

DO NOT WRITE IN THIS SPACE	
Case No. 25-RC-251057	Date Filed 11/1/19

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer: The Kelly Group	2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 2454 N. 27th Street Decatur, IL 62526
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3a. Employer Representative - Name and Title: Brian Marshall, President of the Kelly Group Decatur	3b. Address (if same as 2b - state same): Same as 2b
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3c. Tel. No. 217-422-1800	3d. Cell No.	3e. Fax No. 217-422-9635	3f. E-Mail Address
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4a. Type of Establishment (Factory, mine, wholesaler, etc.) Contractor	4b. Principal Product or Service Construction	5a. City and State where unit is located: Decatur, IL
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5b. Description of Unit Involved: Included: See attached. Excluded: See attached.	6a. Number of Employees in Unit: 35	6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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Check One: 7a. Request for recognition as Bargaining Representative was made on (Date) 11/01/19 and Employer declined recognition on or about (Date) No Reply (If no reply received, so state).
 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (if none, so state) None	8b. Address:
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8c. Tel. No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
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8g. Affiliation, if any:	8h. Date of Recognition or Certification	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)
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9. Is there now a strike or picketing at the Employer's establishment(s) involved? No If so, approximately how many employees are participating? _____ (Name of Labor Organization) _____ has picketed the Employer since (Month, Day, Year) _____

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)
None

10a. Name	10b. Address	10c. Tel. No.	10d. Cell No.
		10e. Fax No.	10f. E-Mail Address

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election: Manual Mail Mixed Manual/Mail

11b. Election Date(s): 11/20/19	11c. Election Time(s): 3:45 to 6:45 p.m.	11d. Election Location(s): 130 N. Franklin St., Decatur, IL 62523
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12a. Full Name of Petitioner (including local name and number): Iron Workers St. Louis District Council	12b. Address (street and number, city, State and ZIP code): 212 North Kingshighway Blvd., Suite 1025 St. Louis, MO 63108
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12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state):
International Association of Bridge, Structural, Ornamental and Reinforcing Iron Workers

12d. Tel. No. 314-454-6872	12e. Cell No.	12f. Fax No.	12g. E-Mail Address
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13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding. 13a. Name and Title: Hank Hunsell, District Representative	13b. Address (street and number, city, State and ZIP code): 212 North Kingshighway Blvd., Suite 1025 St. Louis, MO 63108
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13c. Tel. No. 314-454-6872	13d. Cell No. 618-314-7251	13e. Fax No.	13f. E-Mail Address hhunsell@iwintl.org
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I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print) Hank Hunsell	Signature 	Title District Representative	Date 11/01/19
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WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

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.

RECEIVED
 NLRB
 SUBREGION 33
 PEORIA, ILL.
 2019 NOV - 1 AM 11:54
 RECEIVED
 NLRB
 SUBREGION 33
 PEORIA, ILL.
 2019 NOV - 2 AM 11:53

Attachment

Included: All full-time and regular part-time Iron Workers, Millwrights, Fitters, Laborers, Helpers, and Plant Maintenance employees employed at the Archer Daniels Midland and Tate & Lyle facilities in Decatur, Illinois.

Excluded: All other employees, crane operators, road crew employees, concrete crew employees, professional employees, office clerical employees, guards, and supervisors as defined in the Act.

RECEIVED
MLRB
SUBREGION 33
2019 OCT 32 AM 11:53
PEORIA, IL

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 25-RC-252013	Date Filed 11/18/19

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. **The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.**

2a. Name of Employer Full-Fill Industries, LLC	2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 400 N. Main St., Henning, IL, 61848
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3a. Employer Representative – Name and Title Lynn Mollica - HR Manager	3b. Address (If same as 2b – state same) Same
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3c. Tel. No. 217-286-3532	3d. Cell No.	3e. Fax No. 217-286-3682	3f. E-Mail Address lmollica@full-fill.com
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4a. Type of Establishment (Factory, mine, wholesaler, etc.) Factory	4b. Principal product or service Non-Stick Aerosol Pan Spray	5a. City and State where unit is located: Henning / Rossville IL.
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5b. Description of Unit Involved Included: All full-time and Part-time employees working in the plant and warehouse to include all production and leads, all compounding and leads, all forklift operators and leads, all maintenance and leads, all lab techs and leads, all gas house operators and leads, all QA and leads, all sanitation / janitorial and leads, all warehouse and leads with this group. Excluded: Supervisory, managerial, and confidential employees and guards as defined by the Act and all other employees	6a. No. of Employees in Unit: 120
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6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes No

Check One: **7a. Request for recognition as Bargaining Representative was made on (Date) 11/18/2019 and Employer declined recognition on or about _____ (Date) (If no reply received, so state).**
 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (If none, so state).	8b. Address
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8c. Tel No.	8d Cell No.	8e. Fax No.	8f. E-Mail Address
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8g. Affiliation, if any	8h. Date of Recognition or Certification	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)
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9. Is there now a strike or picketing at the Employer's establishment(s) involved? NO If so, approximately how many employees are participating? _____ (Name of labor organization) _____, has picketed the Employer since (Month, Day, Year) _____.

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)

10a. Name	10b. Address	10c. Tel. No.	10d. Cell No.
		10e. Fax No.	10f. E-Mail Address

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.

11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail
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11b. Election Date(s): ASAP	11c. Election Time(s): TBD	11d. Election Location(s): 400 N. Main St., Henning, IL, 61848
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12a. Full Name of Petitioner (including local name and number) International Brotherhood of Electrical Workers, Local Union #538	12b. Address (street and number, city, state, and ZIP code) 1290 N Michigan Ave, Danville, IL, 61834
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12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
International Brotherhood of Electrical Workers


12d. Tel No. 217-442-0996	12e. Cell No. 217-304-4021	12f. Fax No. 217-442-8048	12g. E-Mail Address john@ibew538.com
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13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title John Gallez - Assistant Business Manager	13b. Address (street and number, city, state, and ZIP code) 1290 N Michigan Ave, Danville, IL, 61834
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13c. Tel No. 217-442-0996	13d. Cell No. 217-304-4021	13e. Fax No. 217-442-8048	13f. E-Mail Address john@ibew538.com
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I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print) John Gallez	Signature 	Title Assistant Business Manager	Date 11/18/2019
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WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

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.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD

RC PETITION

DO NOT WRITE IN THIS SPACE

Case No. 25-RC-252316	Date Filed 11/22/19
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INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. **The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.**

2a. Name of Employer Green Thumb Industries	2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 8221 51st St W. IL Rock Island 61201-
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3a. Employer Representative - Name and Title Joel Smyers	3b. Address (If same as 2b - state same) 8221 51st St W. IL Rock Island 61201-
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3c. Tel. No. (309) 787-4456	3d. Cell No.	3e. Fax No.	3f. E-Mail Address jsmyers@gtigrows.com
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4a. Type of Establishment (Factory, mine, wholesaler, etc.) Others	4b. Principal product or service Cannabis	5a. City and State where unit is located: Rock Island, IL
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5b. Description of Unit Involved Included: See Attached Page 2 for additional details	6a. No. of Employees in Unit: 55
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Excluded: See Attached Page 2 for additional details	6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
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Check One: **7a.** Request for recognition as Bargaining Representative was made on (Date) 10/10/2019 and Employer declined recognition on or about _____ (Date) (If no reply received, so state). No reply received

7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (If none, so state).	8b. Address
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8c. Tel No.	8d Cell No.	8e. Fax No.	8f. E-Mail Address
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8g. Affiliation, if any	8h. Date of Recognition or Certification	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)
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9. Is there now a strike or picketing at the Employer's establishment(s) involved? No If so, approximately how many employees are participating? _____
(Name of labor organization) _____ has picketed the Employer since (Month, Day, Year) _____

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)

10a. Name	10b. Address	10c. Tel. No.	10d. Cell No.
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		10e. Fax No.	10f. E-Mail Address
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11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.	11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail
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11b. Election Date(s): 12-6-19	11c. Election Time(s): 6:00 am - 9:00 am and 3:00 pm - 4:00 pm	11d. Election Location(s): Conference room left of the main entrance
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12a. Full Name of Petitioner (including local name and number) Scott James Beard Scott Beard Teamsters Local 371	12b. Address (street and number, city, state, and ZIP code) 101 31st Avenue IL Rock Island 61201-
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12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) Illinois
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12d. Tel No. (309) 787-4456	12e. Cell No. (309) 737-9776	12f. Fax No. (309) 787-4888	12g. E-Mail Address scottbeard@teamsterslocal371.com
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13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
13a. Name and Title		13b. Address (street and number, city, state, and ZIP code)	

13c. Tel No.	13d. Cell No.	13e. Fax No.	13f. E-Mail Address
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I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print) Scott James Beard	Signature Scott Beard	Title Vice President	Date 11/22/2019 12:22:33
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WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)
PRIVACY ACT STATEMENT

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Attachment

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
25-RC-252316	11/22/19

Employees Included

Delivery drivers, MIP, Warehouse, Order fulfillment, Processing and Packaging, Quality, Extraction, DTCP,

Employees Excluded

Grow, Maintenance, Office and Clerical, Supervisors, Managers, Security, Temps

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD

RC PETITION

DO NOT WRITE IN THIS SPACE

Case No. 25-RC-252426	Date Filed 11/25/19
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INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. **The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.**

2a. Name of Employer Lawrence Transportation Company	2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 1040 11th St. W IL Milan 61264-
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3a. Employer Representative - Name and Title Brian Burke	3b. Address (If same as 2b - state same) 1515 Industrial Drive NW MN Rochester 55901-
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3c. Tel. No. (800) 328-7224	3d. Cell No. (507) 450-0007	3e. Fax No.	3f. E-Mail Address bburke@lawrencetrans.com
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4a. Type of Establishment (Factory, mine, wholesaler, etc.) Trucking	4b. Principal product or service Transportation	5a. City and State where unit is located: Milan, IL
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5b. Description of Unit Involved Included: See Attached Page 2 for additional details Excluded: See Attached Page 2 for additional details	6a. No. of Employees in Unit: 5	6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
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Check One: **7a.** Request for recognition as Bargaining Representative was made on (Date) _____ and Employer declined recognition on or about _____ (Date) (If no reply received, so state).
 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (If none, so state).	8b. Address
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8c. Tel No.	8d Cell No.	8e. Fax No.	8f. E-Mail Address
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8g. Affiliation, if any	8h. Date of Recognition or Certification	8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)
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9. Is there now a strike or picketing at the Employer's establishment(s) involved? _____ If so, approximately how many employees are participating? _____
(Name of labor organization) _____ has picketed the Employer since (Month, Day, Year) _____.

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state)

10a. Name	10b. Address	10c. Tel. No.	10d. Cell No.
		10e. Fax No.	10f. E-Mail Address

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.

11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail
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11b. Election Date(s): 12-9-19	11c. Election Time(s): 6 am	11d. Election Location(s): Chicago Tube and Iron, Milan, Illinois, break room off of the East side en
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12a. Full Name of Petitioner (including local name and number) Scott J Beaird Scott James Beaird Teamsters Local 371	12b. Address (street and number, city, state, and ZIP code) 101 31st Avenue IL Rock Island 61201-
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12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
International Brotherhood of Teamsters

12d. Tel No. (309) 787-4456	12e. Cell No. (309) 737-9776	12f. Fax No. (309) 787-4888	12g. E-Mail Address scottbeaird@teamsterslocal371.com
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13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.

13a. Name and Title	13b. Address (street and number, city, state, and ZIP code)
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13c. Tel No.	13d. Cell No.	13e. Fax No.	13f. E-Mail Address
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I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print) Scott J Beaird	Signature Scott Beaird	Title Vice President	Date 11/25/2019 15:23:53
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WILLFUL FALSE STATEMENTS ON THIS PETITION CAN BE PUNISHED BY FINE AND IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001)

PRIVACY ACT STATEMENT

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Attachment

DO NOT WRITE IN THIS SPACE	
Case	Date Filed
25-RC-252426	11/25/19

Employees Included

Truck drivers at the Chicago Tube and Iron location in Milan, Illinois

Employees Excluded

Part time and temporary employees, Non CDL Drivers

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 25-RC-252471	Date Filed 11/26/19

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer
Al Allsop Construction, Inc., d/b/a Allsop Excavating

2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)
29577 State Road 4, North Liberty, IN 46554

3a. Employer Representative - Name and Title
Alan Allsop

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

3c. Tel. No.
574/656-8747

3d. Cell No.
574/904-3955

3e. Fax No.
N/A

3f. E-Mail Address
alallsopinc@gmail.com

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

4b. Principal product or service
Excavation

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

5b. Description of Unit Involved

Included: All regular full- and part-time heavy equipment operators.

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

6a. No. of Employees in Unit:
5

6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes No

Check One: 7a. Request for recognition as Bargaining Representative was made on (Date) N/A and Employer declined recognition on or about N/A (Date) (If no reply received, so state). N/A

7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (if none, so state).
N/A

8b. Address
N/A

8c. Tel No.
N/A

8d. Cell No.
N/A

8e. Fax No.
N/A

8f. E-Mail Address
N/A

8g. Affiliation, if any
N/A

8h. Date of Recognition or Certification
N/A

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

9. Is there now a strike or picketing at the Employer's establishment(s) involved? No. If so, approximately how many employees are participating? N/A
(Name of labor organization) N/A, has picketed the Employer since (Month, Day, Year) N/A

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (if none, so state)
None.

10a. Name
N/A

10b. Address
N/A

10c. Tel. No.
N/A

10d. Cell No.
N/A

10e. Fax No.
N/A

10f. E-Mail Address
N/A

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election.

11a. Election Type: Manual Mail Mixed Manual/Mail

11b. Election Date(s):
December 10, 2019

11c. Election Time(s):
7:00 a.m. - 8:00 a.m.

11d. Election Location(s):
Break room in the shop.

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

12b. Address (street and number, city, state, and ZIP code)
6200 Joliet Road, Countryside, IL 60525

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
International Union of Operating Engineers, AFL-CIO

12d. Tel No.
708/482-8800

12e. Cell No.
N/A

12f. Fax No.
708/588-1629

12g. E-Mail Address
N/A

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

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

13b. Address (street and number, city, state, and ZIP code)
6140 Joliet Road, Countryside, IL 60525

13c. Tel No.
708/579-6663

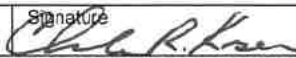
13d. Cell No.
N/A

13e. Fax No.
708/588-1647

13f. E-Mail Address
ckiser@local150.org

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print)
Charles R. Kiser

Signature


Title
Attorney

Date
11/26/2019

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 will cause the NLRB to decline to invoke its processes.

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

UNITED STATES GOVERNMENT NATIONAL LABOR RELATIONS BOARD RC PETITION

DO NOT WRITE IN THIS SPACE Case No. 25-RC-252518 Date Filed 11/26/2019

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlr.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1 PURPOSE OF THIS PETITION: RC-CERTIFICATION OF REPRESENTATIVE - A substantial number of employees wish to be represented for purposes of collective bargaining by Petitioner and Petitioner desires to be certified as representative of the employees. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer The GEO Group, Inc. 2b. Address(es) of Establishment(s) involved (Street and number, city, state, ZIP code) 100 Van Nuys Rd. New Castle, IN 47362

3a. Employer Representative - Name and Title Timothy Sheridan DIRECTOR LABOR AND EMPLOYMENT 3b. Address (if same as 2b - state same) 4955 Technology Way Boca Raton, Florida 33431

3c. Tel. No. 561 999-7549 3d. Cell No. NA 3e. Fax No. NA 3f. E-Mail Address tsheridan@geogroup.com

4a. Type of Establishment (Factory, mine, wholesaler, etc.) Correctional Facility 4b. Principal product or service Correctional facilities 5a. City and State where unit is located: New Castle IN

5b. Description of Unit Involved Included: all fulltime and part time armed and unarmed security officers employed by the employer Excluded: clerical, managerial, salaried, and supervisory personnel as defined by the act 5c. No. of Employees in Unit 250 5d. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes [X] No []

Check One: [] 7a. Request for recognition as Bargaining Representative was made on (Date) NA and Employer declined recognition on or about (Date) (If no reply received, so state) NA [X] 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.

8a. Name of Recognized or Certified Bargaining Agent (if none, so state) SPFPA 8b. Address 25510 KELLY RD ROSEVILLE MI 48066

8c. Tel. No. 586-772-7250 8d. Cell No. NA 8e. Fax No. 586-772-9844 8f. E-Mail Address spfpapres@spfpa.org

8g. Affiliation, if any SPFPA 8h. Date of Recognition or Certification NA 8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) 01/01/2020

9. Is there now a strike or picketing at the Employer's establishment(s) involved? NA if so, approximately how many employees are participating? NA (Name of labor organization) NA has picketed the Employer since (Month, Day, Year) NA

10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (If none, so state) NA

10a. Name NA 10b. Address NA 10c. Tel. No. NA 10d. Cell No. NA 10e. Fax No. NA 10f. E-Mail Address NA

11. Election Details: If the NLRB conducts an election in this matter, state your position with respect to any such election. 11a. Election Type: [X] Manual [] Mail [] Mixed Manual/Mail

11b. Election Date(s): first available 11c. Election Time(s): Times to cover all shifts 11d. Election Location(s): 100 Van Nuys Rd. New Castle, IN 47362

12a. Full Name of Petitioner (including local name and number) United Government Security Officers of America and its Local 884 12b. Address (street and number, city, state, and ZIP code) 2879 Cranberry Highway East Wareham, MA 02538

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) International Union

12d. Tel. No. 617-620-7225 12e. Cell No. 617-620-7225 12f. Fax No. NA 12g. E-Mail Address Mleblanc@ugsoa.com

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

13a. Name and Title Mike LeBlanc DHS Vice President UGSOA International Union 13b. Address (street and number, city, state, and ZIP code) 2879 Cranberry Highway East Wareham, MA 02538

13c. Tel. No. 617-620-7225 13d. Cell No. 617-620-7225 13e. Fax No. 774-678-4658 13f. E-Mail Address Mleblanc@ugsoa.com

I declare that I have read the above petition and that the statements are true to the best of my knowledge and belief.

Name (Print) Mike LeBlanc Signature Title DHS Vice President UGSOA International Union Date 11/26/2019

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