UNITED STATES GOVERNMENT				DO NOT WRITE IN THIS SPACE					
RC PETITION 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 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 Section 9 of the N	hat the follow	ng circumstances exist and 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 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% 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): September 20, 2018		lection Time(s): .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 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							

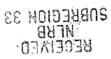
PRIVACY ACT STATEMENT Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. 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 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 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 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 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) Participating?		
9. Is there now a strike or picketing at the E (Name of labor organization)		, has pic	1?_ no If so, appro keted the Employer since	ximately how many e (Month, Day, Year)	Contract, if a mployees are p	ny (Month, Day, Year) varticipating?		
 9. Is there now a strike or picketing at the E (Name of labor organization)	Petitioner and th	has pic ose named in items	1? _ no If so, appro keted the Employer since s 8 and 9, which have clain	ximately how many e (Month, Day, Year) ned recognition as re	Contract, if a mployees are p	ny (Month, Day, Year) varticipating?		
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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 iny employees in 10b. A s an election in t	, has pic nose named in items in the unit described ddress his matter, state you	I? <u>no</u> If so, appro keted the Employer since s 8 and 9, which have clain in item 5b above. <i>(If none</i>	ximately how many e (Month, Day, Year) _ hed recognition as re e, so state) 10c. Tel. No. 10e. Fax No. 11a. Election Typ	Contract, if a employees are p presentatives a e:	ny (Month, Day, Year) Participating? Ind other organizations and individuals 10d. Cell No. 10f. E-Mail Address		
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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:

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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) (2-18)	-	ED STATES OF AMÉRIA L LABOR RELATIONS E		Case No.	Date Filed			
(2-10)		RC PETITION		25-RC-2	27520	9/18/18		
employer concerned is loca the employer and all other p	eted. The petition parties named in t	must be accompanied the petition of: (1) the p	thirtigour, submit an originu by both a showing of interest petition; (2) Statement of Posi id only be filed with the NLRB	al of this Petition to (see 6b below) and tion form (Form NL	an NLRB office in the Re d a certificate of service s RB-505); and (3) Descripti	gion in which the howing service on on of Representation		
batgaining by Petitioner an	d Petitioner desire:	s to be certified as repre	ENTATIVE - A substantial number esentative of the employees. The 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	me) :				
Ramesh .			Same					
3c. Tel. No. (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 of the employees in th			
Check One: 7a. Request	15n Ond	Bargaining Representat	GUARO SCISEN	29-18 **	represented by the Pe 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 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 ntract, if any (Month, Oay, Y			
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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. 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 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. 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 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	₩/₽ 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. N/A	8d Cell No. N/A		8e. Fax No. N/A		8f. E-Mail Add 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 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 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			
 Election Details: If the NLRB conducts any such election. 	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 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 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 /	γ	General Counsel		Date				
Dale D. Pierson 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)								
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(2-18) NATIONAL LABOR RELATIONS BOARD		Case	No		Date Filed			
	RC PETITION Coless e-Filed using the Agency's website, [wow.nictu.gov/], submit an o		25-RC-227858 9/24/18				}	
mployer concerned is loc. he employer and all other , lase Procedures (Form NL	ated. The petition m parties named in the .RB 4812). The show	iust be accompanied b e petition of: (1) the pe sing of interest should	ry both a showing of inter ritition; (2) Statement of P I only be filed with the NL	rest (see 6b baltion form .RB and sho	below) and a (Form NLRB- uld not be ser	(ertificate of sec 505); and (3) De ved on the emp	rvice showing service iscription of Represen loyer or any other part	on lation ly:
PURPOSE OF THIS PETI bargarning by Petitioner an 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 Health Cal			40 Principal Productors Divect Ca		1 14	City and State	where while located	
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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	^{No.} 25-RC-2279.	30 Date	e Filed 9/24/18	
INSTRUCTIONS: Unless e-Filed us in which the employer concerned i of service showing service on the (Form NLRB-505); and (3) Descript with the NLRB and should not be s	s located. The petition must employer and all other partie ion of Representation Case	t be accompan is named in th Procedures (F	ied by both a showi e petition of: (1) the orm NLRB 4812). Th	ng of interest (s petition; (2) Sta	see 6b below) and a certificate tement of Position form	
1. PURPOSE OF THIS PETITION: RC-CE bargaining by Petitioner and Petitioner of 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 Avancez	1280	8 Stonebridg	blishment(s) involved (Str je Rd. Roanoke In	46783	ty, State, ZIP code)	
3a. Employer Representative – Name and Chad Pieper	I Title	3b. Address (f	f same as 2b – state sam	B)	5	
3c. Tel. No.	3d. Cell No. 260-446-2172	3e. Fax No. 260-960-30	90		android-ind.com	
4a. Type of Establishment (Factory, mine, v Factory		duct or service leadliners, Fro	ont end Sheet Metal		y and State where unit is located: oke, IN	
5b. Description of Unit Involved Included: All Production Em	nlovees				6a. No. of Employees in Unit: 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 7b. Petitioner is ci	urrently recognized as Bargaining R	d, so state). 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 any (Month, Day, Year)	
9. Is there now a strike or picketing at the E (Name of labor organization)	mployer's establishment(s) involved , 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	
 Election Details: If the NLRB conducts any such election. 	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): 10-19-2018 0r 10-26-2018	11c. Election Time(s): 6:00 a.m. to 12:00pm and 2:00	p.m. to 5:00p.m. (3	11d. Election Location(s): Avancez-Roanoke In.			
12a. Full Name of Petitioner (including lo United Automobile, Aerospace and		rkers of Ameri	12b. Address (street and number, city, state, and ZIP code) 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. 313-926-5000	12e. Cell No.	12f. Fax No. 313-926-5240		12g. E-Mail A	Address	
13. Representative of the Petitioner who 13a. Name and Title Dan Huddleston	UAW International Rep	13b. Address (ne representation process street and number, city, s w Suite G Indianapolis In 462	tate, and ZIP code) 41		
13c. Tel No. 317-247-5515	13d. Cell No. 317-4502-1950	13e. Fax No. 317-247-8218		13f. E-Mail A dhuddleston		
I declare that I have read the above petiti			my knowledge and belie			
DAN HUDDLESTEN 1	an fundaleston	Title 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 RC PETITION			DARD	RD Case No. 25-RC-228			8267	ed 0/10			
	RCFEIMON				25-RC-228267 9/28/18						
INSTRUCTIONS: Unless e-Filed u. employer concerned is located. T the employer and all other parties Case Procedures (Form NLRB 48	he petition must be a named in the petitio	ccompanied b n of: (1) the pe	y both a sh tition; (2) S	nowing of interest (s Statement of Position	iee 6b be n form (l	elow) and Form NLI	l a certificat RB-505); an	e of service s d (3) Descript	howing se tion of Rep	ervice on presentation	
1. PURPOSE OF THIS PETITION: F bargaining by Petitioner and Petit 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: see attatched							235				
Excluded:								ubstantial num employees in th			
all office clerical, guards,							represe	ented by the P	etitioner?		
Check One: 7a. Request for rec		Representative (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 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 individuals known to have a repre	r than Petitioner and the esentative interest in an	iose named in i ny employees i	tems 8 and n the unit de	9, which have claime escribed in item 5b ab	ed recogn pove. (If r	nition as re none, so s	epresentative 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): 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 13a. Name and Title:	er who will accept ser	vice of all pap		poses of the represe 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 RD PETITION			25-RD-227840				9/24/18			
INSTRUCTIONS: Unless e-File employer concerned is located the employer and all other part	d using the Agency's webs I. The petition must be acc	ite, [www.nirb.gov/] , s	wing of interes	al of this at (see 7 b	Petition to an NLRB 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 recognized bargaining represen 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 ist and requests	certilied of that the	or currently National			
2a. Name of Employer		2b. Address(es) of 1010 Americol			(Street and number,	city, state, ZIP co	de)				
Américold Lógistics 3a. Employer Representative - Na	ame and Title	3b. Address (If sam			51008						
Becka Fritz	-	915 S Caron R									
3c. Tel No. 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 Included:	· · · · · · · · · · · · · · · · · · ·					5b. City an 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 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 1212 Northfield Ct			8d. Tel. No. 815-762-83	A A	8e. Cell No.	OR	24	nn ≥	E E E		
Rochelle, IL 61068			81. Fax No.		8g. E-Mail Address			0.84	<u>~ .</u>		
					- • • • • • •	=	AM		1		
9. Date of Recognition or Certificat 2012	100.	10. Expiration Date 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 matter, state your position with	respect to any such election			13a, Election Type: 🛛 Manual 🔲 Mail 🔲 Mixed Manual/Mail					il		
13b. Election Date(s) October 10, 2018)	on Time(s) 0, 5:30-6:30, 9:30-1		13d. Election Location(s) Training Room							
(b) (6), (b) (7)(C)			(0.50) (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 14d. Cel 1		140 E.Mail Add	att.				
	<i>s</i> -			14d. Cell No. 14e. E-Mail Address (b) (6), (b) (7)(0							
1 41. Affiliation, if any			•								
15. Representative of the Petition 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, (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.			6 11 - 1			
Năme (Print) (b) (6), (b) (7)(C)) (7)(⊂) (7)(⊂)	3	Title : 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		