<br>13c. Tel. No.   | a representative in<br>LRB conducts and in<br>O - 18<br>(including local national<br>International labor of<br>Labor of Labor of Labor of<br>Labor of Labor of Labor of<br>Labor of Labor of Labor of Labor<br>Labor of Labor of Labor of Labor of Labor<br>Labor of Labor of Labor of Labor of Labor<br>Labor of Labor of Labor of Labor of Labor of Labor<br>Labor of Labor of Labor of Labor of Labor of Labor<br>Labor of Labor of Labor of Labor of Labor of Labor of Labor of Labor<br>Labor of Labor of Lab | Interest in any employees<br>10b. Address<br>election in this matter, s<br>11c. Election Time(s):<br>11c. Elec | tate your position with respect to<br>12b. Address (str<br>12b. Address (str<br>12b. Address (str<br>12f. Fax No.<br>13b. Address (street and nu)<br>13c. Fax No.  | above. (If none, so :<br>10c. Tel. N<br>10e. Fax N<br>10e. Fax N<br>10e. Fax N<br>10e. Fax N<br>10e. Fax N<br>11d. Election:<br>11d. Election:   | stale)<br>o. 10d. Cell No.<br>to. 10f. E-Mail Ac<br>11a. Election Type:<br>Stanual Mail<br>on Location(s):<br>Lusous Mall<br>y, State and ZIP code):<br>Rd, Restucces<br>E-t famsters loce<br>Ing.<br>2/P code):<br>Address  | ORI 10 PH 301<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MI |  |  |
| 10. Organizations or individual<br>individuals known to have<br>10p. Name<br>11. Election Details: If the Ni<br>11b. Election Date(s): 9-2<br>12a. Full Name of Petitioner<br><u>TEAMSTER Laca</u><br>12c. Full name of petitioner<br><u>TEAMSTER Laca</u><br>12c. Full name of national or i<br><u>Internetional</u><br>12d. Tel. No.<br>(309) <u>LB9-9092</u><br>13. Representative of the Petition<br>13a. Name and Title:<br><u>Chridephic</u> He<br>13c. Tel. No.<br><u>309 - 689 - 9090</u><br>1 declare that I have read this | a representative in<br>LRB conducts and of<br>O - 18<br>(including local national<br>International tabor of<br>A Brotha<br>(12e, Cell N<br>Social a<br>suttioner who will a<br>suttioner who will a<br>13d, Cell N<br>309 - 0   | Interest in any employees<br>10b. Address<br>election in this matter, s<br>11c. Election Time(s):<br>11c. Elec | tate your position with respect to<br>12b. Address (str<br>12b. Address (str<br>12b. Address (str<br>12f. Fax No.<br>12f. Street and null<br>13b. Address (street and null   | above. (If none, so :<br>10c. Tel. N<br>10e. Fax N<br>10e. Fax N<br>10e. Fax N<br>10e. Fax N<br>10e. Fax N<br>11d. Election:<br>11d. Election:   | stale)<br>o. 10d. Cell No.<br>o. 10f. E-Mail Ac<br>11a. Election Type:<br>Manual Mail<br>on Location(s):<br>Luscus Mall<br>, State and ZIP code):<br>RJ, Restice<br>RJ, Restice<br>21P code):<br>Address<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress   | ORIERON SAINT   |  |  |
| 10. Organizations or individual<br>individuals known to have<br>109. Name<br>11. Election Details: If the Ni<br>11b. Election Date(s): 9-2<br>12a. Full Name of Petitioner<br><u>TEAMSHIF</u> Laca<br>12c. Full name of Petitioner<br><u>12d. Tel. No.</u><br>13. Representative of the Petition<br>13. Name and Title:<br><u>Chrideophic</u> He<br>13c. Tel. No.<br>309 - 689 - 9090  | a representative in<br>LRB conducts and of<br>O - 18<br>(including local national<br>International tabor of<br>A Brotha<br>(12e, Cell N<br>Social a<br>suttioner who will a<br>suttioner who will a<br>13d, Cell N<br>309 - 0   | Interest in any employees<br>IDb. Address<br>election in this matter, s<br>II.c. Election Time(s):<br>II.c. Election Time(s):<br>II       | tate your position with respect to<br>12b. Address (str<br>12b. Address (str<br>12b. Address (str<br>12b. Address (str<br>12b. Address (str<br>12b. Address (str<br>12b. Address (str<br>13b. Address (str) 13b. Address (s | above. (If none, so :<br>10c. Tel. N<br>10e. Fax N<br>10e. Fax N<br>10e. Fax N<br>10e. Fax N<br>10e. Fax N<br>11d. Election:<br>11d. Election:   | stale)<br>o. 10d. Cell No.<br>o. 10f. E-Mail Ac<br>11a. Election Type:<br>Manual Mail<br>on Location(s):<br>Luscus Mall<br>, State and ZIP code):<br>RJ, Restice<br>RJ, Restice<br>21P code):<br>Address<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress<br>Laddress   | ORI 10 PH 301<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MILLER<br>MI |  |  |

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PRIVACY ACT STATEMENT

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 Higation. 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   |                    |                       | DO NOT WRITE IN THIS SPACE                               |   |                       |  |  |  |  |
|---|--------------------|-----------------------|--|---|-----------------------|--|--|--|--|
| RC PE   | ARD                | Case No.<br>25        | 25-RC-227836 9/21/18                                     |   |                       |  |  |  |  |
| INSTRUCTIONS: Unless e-Filed us   | ing the Agenc      | v's website, w        | ww.nlrb.gov.submit.a                                     | on original of this   | Petition to a         | n NI RB office in the Region   |  |  |  |
| in which the employer concerned i   | s located Th       | o notition must       | he accompanied by l                                      | hoth a chowing o  | f intoraet (ea        | a 6h holow) and a cortificate  |  |  |  |
| of convice chowing convice on the   | o notalcu. In      | ell ether nertie      | o normed in the netitie                                  |   | i iiitei est (se      | e ob 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 |                    |                       |  |   |                       |  |  |  |  |
| (Form NLRB-505); and (3) Descript   | ion of Repres      | entation Case I       | Procedures (Form NLI                                     | RB 4812). The sh  | owing of int          | erest should only be filed   |  |  |  |
| with the NLRB and should not be s   | erved on the       | employer or an        | y other party.   |   |                       |  |  |  |  |
| 1. PURPOSE OF THIS PETITION: RC-CE  | RTIFICATION OF     | REPRESENTATI          | VE - A substantial number                                | of employees wish to  | be represented        | for purposes of collective   |  |  |  |
| bargaining by Petitioner and Petitioner de<br>requests that the National Labor Relat  | ions Board proc    | ed as representative  | ve of the employees. The l                               | Petitioner alleges the                                      | at the following      | g circumstances exist and  |  |  |  |
| 2a. Name of Employer  | ions board proc    | 2b Ac                 | dress(es) of Establishment                               | t(s) involved (Street a                                     | nd number city        | State 7/P code   |  |  |  |
| Scrap Metal Services LLC  |                    | 54450                 | 0 Smilax Road, New                                       | Carlisle IN 4655  | 2                     | , orare, zh obae)  |  |  |  |
| 3a. Employer Representative – Name and  | Title              | 10110                 | 3b. Address (If same as                                  |   | ·                     |  |  |  |  |
| Joe Roese, General Manager  | - The              |                       | Same   | 20 - state samer  |                       |  |  |  |  |
| 3c. Tel. No.  | 3d. Cell No.       |                       |  |   | Of E Mail Asid        |  |  |  |  |
| 574/654-7554  | 936/672-376        | 22                    | 3e. Fax No.<br>N/A                                       |   | 3f. E-Mail Add        |  |  |  |  |
|   |                    |                       |  |   |                       | apmetalservices.com  |  |  |  |
| 4a. Type of Establishment (Factory, mine, w   | vholesaler, etc.)  | 4b. Principal pro     |  |   |                       | and State where unit is located:                                       |  |  |  |
| Factory   |                    | Scrap steel re        | ecyling  |   | New Ca                | arlisle, Indiana   |  |  |  |
| 5b. Description of Unit Involved  |                    |                       |  |   |                       | 6a. No. of Employees in Unit:  |  |  |  |
| Included: All full-time and regular par   | t-time heavy eo    | quipment operate      | ors employed by the Em                                   | ployer at its New C   | Carlisle              | 15   |  |  |  |
| Indiana, facility.  |                    |                       |  |   |                       | 6b. Do a substantial number (30%                                       |  |  |  |
| Excluded:   | vicere lehe        | roro clarical         | a and guarda as  | defined under   | the Ast               | or more) of the employees in the<br>unit wish to be represented by the |  |  |  |
| All managers, super   | visors, iabo       | rers, cierical        | s, and guards as   | aennea under  | the Act.              | Petitioner? Yes V No   |  |  |  |
| Check One: 7a. Request for re   | cognition as Barr  | aining Representa     | tive was made on (Date)                                  | 1/A 200   | d Employer deal       | lined recognition on or about  |  |  |  |
|   |                    |                       | d, so state). $N/A$                                      | <b>₩/₽</b> and  | Employer deci         | inted recognition on or about  |  |  |  |
|   | (Date)             | (in no reply receive  | epresentative and desires of                             |   | A                     |  |  |  |  |
| 8a. Name of Recognized or Certified Bar   |                    |                       | 8b. Address  | certification under the                                     | ACI.                  |  |  |  |  |
| N/A   |                    | none, so statej.      | N/A  |   |                       |  |  |  |  |
| 8c. Tel No.<br>N/A  | 8d Cell No.<br>N/A |                       | 8e. Fax No.<br>N/A                                       |   | 8f. E-Mail Add<br>N/A | ress   |  |  |  |
| 8g. Affiliation, if any   |                    |                       | 8h. Date of Recognition or                               |   |                       | Data of Current or Most Decent   |  |  |  |
|   |                    |                       |  | Certification   |                       | Date of Current or Most Recent<br>y (Month, Day, Year)                 |  |  |  |
| N/A   |                    |                       | N/A  |   | N/A                   | (monal, buy, rour)   |  |  |  |
| 9. Is there now a strike or picketing at the E  | mplover's establis | shment(s) involved    | ? NI/A If so, approx                                     | imately how many em   | plovees are pa        | rticipating? N/A   |  |  |  |
| (Name of labor organization) N/A  |                    |                       |  |   |                       | <u></u>  |  |  |  |
|   |                    |                       | keted the Employer since (I                              |   |                       | ······································                                 |  |  |  |
| 10. Organizations or individuals other than I   |                    |                       |  |   | esentatives and       | d other organizations and individuals                                  |  |  |  |
| known to have a representative interest in a<br>None.   | ny employees in    | the unit described    | in item 50 above. (if none,                              | so state)   |                       |  |  |  |  |
| 10a. Name   | 10b. Ad            | drose                 |  | 10c. Tel. No.   |                       | 10d. Cell No.  |  |  |  |
| roa. Name   | 100. Ad            | uless                 |  | N/A   |                       | N/A  |  |  |  |
| NI/A  | NI//               | ۱                     |  | 10e. Fax No.  |                       | 10f. E-Mail Address  |  |  |  |
| IN/77   | I N/ /             | ٦                     |  | N/A   |                       | N/A  |  |  |  |
| <ol> <li>Election Details: If the NLRB conducts<br/>any such election.</li> </ol>   | an election in th  | is matter, state you  | r position with respect to                               | 11a. Election Type: A Manual Mail Mixed Manual/M            |                       |  |  |  |  |
| 11b. Election Date(s):  | 11c. E             | lection Time(s):      |  | 11d. Election Locat   | ion(s):               |  |  |  |  |
| 10/02/2018  | 7:00 a.            |                       |  | Employer's shop   |                       |  |  |  |  |
| 12a. Full Name of Petitioner (including lo  |                    |                       |  | 12b. Address (street and number, city, state, and ZIP code) |                       |  |  |  |  |
| International Union of Operating Engineer   |                    |                       |  | 6200 Joliet Road, C   |                       |  |  |  |  |
| 12c. Full name of national or international la<br>International Union of Operating Engineers  |                    | of which Petitioner   | is an affiliate or constituen                            | t (if none, so state)                                       |                       |  |  |  |  |
| 12d. Tel No.  | 12e. Cell No.      |                       | 12f. Fax No.   | r   | 12g. E-Mail Ac        | Idress   |  |  |  |
| 708/482-8800  | N/A                |                       | 708/588=1647   |   | N/A                   | 101000   |  |  |  |
| 13. Representative of the Petitioner who  |                    | ice of all papers for |  |   |                       | 1997 - 1997 - A. C.                |  |  |  |
| •   | •                  |                       |  |   | ·                     |  |  |  |  |
| 13a. Name and Title Dale D. Piers   | on, Genera         | al Counsel            | 13b. Address (street and<br>6140 Joliet Road, Countrysic |   | and ZIP code)         |  |  |  |  |
| 13c. Tel No.  | 13d. Cell No.      |                       | 13e. Fax No.   | 10, 12 00020  | 13f. E-Mail Ad        | drace  |  |  |  |
| 708/579-6663  | N/A                |                       | 708/588-1647   |   | dpierson@loca         |  |  |  |  |
| I declare that I have read the above petiti   |                    | statements are tru    |  |   |                       |  |  |  |  |
|   |                    |                       | -  | neage and benefit   |                       |  |  |  |  |
| Name (Print)  | thature /          | $\gamma$              | General Counsel  |   | Date                  |  |  |  |  |
| Dale D. Pierson<br>WILLFUL FALSE STATEME  | NTS ON THE DE      |                       |  | IMDDISONMENT (1)  | 09/21/2018            |  |  |  |  |
|   |                    |                       |  |   |                       |  |  |  |  |

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.

| ORM NURB-502 (HC)  |  |   |  |  |  |  |  |                     |
|--|--|---|--|--|--|--|--|---------------------|
| Could be here and some and the main of the second s   | UNITED   | STATES OF AMERICA   | 6  | DO NOT WRITE IN THIS SPACE   |  |  |  | -                   |
| (2-18) NATIONAL LABOR RELATIONS BOARD  |  | Case  | No   |  | Date Filed   |  |  |                     |
|  | RC PETITION<br>Coless e-Filed using the Agency's website, [wow.nictu.gov/], submit an o  |   | 25-RC-227858 9/24/18   |  |  |  | }  |                     |
| mployer concerned is loc.<br>he employer and all other ,<br>lase Procedures (Form NL   | ated. The petition m<br>parties named in the<br>.RB 4812). The show  | iust be accompanied b<br>e petition of: (1) the pe<br>sing of interest should   | ry both a showing of inter<br>ritition; (2) Statement of P<br>I only be filed with the NL  | rest (see 6b<br>baltion form<br>.RB and sho  | below) and a<br>(Form NLRB-<br>uld not be ser  | (ertificate of sec<br>505); and (3) De<br>ved on the emp   | rvice showing service<br>iscription of Represen<br>loyer or any other part   | on<br>lation<br>ly: |
| PURPOSE OF THIS PETI<br>bargarning by Petitioner an<br>requests that the Nation  | nd Petrioner desires t   | to be certified as represe  | entative of the employees.   | The Petition   | er alleges that  | t the following c  | incumstances exist an  | d                   |
| a. Name of Employer:   |  |   | tress(es) of Establishment   |  |  |  |  |                     |
| Willanglen   |  |   | W. Lamm Ro   |  | eport,   | 76 61  | 1032   |                     |
| Employer Representativ   |  | A 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1   | iress (/f same as 20 - state   | same)  |  |  |  |                     |
| nichelle you   | ing, Exacuti   | ire Diruchie S  | ame  |  |  |  |  |                     |
| c. Tet No  | 3d Cell No.  |   | Je. Fax No.  |  | JI E-Mai Add   |  | 0 202 852  | 100                 |
|  | 815-7  | 13-9423   |  |  | myour  |  | lowglen-il.  | ( or                |
| + Type of Establishment (Fo<br>Health Cal  |  |   | 40 Principal Productors<br>Divect Ca   |  | 1 14   | City and State   | where while located  |                     |
| ts. Description of Unit Invol  | fred /   | 7   | MICH CA  | yce  | 6  | Number of Em   | Divers in Unit   |                     |
| nchused All at   | wheel.   |   |  |  |  | 0  | D  |                     |
|  | tached   |   |  |  | 10   | Deet   | al number (30% or more   |                     |
| and  | kicker   |   |  |  | 1  | of the employee  | the Petitoner?   | 1.000               |
| Ineck One Via Request  |  | arganing Representativ  | e was made on (Date)   | 28. 2  | and Er   | rolover declined   | and a state of the local division of the second state of the secon   |                     |
| on or about  | discuss.   | (If no reply n<br>ged as Earpaining Repl  | eceived so state) By   | this P   | ration   | n  |  |                     |
| a, Name of Recognized or   | Contraction of the second second second  | the second se   | the set of  |  |  |  |  |                     |
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| ic Tel No  | 64 Cell No   |   | te. Fax No.  | ľ  | M. E-Mail Addr   | ess  |  |                     |
|  | 6d Cell No   | 10  | Re. Fax No.  |  |  | ess<br>late of Current or  | Most   |                     |
|  | 6d Cell No   | 6   |  | Centration   | & Expration D  | nan<br>Kana wana ma  |  | _                   |
| lą Atliacon I any  |  |   | h Date of Recognition or 0   | Centration   | & Expraton D<br>Recent Contrac   | ate of Current or  | Day, Year)   |                     |
| lg Attration # any   | Heting at the Employee   |   | h Date of Recognition or 0   | approximate  | & Expiration D<br>Recent Contrac<br>ity how many e   | ate of Current or<br>It. If any (Month)<br>mployees are pa   | Day, Year)   |                     |
| ig Attracon, if any<br>Is there now a strike or pick<br>(Name of Labor Organization<br>10. Organizations or individual   | eting at the Employe<br>on)<br>als other than Pestion  | r's establishment(s) invo   | h Date of Recognition or C<br>olved? <u>NO</u> If so<br>tems 8 and 9, which have   | approximate<br>, h<br>clarmed recop  | 8. Expiration D<br>Recent Contrac<br>Ily how many e<br>as picketed the<br>photon as repre  | ate of Current or<br>C. If any (Month.<br>mployees are pa<br>Employer since<br>sentatives and o  | Dey, Year)<br>rtopating?<br>(Month, Day, Year)   |                     |
| ig Attracon, if any<br>Is there now a strike or pick<br>(Name of Labor Organization<br>10. Organizations or individual   | eting at the Employe<br>on)<br>als other than Pestion  | r's establishment(s) invo   | h Date of Hecogrition or C<br>cived? <u>NO</u> If so   | approximate<br>, h<br>clarmed recop  | 8. Expiration D<br>Recent Contrac<br>Ily how many e<br>as picketed the<br>photon as repre  | ate of Current or<br>C. If any (Month.<br>mployees are pa<br>Employer since<br>sentatives and o  | Dey, Year)<br>rtopating?<br>(Month, Day, Year)   |                     |
| 10. Organizations or individua   | eting at the Employe<br>on)<br>its other than Peston<br>a representative inter   | r's establishment(s) invo   | h Date of Recognition or C<br>olved? <u>NO</u> If so<br>tems 8 and 9, which have   | Approximate<br>, h<br>claimed record<br>50 above (7  | 8. Expiration D<br>Recent Contrac<br>Ily how many e<br>as picketed the<br>photon as repre  | ate of Current or<br>C. If any (Month.<br>mployees are pa<br>Employer since<br>sentatives and o  | Dey, Year)<br>(topating?<br>(Month Dey, Year)<br>(ther organizations and   |                     |
| ig Affiliason, if any<br>I is there now a strike or pick<br>(Name of Labor Organization<br>O Organizations or individual<br>individuals known to have  | eting at the Employe<br>on)<br>its other than Peston<br>a representative inter   | r's establishment(s) invo<br>er and those named in /<br>rest in any employees in  | h Date of Recognition or C<br>olved? <u>NO</u> If so<br>tems 8 and 9, which have   | approximate<br>, h<br>claimed recop<br>50 above (7   | B. Expiration D.<br>Recent Contract<br>ity how many e<br>as picketed the<br>gnition as repre-<br>finition, so state<br>10c. Tell. No.  | ate of Current or<br>1. If any (Month<br>mployees are pa<br>Employees are pa<br>Employees and o<br>1<br>10d. C.  | Day, Year)<br>(topating?<br>(Month Day, Year)<br>ther organizations and<br>#<br>e8 No  |                     |
| <ul> <li>Is There now a strike or pick</li> <li>Name of Labor Organization</li> <li>Organizations or individuals known to have</li> </ul>  | eting at the Employe<br>on)<br>its other than Peston<br>a representative inter   | r's establishment(s) invo<br>er and those named in /<br>rest in any employees in  | h Date of Recognition or C<br>olved? <u>NO</u> If so<br>tems 8 and 9, which have   | approximate<br>, h<br>claimed recop<br>50 above (7   | 6: Expiration D<br>Recent Contract<br>Ity how many er<br>as picketed the<br>proton as repre-<br>finitive, so state   | ate of Current or<br>1. If any (Month<br>mployees are pa<br>Employees are pa<br>Employees and o<br>1<br>10d. C.  | Dey, Year)<br>(topating?<br>(Month Dey, Year)<br>(ther organizations and   |                     |
| g Attracon, if any<br>Is there now a strike or pick<br>(Name of Labor Organization<br>O Organizations or individual<br>individuals known to have   | eting at the Employe<br>on)<br>its other than Peston<br>a representative inter   | r's establishment(s) invo<br>er and those named in /<br>rest in any employees in  | h Date of Recognition or C<br>olved? <u>NO</u> If so<br>tems 8 and 9, which have   | approximate<br>, h<br>claimed recop<br>50 above (7   | B. Expiration D.<br>Recent Contract<br>ity how many e<br>as picketed the<br>gnition as repre-<br>finition, so state<br>10c. Tell. No.  | ate of Current or<br>1. If any (Month<br>mployees are pa<br>Employees are pa<br>Employees and o<br>1<br>10d. C.  | Day, Year)<br>(topating?<br>(Month Day, Year)<br>ther organizations and<br>#<br>e8 No  |                     |
| <ul> <li>Is there now a strike or pick<br/>(Name of Labor Organizator)</li> <li>Organizations or individual<br/>individuals known to have</li> <li>Name</li> <li>Election Details: if the No</li> </ul>  | eting at the Employe<br>on)<br>its other than Peston<br>a representative inter<br>1<br>LRB conducts and ele  | er's establishment(s) invo<br>er and those named in /<br>rest in any employees /<br>(0) Address<br>ection in this matter, stat  | h Date of Recognition or C<br>olived? <u>NO</u> It so<br>terms 8 and 9, which have i<br>In the unit described in item  | approximate<br>, h<br>claimed recop<br>50 above (7   | B. Expiration D.<br>Recent Contract<br>ity how many e<br>as picketed the<br>gnition as repre-<br>finition, so state<br>10c. Tell. No.  | ate of Current or<br>L I any (Month<br>mployees are pa<br>Employees are pa<br>Employees and o<br>1<br>104 Ci<br>104 Ci<br>104 Ci<br>104 Ci   | Day, Year)<br>(topating?<br>(Month Day, Year)<br>ther organizations and<br>#<br>e8 No  | aiMai               |
| <ul> <li>Is there now a strike or pick<br/>(Name of Labor Organization<br/>(Name of Labor Organization<br/>(Norganizations or individual<br/>individuals known to have</li> <li>10a. Name</li> <li>11. Election Details: if the Ni<br/>(11b. Election Date(s))</li> </ul>  | Leting at the Employer<br>on)<br>as other than Pestion<br>a representative inter<br>LRB conducts and ele   | r's establishment(s) invo<br>er and those named in /<br>rest in any employees in  | h Date of Recognition or C<br>olived? <u>NO</u> It so<br>terms 8 and 9, which have i<br>In the unit described in item  | approximate<br>, h<br>claimed record<br>5b above (7  | B. Expiration D.<br>Recent Contract<br>ity how many e<br>as picketed the<br>gnition as repre-<br>finition, so state<br>10c. Tell. No.  | Inte of Current or<br>L I any (Month)<br>mployees are pa<br>Employees and o<br>1<br>100 Cr<br>107 E-1<br>Election Type<br>Manual 1   | Dey, Year)<br>Hopating?<br>(Month, Dey, Year)<br>ther organizations and<br>*<br>ett No<br>tett No<br>Mail Address<br>Mail Address<br>Mail Diffed Manu<br>LogaCK  |                     |
| <ul> <li>Is there now a strike or pick<br/>(Name of Labor Organizator)</li> <li>Organizations or individual<br/>individuals known to have</li> <li>Name</li> <li>Election Details: if the No</li> </ul>  | Leting at the Employer<br>on)<br>as other than Pestion<br>a representative inter<br>LRB conducts and ele   | er's establishment(s) invo<br>er and those named in /<br>rest in any employees /<br>(0) Address<br>ection in this matter, stat  | h Date of Recognition or C<br>olived? <u>NO</u> It so<br>terms 8 and 9, which have i<br>In the unit described in item  | approximate<br>, h<br>claimed record<br>5b above (7  | 6: Expiration D<br>Recent Contrac<br>ly how many e<br>as picketed the<br>prittion as repre<br>findne, so state<br>10c. Tel. No.<br>10e. Fax No.<br>10e. Fax No.<br>11e.<br>11a   | Inte of Current or<br>L I any (Month)<br>mployees are pa<br>Employees and o<br>1<br>100 Cr<br>107 E-1<br>Election Type<br>Manual 1   | Dey, Year)<br>rtopating?<br>(Month, Dey, Year)<br>ther organizations and<br>ther organizations and<br>there organi   |                     |
| <ul> <li>Is there now a strike or pick<br/>(Name of Labor Organization)</li> <li>Organizations or individual<br/>individuals known to have</li> <li>Name</li> <li>Election Details: if the Ni</li> <li>Election Date(s)</li> </ul>   | Leting at the Employer<br>on)<br>as other than Pestion<br>a representative inter<br>LRB conducts and ele   | er's establishment(s) invo<br>er and those named in /<br>rest in any employees /<br>(0) Address<br>ection in this matter, stat  | h Date of Recognition or C<br>sived? NO It so.<br>terms 8 and 9, which have o<br>in the unit described in term<br>be your position with respect<br>m - 5 pm + 100<br>C + orb. 120 Address  | approximate<br>, h<br>claimed record<br>5b above (7  | 6: Expiration D<br>Recent Contrac<br>ly how many e<br>as picketed the<br>prittion as repre<br>findne, so state<br>10c. Tel. No.<br>10e. Fax No.<br>10e. Fax No.<br>11e.<br>11a   | Inter of Current or<br>I. Pary (Month.<br>Incloyees are pa<br>Employees are pa<br>Imployees  | Dey, Year)<br>rtopating?<br>(Month Dey, Year)<br>rter organizations and<br>ell No<br>Mail Address<br>Mail Officed Manu<br>Vorack<br>LIMU Cumful er   |                     |
| <ul> <li>Is there now a strike or pick<br/>(Name of Labor Organization)</li> <li>Organizations or individual<br/>individuals known to have</li> <li>Name</li> <li>Election Details: if the Ni</li> <li>Election Date(s)</li> </ul>   | Leting at the Employer<br>on)<br>as other than Pestion<br>a representative inter<br>LRB conducts and ele   | er's establishment(s) invo<br>er and those named in /<br>rest in any employees /<br>(0) Address<br>ection in this matter, stat  | h Date of Recognition or C<br>olived? <u>NO</u> It so<br>terms 8 and 9, which have i<br>In the unit described in item  | approximate<br>, h<br>claimed record<br>5b above (7  | 6: Expiration D<br>Recent Contrac<br>ly how many e<br>as picketed the<br>prittion as repre<br>findne, so state<br>10c. Tel. No.<br>10e. Fax No.<br>10e. Fax No.<br>11e.<br>11a   | Inter of Current or<br>I. Pary (Month.<br>Incloyees are pa<br>Employees are pa<br>Imployees  | Dey, Year)<br>Hopating?<br>(Month, Dey, Year)<br>ther organizations and<br>*<br>ett No<br>tett No<br>Mail Address<br>Mail Address<br>Mail Diffed Manu<br>LogaCK  |                     |
| <ul> <li>Is There now a strike or pick<br/>(Name of Labor Organizator)</li> <li>Organizations or individual<br/>individuals known to have</li> <li>Organizations or individual<br/>individuals known to have</li> <li>Name</li> <li>Election Details: if the Ni</li> <li>Election Date(s)</li> </ul>   | LRB conducts and ele<br>(18 Conducts and ele<br>(19 Conducts and ele   | er's establishment(s) inve<br>er and those named in v<br>rest in any employees v<br>to Address<br>ection in this matter, stat<br>to Election Time(s)<br>6a - 10a - 1 pr<br>b and number<br>1 This of Strick<br>2007Cil 31, Afri<br>agrication of which Person   | the parts of Recognition or C<br>shreed? $\underline{NO}$ if so<br>terms 8 and 9, which have o<br>the unit described in item<br>the unit described in item<br>$\underline{N-5} pm 44 10p_1$<br>$\underline{CiUity}_{120}$ According<br>$\underline{CiUity}_{120} Constraints procession \underline{L-CIO}_{120} Chil(10)$  | Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Appro | 6: Expiration D<br>Recent Contrac<br>ly how many e<br>as picketed the<br>prittion as repre<br>findne, so state<br>10c. Tel. No.<br>10e. Fax No.<br>10e. Fax No.<br>11e.<br>11a   | Inter of Current or<br>I. Pary (Month.<br>Incloyees are pa<br>Employees are pa<br>Imployees  | Dey, Year)<br>rtopating?<br>(Month Dey, Year)<br>rter organizations and<br>ell No<br>Mail Address<br>Mail I Mored Manu<br>Mored Manu<br>Mored Manu<br>Morek K<br>(MY - White Year)   |                     |
| <ul> <li>Is There now a strike or pick<br/>(Name of Labor Organizator)</li> <li>Organizations or individual<br/>individuals known to have</li> <li>Organizations or individual<br/>individuals known to have</li> <li>Name</li> <li>Election Details: if the Ni</li> <li>Election Date(s)</li> </ul>   | LRB conducts and ele<br>(ICAN FICAN F  | er's establishment(s) invo<br>er and those named in /<br>rest in any employees /<br>(0) Address<br>ection in this matter, stat  | the parts of Recognition or C<br>shreed? $\underline{NO}$ if so<br>terms 8 and 9, which have o<br>the unit described in item<br>the unit described in item<br>$\underline{N-5} pm + 10p$ ,<br>$\underline{CiUtty}$ 120 Assidue<br>$\underline{CiUtty}$ 205 N   | Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Appro | 6: Expiration D<br>Recent Contrac<br>ly how many e<br>as picketed the<br>prittion as repre<br>findne, so state<br>10c. Tel. No.<br>10e. Fax No.<br>10e. Fax No.<br>11e.<br>11a   | Inter of Current or<br>I. Pary (Month.<br>Incloyees are pa<br>Employees are pa<br>Imployees  | Dey, Year)<br>rtopating?<br>(Month Dey, Year)<br>rter organizations and<br>ell No<br>Mail Address<br>Mail I Mored Manu<br>Mored Manu<br>Mored Manu<br>Morek K<br>(MY - White Year)   |                     |
| <ul> <li>Is there now a strike or pick<br/>(Name of Labor Organization)</li> <li>Organizations or individual<br/>individuals known to have</li> <li>Name</li> <li>Election Details: if the Ni</li> <li>Election Date(s)</li> </ul>   | LRB conducts and ele<br>(18 Conducts and ele<br>(19 Conducts and ele   | er's establishment(s) inve<br>er and those named in v<br>rest in any employees v<br>to Address<br>ection in this matter, stat<br>to Election Time(s)<br>6a - 10a - 1 pr<br>b and number<br>1 This of Strick<br>2007Cil 31, Afri<br>agrication of which Person   | the parts of Recognition or C<br>shreed? $\underline{NO}$ if so<br>terms 8 and 9, which have o<br>the unit described in item<br>the unit described in item<br>$\underline{N-5} pm 44 10p_1$<br>$\underline{CiUity}_{120}$ According<br>$\underline{CiUity}_{120} Constraints procession \underline{L-CIO}_{120} Chil(10)$  | Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Approximate<br>Appro | 6: Expiration D<br>Recent Contrac<br>ly how many e<br>as picketed the<br>prittion as repre<br>findne, so state<br>10c. Tel. No.<br>10e. Fax No.<br>10e. Fax No.<br>11e.<br>11a   | Inter of Current or<br>I. Pary (Month.<br>Incloyees are pa<br>Employees are pa<br>Imployees  | Dey, Year)<br>rtopating?<br>(Month Dey, Year)<br>rter organizations and<br>ell No<br>Mail Address<br>Mail I Mored Manu<br>Mored Manu<br>Mored Manu<br>Morek K<br>(MY - White Year)   |                     |
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WELFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE TITLE 18, SECTION 1001) Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA) 29 U.S.C. § 151 ef 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 were for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74542-43 (Dec. 13, 2006). The NLRB well further explain these uses upon request. Disclosure of this information to the NLRB is voluntary, however, follower to supply the information may cause the NLRB to decline to invoke its processes.

7a: All full time and regular part time employees who work at Willow Glen Academy including the following job titles: Administrative Assistant, Authorized Direct Support Provider (ADSP), Direct Support Provider (DSP), Food Handler, Maintenance, Medical Counselor, On-Call DSP, Paraprofessional, Senior DSP (SDSP), Residential/House Supervisor and Trainer.

7b: All office clerical employees, confidential employees, professional employees, managerial employees, guards and supervisors as defined in the Act.

FORM NLRB-502 (RC) (4-15)

| UNITED STATES   | 5 GOVERNMENT  |  | DO NOT WRITE IN THIS SPACE   |  |   |  |
|---|---|--|--|--|---|--|
|   | RELATIONS BOARD   | Case   | <sup>No.</sup> 25-RC-2279.   | 30 Date                                | e Filed 9/24/18   |  |
| INSTRUCTIONS: Unless e-Filed us<br>in which the employer concerned i<br>of service showing service on the<br>(Form NLRB-505); and (3) Descript<br>with the NLRB and should not be s | s located. The petition must<br>employer and all other partie<br>ion of Representation Case | t be accompan<br>is named in th<br>Procedures (F | ied by both a showi<br>e petition of: (1) the<br>orm NLRB 4812). Th  | ng of interest (s<br>petition; (2) Sta | see 6b below) and a certificate tement of Position form   |  |
| 1. PURPOSE OF THIS PETITION: RC-CE<br>bargaining by Petitioner and Petitioner of<br>requests that the National Labor Relat  | esires to be certified as representati  | ive of the employe                               | es. The Petitioner alleg   | es that the followi                    | ng circumstances exist and  |  |
| 2a. Name of Employer<br>Avancez   | 1280  | 8 Stonebridg                                     | blishment(s) involved (Str<br>je Rd. Roanoke In  | 46783                                  | ty, State, ZIP code)  |  |
| 3a. Employer Representative – Name and<br>Chad Pieper   | I Title   | 3b. Address (f                                   | f same as 2b – state sam   | B)                                     | 5   |  |
| 3c. Tel. No.  | 3d. Cell No.<br>260-446-2172  | 3e. Fax No.<br>260-960-30                        | 90   |  | android-ind.com   |  |
| 4a. Type of Establishment (Factory, mine, v<br>Factory  |   | duct or service<br>leadliners, Fro               | ont end Sheet Metal  |  | y and State where unit is located:<br>oke, IN   |  |
| 5b. Description of Unit Involved<br>Included: All Production Em   | nlovees   |  |  |  | 6a. No. of Employees in Unit:<br>Approx, 135  |  |
| Excluded:   | ployees   |  |  |  | 6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes 🗸 No |  |
| 7-30-20<br>7b. Petitioner is ci   | urrently recognized as Bargaining R   | d, so state).<br>epresentative and               | desires certification unde   |  | clined recognition on or about  |  |
| 8a. Name of Recognized or Certified Bar   | gaining Agent (If none, so state).  | 8b. A  | ddress   |  |   |  |
| 8c. Tel No.   | 8d Cell No.   | 8e. Fax No.                                      |  | 8f. E-Mail Ad                          | ldress  |  |
| 8g. Affiliation, if any   |   | 8h. Date of Reco                                 | gnition or Certification   |  | on Date of Current or Most Recent<br>any (Month, Day, Year)   |  |
| 9. Is there now a strike or picketing at the E<br>(Name of labor organization)  | mployer's establishment(s) involved<br>, has pick   |  |  |  | participating?  |  |
| 10. Organizations or individuals other than a known to have a representative interest in a  |   |  |  | s representatives a                    | nd other organizations and individuals  |  |
| 10a. Name   | 10b. Address  |  | 10c. Tel. No.  | 5                                      | 10d. Cell No.   |  |
|   |   |  | 10e. Fax No.   |  | 10f, E-Mail Address   |  |
| <ol> <li>Election Details: If the NLRB conducts<br/>any such election.</li> </ol>   | an election in this matter, state you   | ur position with res                             | spect to 11a. Election   | Type: Manual                           | Mail Mixed Manual/Mail  |  |
| 11b. Election Date(s):<br>10-19-2018 0r 10-26-2018  | 11c. Election Time(s):<br>6:00 a.m. to 12:00pm and 2:00                                     | p.m. to 5:00p.m. (3                              | 11d. Election Location(s):<br>Avancez-Roanoke In.  |  |   |  |
| 12a. Full Name of Petitioner (including lo<br>United Automobile, Aerospace and  |   | rkers of Ameri                                   | 12b. Address (street and number, city, state, and ZIP code)<br>America 8000 E. Jefferson Ave, Detroit, MI, 48214 |  |   |  |
| 12c. Full name of national or international la  | bor organization of which Petitioner  | r is an affiliate or c                           | onstituent <i>(if none, so sta</i>   | te)                                    |   |  |
| 12d. Tel No.<br>313-926-5000  | 12e. Cell No.   | 12f. Fax No.<br>313-926-5240                     |  | 12g. E-Mail A                          | Address   |  |
| 13. Representative of the Petitioner who<br>13a. Name and Title Dan Huddleston  | UAW International Rep   | 13b. Address (                                   | ne representation process<br>street and number, city, s<br>w Suite G Indianapolis In 462                         | tate, and ZIP code)<br>41              |   |  |
| 13c. Tel No.<br>317-247-5515  | 13d. Cell No.<br>317-4502-1950  | 13e. Fax No.<br>317-247-8218                     |  | 13f. E-Mail A<br>dhuddleston           |   |  |
| I declare that I have read the above petiti   |   |  | my knowledge and belie   |  |   |  |
| DAN HUDDLESTEN 1  | an fundaleston  | Title<br>UAW                                     | International  | 1 Rug Date                             | 9-24-2018   |  |
| WILLFUL FALSE STATEME   | NTS ON THIS PETITION CAN BE I   | PUNISHED BY FI                                   |  | T (U.S. CODE, TIT                      | LE 18, SECTION 1001)  |  |

Contract 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 NLRB-502 (RC)   | MINLRB-502 (RC) UNITED STATES OF AMERICA   |                                   |                              |  | DO NOT WRITE IN THIS SPACE |   |                                |                                   |                          |                           |  |
|--|--|-----------------------------------|------------------------------|--|----------------------------|---|--------------------------------|-----------------------------------|--------------------------|---------------------------|--|
| (2-18) NATIONAL LABOR RELATIONS BOARD<br>RC PETITION   |  |                                   | DARD                         | RD Case No.<br>25-RC-228                       |                            |   | 8267                           | ed<br>0/10                        |                          |                           |  |
|  | RCFEIMON   |                                   |                              |  | 25-RC-228267 9/28/18       |   |                                |                                   |                          |                           |  |
| INSTRUCTIONS: Unless e-Filed u.<br>employer concerned is located. T<br>the employer and all other parties<br>Case Procedures (Form NLRB 48 | he petition must be a<br>named in the petitio  | ccompanied b<br>n of: (1) the pe  | y both a sh<br>tition; (2) S | nowing of interest (s<br>Statement of Position | iee 6b be<br>n form (l     | elow) and<br>Form NLI   | l a certificat<br>RB-505); an  | e of service s<br>d (3) Descript  | howing se<br>tion of Rep | ervice on<br>presentation |  |
| 1. PURPOSE OF THIS PETITION: F<br>bargaining by Petitioner and Petit<br>requests that the National Labo                                    | ioner desires to be cer  | tified as represe                 | entative of t                | he employees. The P                            | etitioner                  | r alleges '   | that the foll                  | owing circum                      | stances ex               |                           |  |
| 2a. Name of Employer:  |  | 2b. Add                           | Iress(es) of                 | Establishment(s) invo                          | olved (St                  | reet and r  | number, City                   | , State, ZIP co                   | de):                     |                           |  |
| Thyssenkrupp, TK Cranc   | kshaft LLC   | 1000                              | Lynch l                      | Road, Danville                                 | , 11 61                    | 834   |                                |                                   |                          |                           |  |
| 3a. Employer Representative - Nan  | ne and Title:  | 3b. Add                           | lress (if sam                | ne as 2b - state same                          | <i>):</i>                  |   |                                |                                   |                          |                           |  |
| John Vogt, HR Manager;   | Sandro   | same                              | ;                            |  |                            |   |                                |                                   |                          |                           |  |
| Figueiredo,  |  |                                   |                              |  |                            |   |                                |                                   |                          |                           |  |
| 3c. Tel. No.   | 3d, Cell No.   |                                   | 3e, Fax No                   | э,   | 3f.                        | . E-Mail A  | ddress                         |                                   |                          |                           |  |
| 217-431-8934x544   |  |                                   | 217-43                       | 1-8934   |                            |   |                                |                                   |                          |                           |  |
| 4a. Type of Establishment (Factory, I  | mine, wholesaler, etc.)  |                                   | 4b. Princip                  | al Product or Service                          | 3                          |   | 5a. City an                    | d State where                     | unit is loca             | sted:                     |  |
| manufacturing  |  |                                   | manufa                       | acturing parts                                 |                            |   | Danville,                      | , IL                              |                          |                           |  |
| 5b. Description of Unit Involved:  |  |                                   |                              |  |                            |   | 6a. Numbe                      | of Employee                       | s in Unit:               |                           |  |
| Included:<br>see attatched   |  |                                   |                              |  |                            |   | 235                            |                                   |                          |                           |  |
| Excluded:  |  |                                   |                              |  |                            |   |                                | ubstantial num<br>employees in th |                          |                           |  |
| all office clerical, guards,   |  |                                   |                              |  |                            |   | represe                        | ented by the P                    | etitioner?               |                           |  |
| Check One: 7a. Request for rec   |  | Representative<br>(If no reply r  |                              |  |                            | and   | d Employer o                   | declined recog                    | nition                   |                           |  |
| on or about (Date)   |  |                                   |                              | ,  | on under                   | the Act.  |                                |                                   |                          |                           |  |
| 8a. Name of Recognized or Certific   |  |                                   |                              | ldress:  |                            |   |                                |                                   |                          |                           |  |
| none   |  |                                   |                              |  |                            |   |                                |                                   |                          |                           |  |
| none   |  |                                   |                              |  |                            |   |                                |                                   |                          |                           |  |
| 8c. Tel. No.   | 8d. Cell No.   |                                   | 8e. Fax No                   | 0.   | 8f                         | . E-Mail A  | ddress                         |                                   | <u></u>                  |                           |  |
|  |  |                                   |                              |  |                            |   |                                |                                   |                          |                           |  |
| 8g. Affiliation, if any:   |  | 8                                 |                              |  |                            | on Date of Current or Most<br>htract, if any (Month, Day, Year) |                                |                                   |                          |                           |  |
| 9. Is there now a strike or picketing a  | t the Employer's estab   | lishment(s) invo                  | olved? No                    | If so, appro                                   | oximately                  | how mar   | ny employee:                   | s are participat                  | ting?                    |                           |  |
| (Name of Labor Organization)   |  |                                   | -                            |  | , has                      | s picketed  | the Employ                     | er since (Mont                    | h, Day, Yea              | ar)                       |  |
| 10. Organizations or individuals othe<br>individuals known to have a repre   | r than Petitioner and the<br>esentative interest in an   | iose named in i<br>ny employees i | tems 8 and<br>n the unit de  | 9, which have claime<br>escribed in item 5b ab | ed recogn<br>pove. (If r   | nition as re<br>none, so s                                      | epresentative<br>state)        | es and other or                   | ganization               | s and                     |  |
| 10a. Name  | 10b. Addr  | ess                               | 10c. Te                      |  | Dc. Tel. No                | Tel. No. 10d. Cell No.  |                                |                                   |                          |                           |  |
|  |  |                                   | 10e F                        |  |                            | 0e. Fax No. 10f. E-Mail Address                                 |                                |                                   | ddress                   |                           |  |
|  |  |                                   |                              |  |                            |   |                                |                                   |                          |                           |  |
| 11. Election Details: If the NLRB co   | nducts and election in   | this matter, sta                  | te your posi                 | tion with respect to a                         | ny such e                  | election:   | 11a, Election                  | •••                               | Mixed                    | Manual/Mail               |  |
| 11b. Election Date(s):   | 11c Elect  | tion Time(s):                     |                              |  |                            | 1d. Electic   | on Location(s                  |                                   |                          |                           |  |
| ASAP   |  |                                   |                              |  |                            |   | ) Lynch rd, Danville, IL 61834 |                                   |                          |                           |  |
| 12a. Full Name of Petitioner (includ   | fing local name and nu   | mber):                            | · · · · ·                    | 12b. Address (stree                            |                            |   |                                |                                   |                          |                           |  |
| Production Workers Unio  | 12b. Address (street and number, city, State and ZIP code):<br>1420 Kensington Rd, Oak Brook, Il 60523 |                                   |                              |  |                            |   |                                |                                   |                          |                           |  |
| 12c. Full name of national or internat   | ional labor organizatio  | n of which Petit                  | ioner is an a                | affiliate or constituent                       | (if none,                  | so state)   | :                              |                                   |                          |                           |  |
| National Production World  |  |                                   |                              |  | •                          |   |                                |                                   |                          |                           |  |
| 12d. Tel. No.  | 12e. Cell No.  |                                   | 12f. Fax N                   |  |                            | 2g. E-Mail  | -                              |                                   |                          |                           |  |
| 630-575-0560   | 630-337-8572   |                                   |                              | 5-0570   |                            |   | t@npwu.                        | com                               |                          |                           |  |
| 13. Representative of the Petitione<br>13a. Name and Title:  | er who will accept ser   | vice of all pap                   |                              | poses of the represe<br>ess (street and numb   |                            |   |                                |                                   |                          |                           |  |
| Joe Vincent Senese   |  |                                   |                              | ensington Rd, O                                |                            |   |                                |                                   |                          |                           |  |
| 13c. Tel. No.  | 13d. Cell No.  |                                   | 13e. Fax I                   | No.  | 13                         | 3f. E-Mail  | Address                        | <u> </u>                          |                          |                           |  |
| 630-575-0560   | 630-337-8572   |                                   | 630-57                       | 5-0570   | i                          | vincent   | t@npwu.                        | com                               |                          |                           |  |
| I declare that I have read the abov  |  | e statements a                    |                              |  |                            |   |                                |                                   |                          |                           |  |
| Name (Print)   |  | gnature                           |                              |  | Title                      |   |                                |                                   | T                        | Date                      |  |
| joe Vincent Senese   |  | K                                 | 1                            |  | Pres                       | sident  |                                |                                   |                          | 9/27/18                   |  |
|  | TONENTS ON THIS  |                                   |                              |  | MADISO                     |   | US CODE                        | TITI E 18 SE                      | CTION 100                | 01)                       |  |

UNITED STATES OF AMERICA

DO NOT WRITE IN THIS SPACE

WILLFUL FALSE STATEMENTS ON THIS PETITION CA

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.

5b.

Included: All full-time and part-time employees including machine operators, all production support employees, including maintenance support, lube techs, electrical techs, grind techs, store room, waste water tech, layout room, gage lab, fabrication techs, quality control.

|   |  |   |                            |   | DO NOT WRITE IN THIS SPACE                   |                                       |   |  |                   |  |  |
|---|--|---|----------------------------|---|--|---------------------------------------|---|--|-------------------|--|--|
| FORM NLRB-502 (RD)  | RM NLRB-502 (RD) UNITED STATES OF AMERICA                |   |                            |   |  |                                       |   |  | Date Filed        |  |  |
| (2-18)  | NATIONAL LABOR RELATIONS BOARD<br>RD PETITION            |   |                            | 25-RD-227840  |  |                                       |   | 9/24/18                                  |                   |  |  |
| INSTRUCTIONS: Unless e-File<br>employer concerned is located<br>the employer and all other part | d using the Agency's webs<br>I. The petition must be acc | ite, [www.nirb.gov/] , s                              | wing of interes            | al of this<br>at (see 7 b                               | Petition to an NLRB<br>elow) and a certifica | ate of service sh                     | tion in w                               | hich the                                 | <u> </u>          |  |  |
| Case Procedures (Form NLRB  |  |   |                            |   |  |                                       |   |  | oņ                |  |  |
| 1. PURPOSE OF THIS PETITION<br>recognized bargaining represen<br>Labor Relations Board proces   | tative is no longer their repre                          | esentative. The Petitioner                            | alleges that the           | e followin  | ig circumstances ex                          | s assert that the<br>ist and requests | certilied of that the                   | or currently<br>National                 |                   |  |  |
| 2a. Name of Employer  |  | 2b. Address(es) of<br>1010 Americol                   |                            |   | (Street and number,                          | city, state, ZIP co                   | de)                                     |  |                   |  |  |
| Américold Lógistics<br>3a. Employer Representative - Na   | ame and Title  | 3b. Address (If sam                                   |                            |   | 51008  |                                       |   |  |                   |  |  |
| Becka Fritz   | -  | 915 S Caron R   |                            |   |  |                                       |   |  |                   |  |  |
| 3c. Tel No.<br>815-561-8160   | 3d, Fax No.  | Se. Cell No.  |                            | 3f. E-Mail  | Address                                      |                                       |   |  |                   |  |  |
| 4a. Type of Establishment (Factory  | , mine, wholesaler, etc.)                                | I`  |                            | 4b. Princip   | al product or service                        |                                       |   |  |                   |  |  |
| Warehouse   |  |   |                            | Storage   |  |                                       |   |  |                   |  |  |
| 5a. Description of Unit Involved<br>Included:   | · · · · · · · · · · · · · · · · · · ·                    |   |                            |   |  | 5b. City an<br>is locat               |   | rhere unit                               |                   |  |  |
| All full time and part time   | warehouse employees                                      |   |                            |   |  | Rochelle                              | , IL                                    |  |                   |  |  |
| Excluded:   |  |   |                            |   |  |                                       |   |  |                   |  |  |
| Office Clearical Employee   | s, maintenance employ                                    | yees, customer servi                                  | ce representa              | atives, fe  | oremen                                       |                                       |   | ,  |                   |  |  |
| 6. No. of Employees in Unit 136   |  | umber (30% or more) of th<br>ning representative? 🔀 Y |                            | the unit no   | longer wish to be rep                        | presented by the                      | centiled .                              | or currently                             | 1                 |  |  |
| 8a. Name of Recognized or Certific  |  |   |                            |   | 8b. Affiliation, if any                      |                                       | ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ | S  |                   |  |  |
| RWDSU, Local 578  |  |   | _                          |   |  | <u>л</u> а                            | SEP                                     | ans                                      | 20                |  |  |
| 8c. Address<br>1212 Northfield Ct   |  |   | 8d. Tel. No.<br>815-762-83 | A A   | 8e. Cell No.                                 | OR                                    | 24                                      | nn ≥                                     | E<br>E<br>E       |  |  |
| Rochelle, IL 61068  |  |   | 81. Fax No.                |   | 8g. E-Mail Address                           |                                       |   | 0.84                                     | <u>~ .</u>        |  |  |
|   |  |   |                            |   | - • • • • • •                                | =                                     | AM                                      |  | 1                 |  |  |
| 9. Date of Recognition or Certificat<br>2012  | 100.   | 10. Expiration Date<br>January, 2018                  | of Current or M            | ost Rècen   | t Contract, if any (Mo                       | nth, Day, Year)                       | 1                                       | ω  |                   |  |  |
| 11a. Is there now a strike or picket  | ing at the Employer's establi                            |   | res 🕅 No                   | 111. 11 50  | approximately how m                          | any employees a                       |   | nating?                                  |                   |  |  |
| 11c. The Employer has been picke  |  |   |                            |   | opproximation in                             |                                       |   | organizati                               | on, of            |  |  |
| (Insert Address)  | •  | ·   |                            |   | sinc   | e (Month, Day, Y                      | ear)                                    |  |                   |  |  |
| 12. Organizations or individuals of   |  |   |                            |   |  | anizations                            |   |  |                   |  |  |
| 12a. Name   | 12b. Address   | ing employees in the dist                             |                            | 12c. Tel. N   |  | 12d. Fax No.                          |   |  |                   |  |  |
| *   |  |   |                            |   |  |                                       |   |  |                   |  |  |
|   |  |   |                            | 12e. Cell I   | Vo.  | 12f. E-Mail Addr                      | ess                                     | بعاهد فيركر ينصر فالغاه                  |                   |  |  |
| 13. Election Details: If the NLRB<br>matter, state your position with                           | respect to any such election                             |   |                            | 13a, Election Type: 🛛 Manual 🔲 Mail 🔲 Mixed Manual/Mail |  |                                       |   |  | il                |  |  |
| 13b. Election Date(s)<br>October 10, 2018   | )  | on Time(s)<br>0, 5:30-6:30, 9:30-1                    |                            | 13d. Election Location(s)<br>Training Room              |  |                                       |   |  |                   |  |  |
| (b) (6), (b) (7)(C)   |  |   | (0.50 )<br>(0.60 )         |   |  | ու անց ավերին հետում է ուն տեղ առաջ   |   | an a |                   |  |  |
| 14a. Address (Street and number,  | city, state, ZIP code)                                   |   |                            | 14b. Tel. N   |  | 14c. Fax No.                          |   |  |                   |  |  |
| (b) (6), (b) (7)(C)   |  |   | 1                          | (b) (6), (b<br>14d. Cel 1                               |  | 140 E.Mail Add                        | att.                                    |  |                   |  |  |
|   | <i>s</i> -   |   |                            | 14d. Cell No. 14e. E-Mail Address<br>(b) (6), (b) (7)(0 |  |                                       |   |  |                   |  |  |
| 1 41. Affiliation, if any   |  |   | •                          |   |  |                                       |   |  |                   |  |  |
| 15. Representative of the Petition<br>15a, Name   | ner who will accept service                              | e of all papers for purpos                            |                            | sentation   | proceeding.                                  | 6.8.                                  | -                                       |  |                   |  |  |
| (b) (6), (b) (7)(C)   |  |   |                            |   |  |                                       |   |  |                   |  |  |
| 15c. Address (Street and number,<br>(b) (6), (b) (7)(C)   | city, state, ZIP code)                                   | angelou un chang partanu i unangendara.               |                            | (b) (6), (b) (7)(C)                                     |  |                                       | •• #isis > • •                          | ~~~~                                     |                   |  |  |
|   |  |   |                            | 151. Cell No. 15g. £-Mail Address (b) (6), (b) (7)(C)   |  |                                       |   |  |                   |  |  |
| I declare that I have read the abo  | ove petition and that the st                             | atements are true to the                              |                            |   | nd belief.                                   |                                       |   | <b>6</b> 11 - 1                          |                   |  |  |
| Năme (Print)<br>(b) (6), (b) (7)(C)   |  | ) (7)(⊂)<br>(7)(⊂)                                    | 3                          | Title :<br>Petitione                                    |  | •                                     | 9/21                                    |  |                   |  |  |
| WILLFUL FALSE S   | TATEMENTS ON THIS PET                                    | TION CAN BE PUNISHE                                   | D'BY FINE AND              | IMPRISC   | INMENT (U.S. CODE                            | ; TITLE 18, SEC                       | TION 100                                | J1]:+~~~~~~                              | ay ing management |  |  |