

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No 15-RC-257449	Date Filed March 4, 2020

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 POTLATCH/DELTIC		2b. Address(es) of Establishment(s) involved (street and number, city, state, zip code) 1720 US-82 WALDO, AR 71770	
3a. Employer Representative - Name and Title TOMMY DOWNS - MILL MANAGER		3b. Parent Company Address (if same as 2b - state same) 601 W. 1ST AVE., SUITE 1600 SPOKANE, WA 99201	
3c. Tel. No. 870-693-5555	3d. Cell No.	3e. Fax No.	3d. E-Mail Address TOMMY.DOWNS@POTLATCHDELTIC.COM
4a. Type of Establishment (Factory, mine, wholesaler, etc.) SAWMILL WAREHOUSE		4b. Principal product or service LUMBER PRODUCTION	
		5a. City and State where unit is located: WALDO, AR	
5b. Description of Unit Involved Included: ALL FULL AND REGULAR PART TIME PRODUCTION AND MAINTENANCE EMPLOYEES WORKING TAT THE COMPANY'S WALDO, AR LOCATION. Excluded: OFFICE CLERICAL EMPLOYEES, PROFESSIONAL EMPLOYEES, MANAGERIAL EMPLOYEES, GUARDS, AND SUPERVISORS, AS DEFINED IN THE ACT.			6a. No. of Employees in Unit: 154 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"/>
Check One: <input type="checkbox"/> 7a. Request for recognition as Bargaining Representative was made on <u>Petition will serve as request for recognition</u> and Employer declined recognition on or about _____ (date) (if no reply received, so state). <input type="checkbox"/> 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.			
8a. Name of Recognized or Certified Bargaining Agent (if none, so state). NONE		8b. Address 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? <u>N/A</u> If so, approximately how many employees are participating? _____ (Name of labor organization) _____, has picketed the Employer since (Month, Day, Year) _____.			
10. Organizations or individuals other than Petitioner and those named in items 8 and 9, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5b above. (if none, so state) 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: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail	
11b. Election Date(s): MARCH 19, 2020	11c. Election Time(s): 3:00 PM - 6:00 PM		11d. Election Location(s): SAWMILL SHIPPING SHED
12a. Full Name of Petitioner (including local name and number) IAMAW, AFL-CIO		12b. Address (street and number, city, state, and ZIP code) 690 E. LAMAR BLVD., SUITE 580, ARLINGTON, TX 76011	
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state) INTERNATIONAL ASSOCIATION OF MACHINISTS AND AEROSPACE WORKERS, AFL-CIO			
12d. Tel. No. 817-505-0100	12e. Cell No.	12f. Fax No. 817-459-0107	12g. E-Mail Address
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
13a. Name and Title JAMES R. LITTLE - GRAND LODGE SPECIAL REPRESENTATIVE		13b. Address (street and number, city, state, and ZIP code) 690 E. LAMAR BLVD, SUITE 580, ARLINGTON, TX 76011	
13c. Tel. No. 817-505-0100	13d. Cell No. 682-401-7835	13e. Fax No. 817-459-0107	13d. E-Mail Address JLITTLE@IAMAW.ORG
I declare that I have read the above Petition and that the statements are true to the best of my knowledge and belief.			
Name (Print) JAMES R. LITTLE	Signature 	Title GRAND LODGE REPRESENTATIVE	DATE 03/04/2020

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.
15-RC-258002

Date Filed
March 16, 2020

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
Securitas Security Services U.S.A., Inc

2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)
8400 Wynlakes Blvd, Montgomery, AL 36117

3a. Employer Representative - Name and Title
John Henert, VP LR

3b. Address (If same as 2b - state same)
One South Wacker Dr #2150, Chicago, IL 60606

3c. Tel. No.
312-521-6605

3d. Cell No.

3e. Fax No.
312-521-6606

3f. E-Mail Address
john.henert@securitasinc.com

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

4b. Principal product or service
SECURITY

5a. City and State where unit is located:
Montgomery, AL

5b. Description of Unit Involved

Included: ALL FULL-TIME AND PART-TIME ARMED AND UNARMED SECURITY OFFICERS PERFORMING GUARD DUTIES AS DEFINED IN SECTION 9(b)(3) OF THE NATIONAL LABOR RELATIONS ACT, EMPLOYED BY SECURITAS SECURITY SERVICES, INC. @ 8400 WYNLAKES BLVD., MONTGOMERY, AL 36117

Excluded: ALL OFFICE CLERICAL EMPLOYEES, PROFESSIONAL EMPLOYEES AND SUPERVISORS AS DEFINED BY THE ACT.

6a. No. of Employees in Unit:

10
6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? Yes ☒ No ☐

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

8a. Name of Recognized or Certified Bargaining Agent (If none, so state).
NONE

8b. Address

8c. Tel No.

8d. Cell No.

8e. Fax No.

8f. E-Mail Address

8g. Affiliation, if any

8h. Date of Recognition or Certification

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

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

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

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

11b. Election Date(s):
4/6/2020

11c. Election Time(s):
5:00 - 7:00 AM & 1:00 - 3:00 PM

11d. Election Location(s):
TBD

12a. Full Name of Petitioner (including local name and number)

International Union, Security, Police and Fire Professionals of America (SPFPA)

12b. Address (street and number, city, state, and ZIP code)
25510 Kelly Road, Roseville, MI 48066

12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state)
International Union, Security, Police and Fire Professionals of America (SPFPA)

12d. Tel No.

586-772-7250 X111

12e. Cell No.

586-872-5634

12f. Fax No.

586-772-9644

12g. E-Mail Address

organize@spfpa.org

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

13a. Name and Title
Gordon Gregory, General Counsel

13b. Address (street and number, city, state, and ZIP code)
65 Cadillac Square, Suite 3727, Detroit, MI 48226

13c. Tel No.

313-964-5600

13d. Cell No.

13e. Fax No.

313-964-2125

13f. E-Mail Address

Gordon@UnionLaw.net

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)

Dwayne Phillips

Signature

Dwayne Phillips

Title

Organizing Director

Date

3/12/2020

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 OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE

Case No. 15-RC-258014 Date Filed March 16, 2020

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: MV Transportation, Inc		2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 600 Transit Way Fort Walton Beach, FL 32547	
3a. Employer Representative - Name and Title: Dennis Franklin		3b. Address (if same as 2b - state same): same	
3c. Tel. No. 850-609-7001	3d. Cell No.	3e. Fax No.	3f. E-Mail Address dennis.franklin@mvtransit.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Transportation		4b. Principal Product or Service Transit Services	
5b. Description of Unit Involved: Included: All Full-time and Regular Part-Time Drivers, Dispatchers, Utility and Route Lead-Persons Excluded: All Managers, Supervisors, Clerical Workers, Mechanics and Guards as defined by the Act		5a. City and State where unit is located: Fort Walton Beach, FL 32547	
6a. Number of Employees in Unit: 48		6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Check One: <input checked="" type="checkbox"/> 7a. Request for recognition as Bargaining Representative was made on (Date) 03/13/2020 and Employer declined recognition on or about (Date) 03/13/2020 (If no reply received, so state). <input type="checkbox"/> 7b. Petitioner is currently recognized as Bargaining Representative and desires certification under the Act.			
8a. Name of Recognized or Certified Bargaining Agent (If none, so state)		8b. Address:	
8c. Tel. No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
8g. Affiliation, if any:		8h. Date of Recognition or Certification	
8i. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)			
9. Is there now a strike or picketing at the Employer's establishment(s) involved? _____ 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 Lavon Lindsey	10b. Address 112 S. Broad St. Mobile, AL, 36602	10c. Tel. No. 251-433-1521	10d. Cell No. 251-583-8359
		10e. Fax No. 251-433-1524	10f. E-Mail Address hdrooster@yahoo.com
11. Election Details: If the NLRB conducts and election in this matter, state your position with respect to any such election: The election to be held on site and preferably on a Thursday.		11a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail	
11b. Election Date(s): 03/19/2020 or 03/26/2020	11c. Election Time(s): 11:am - 5:00pm or 11:00am-1:00pm & 2:pm - 5:00p	11d. Election Location(s): 600 Transit Way Fort Walton Beach, FL 32547	
12a. Full Name of Petitioner (including local name and number): Teamsters Local Union No. 991		12b. Address (street and number, city, State and ZIP code): 112 S Broad Street Mobile, AL 36602	
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. 202-624-6800	12e. Cell No.	12f. Fax No.	12g. E-Mail Address www.teamster.org
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
13a. Name and Title: Lavon Lindsey		13b. Address (street and number, city, State and ZIP code): 112 S. Broad Street Mobile, AL 36602	
13c. Tel. No. 251-433-1521	13d. Cell No. 251-583-8359	13e. Fax No. 251-433-1524	13f. E-Mail Address hdrooster@yahoo.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) Lavon Lindsey	Signature Lavon Lindsey	Title President/Business Agent	Date 03/13/2020

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

Solicitation of the information on this form is authorized by the National Labor Relations Act (NLRA), 29 U.S.C. § 151 et seq. The principal use of the information is to assist the National Labor Relations Board (NLRB) in processing representation and related proceedings or litigation. The routine uses for the information are fully set forth in the Federal Register, 71 Fed. Reg. 74942-43 (Dec. 13, 2006). The NLRB will further explain these uses upon request. Disclosure of this information to the NLRB is voluntary; however, failure to supply the information may cause the NLRB to decline to invoke its processes.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD

FIRST AMENDED RC PETITION

DO NOT WRITE IN THIS SPACE

Case No.
15-RC-258014

Date Filed
April 21, 2020

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 6b below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form 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 MV Transportation, Inc.		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 600 Transit Way, Fort Walton Beach, FL 32547	
3a. Employer Representative - Name and Title Dennis Franklin		3b. Address (if same as 2b - state same) SAME AS ABOVE	
3c. Tel. No. (850)609-7001	3d. Cell No.	3e. Fax No.	3f. E-Mail Address dennis.franklin@mvtransit.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Transportation		4b. Principal product or service Transit Services	
5a. City and State where unit is located: Fort Walton Beach, FL		5b. No. of Employees in Unit: 48	
5c. Description of Unit Involved Included: Included: All full-time and regular part-time Drivers, Road Supervisors, Dispatchers, Utility, Schedulers, and Reservationists. Excluded: All Managers, Supervisors, Clerical Workers, Mechanics and Guards as defined by the Act.		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: X 7a. Request for recognition as Bargaining Representative was made on (Date) 3/13/2020 and Employer declined recognition on or about 3/13/2020 (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 name, so state). None		8b. Address	
8c. Tel. No.	8d. Cell No.	8e. Fax No.	8f. E-Mail Address
8g. Affiliation, if any		8h. Date of Recognition or Certification	
9. Is there now a strike or picketing at the Employer's establishment(s) involved? <u>No</u> If so, approximately how many employees are participating? _____ (Name of labor organization) _____ has picketed the Employer since (Month, Day, Year) _____		8i. Expiration Date of Current or Most Recent Contract, if any (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.		11a. Election Type: <u>Manual</u> <u>X</u> <u>Mail</u> <u>Mixed Manual/Mail</u>	
11b. Election Date(s)	11c. Election Time(s): Mail	11d. Election Location(s): Mail	
12a. Full Name of Petitioner (including local name and number) International Brotherhood of Teamsters, Local Union No. 991		12b. Address (street and number, city, state, and ZIP code) 112 S Broad St, Mobile, AL 36602-1109	
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. (251)433-1521	12e. Cell No. (251)583-8359	12f. Fax No. (225)433-1524	12g. E-Mail Address hdrooster@yahoo.com

13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
13a. Name and Title Lavon Lindsey Business Agent		13b. Address (street and number, city, state, and ZIP code) SAME AS ABOVE	
13c. Tel. No. SAME AS ABOVE	13d. Cell No. SAME AS ABOVE	13e. Fax No. SAME AS ABOVE	13f. E-Mail Address SAME AS ABOVE

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) Lavon Lindsey	Signature <i>Lavon Lindsey</i>	Title Business Agent	Date 4/20/2020
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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 OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RD PETITION

DO NOT WRITE IN THIS SPACE

Case No.
15-RD-257239Date Filed
3/2/2020

INSTRUCTIONS: Unless e-Filed using the Agency's website, www.nlrb.gov/, submit an original of this Petition to an NLRB office in the Region in which the employer concerned is located. The petition must be accompanied by both a showing of interest (see 7 below) and a certificate of service showing service on the employer and all other parties named in the petition of: (1) the petition; (2) Statement of Position form (Form NLRB-505); and (3) Description of Representation Case Procedures (Form NLRB 4812). The showing of interest should only be filed with the NLRB and should not be served on the employer or any other party.

1. PURPOSE OF THIS PETITION: RD- DECERTIFICATION (REMOVAL OF REPRESENTATIVE) - A substantial number of employees assert that the certified or currently recognized bargaining representative is no longer their representative. The Petitioner alleges that the following circumstances exist and requests that the National Labor Relations Board proceed under its proper authority pursuant to Section 9 of the National Labor Relations Act.

2a. Name of Employer Amfuel	2b. Address(es) of Establishment(s) involved (Street and number, city, state, ZIP code) 601 Firestone Dr., Magnolia, Arkansas 71753
3a. Representative - Name and Title Michael Accordini, President	3b. Address (If same as 2b - state same) Same
3c. Tel. No.	3d. Fax No.
3e. Cell No.	3f. E-Mail Address michael.accordini@amfuel.com

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

4b. Principal product or service
Rubber fuel bladders

5a. Description of Unit Involved

Included:

All production, maintenance and truck driver employees at the Company in Magnolia, Arkansas

5b. City and State where unit

is located:
Magnolia, Arkansas

Excluded:

Office, clerical employees, professional and technical employees, watchmen guards, and supervisory

6. No. of Employees in Unit 273

7. Do a substantial number (30% or more) of the employees in the unit no longer wish to be represented by the certified or currently recognized bargaining representative? ☒ Yes ☐ No

8a. Name of Recognized or Certified Bargaining Agent
United Steelworkers Local 607L AFL-CIO-CLC

8b. Affiliation, if any
The United Steelworkers

8c. Address
Attention: Michael Martin
1300 Rollingbrook Drive, Suite 504
Baytown, TX 77521

8d. Tel. No.
(501) 467-5226

8e. Cell No.
(501) 467-5226

8f. Fax No.
(501) 778-3256

8g. E-Mail Address
(b) (6), (b) (7)(C) @usw.org

9. Date of Recognition or Certification
May 1, 2017

10. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year)
April 30, 2020

11a. Is there now a strike or picketing at the Employer's establishment(s) involved? ☐ Yes ☒ No

11b. If so, approximately how many employees are participating?

11c. The Employer has been picketed by or on behalf of (Insert Name) NA

a labor organization, or

(Insert Address)

since (Month, Day, Year)

12. Organizations or individuals other than those named in items 8 and 11c, which have claimed recognition as representatives and other organizations and individuals known to have a representative interest in any employees in the unit described in item 5 above. (If none, so state) None

12a. Name

12b. Address

12c. Tel. No.

12d. Fax No.

12e. Cell No.

12f. E-Mail Address

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

13a. Election Type: ☐ Manual ☐ Mail ☒ Mixed Manual/Mail

13b. Election Date(s)
May 1, 2020

13c. Election Time(s)
10AM

13d. Election Location(s)
Magnolia, Arkansas

14. Full Name of Petitioner

(b) (6), (b) (7)(C)

14a. Address (Street and number, city, state, ZIP code)

(b) (6), (b) (7)(C)

14b. Tel. No.

14c. Fax No.

14d. Cell No.

14e. E-Mail Address

(b) (6), (b) (7)(C)

14f. Affiliation, if any Amfuel employee

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

15a. Name

(b) (6), (b) (7)(C)

15b. Title

(b) (6), (b) (7)(C)

15c. Address (Street and number, city, state, ZIP code)

(b) (6), (b) (7)(C)

15d. Tel. No.

15e. Fax No.

15f. Cell No.

(b) (6), (b) (7)(C)

15g. E-Mail Address

(b) (6), (b) (7)(C)

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)

(b) (6), (b) (7)(C)

Signature

(b) (6), (b) (7)(C)

Title

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Date Filed

02/28/20

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.