

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 04-RC-245838	Date Filed 8/01/19

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: Origlio Beverage - Reading
2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 1000 Patriot Parkway, Reading, PA 19605

3a. Employer Representative - Name and Title: Tom Yetman, Vice President, Dir. of Sales
3b. Address (if same as 2b - state same): same as 2b

3c. Tel. No. 610-670-2337
3d. Cell No.
3e. Fax No. 610-670-2992
3f. E-Mail Address tyetman@origlio.com

4a. Type of Establishment (Factory, mine, wholesaler, etc.) Distribution
4b. Principal Product or Service Alcohol
5a. City and State where unit is located: Reading, PA

5b. Description of Unit Involved:
Included: All full-time and regular part-time sales representatives and merchandisers
Excluded: All other employees, guards and supervisors as defined in the Act
6a. Number of Employees in Unit: approx. 24
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 (Date) N/A (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:

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? _____, 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): August 19, 2019
11c. Election Time(s): 8:30 am to 9:30 am
11d. Election Location(s): Conference Room at employer facility

12a. Full Name of Petitioner (including local name and number): Teamsters Local No. 429
12b. Address (street and number, city, State and ZIP code): 1055 Spring Street, Wyomissing, PA 19610

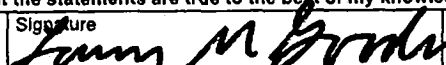
12c. Full name of national or international labor organization of which Petitioner is an affiliate or constituent (if none, so state): International Brotherhood of Teamsters

12d. Tel. No. 610-320-5521
12e. Cell No.
12f. Fax No. 610-320-9216
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: Laurence M. Goodman, Legal Counsel
13b. Address (street and number, city, State and ZIP code): Willig, Williams & Davidson, 1845 Walnut St., 24th Floor, Phil., PA 19103

13c. Tel. No. 215-656-3600
13d. Cell No.
13e. Fax No. 215-561-5135
13f. E-Mail Address lgoodman@wwdlaw.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) Laurence M. Goodman
Signature 
Title Legal Counsel
Date 8/1/19

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

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

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 04-RC-245889	Date Filed 8/01/19

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 National DCP, LLC		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 20 East Park Drive NJ Westampton 08060-	
3a. Employer Representative - Name and Title Tim Garcia		3b. Address (if same as 2b - state same)	
3c. Tel. No. (609) 845-2096	3d. Cell No.	3e. Fax No.	3f. E-Mail Address tim.garcia@natdcp.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Trucking		4b. Principal product or service Food delivery Dunkin' Donuts	
4a. Type of Establishment (Factory, mine, wholesaler, etc.)			5a. City and State where unit is located: Mount Holly, NJ
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: 350 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 (Date) _____ and Employer declined recognition on or about _____ (Date) (if no reply received, so state). <input checked="" 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		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	
11b. Election Date(s): August 21 and 22, 2019		11c. Election Time(s): Wed. 1 am-7am, 11 am-5 pm; Thurs. 1 am-6am	
		11d. Election Location(s): Front conference room at Employer's facility located at 20 East Park Drive	
12a. Full Name of Petitioner (including local name and number) John Dagle Teamsters Union Local No. 628		12b. Address (street and number, city, state, and ZIP code) 3460 Delaware Ave, Suite 104 PA Philadelphia 19134-	
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. (215) 923-9540	12e. Cell No.	12f. Fax No. (215) 923-6867	12g. E-Mail Address local628@verizon.net
13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.			
13a. Name and Title Claiborne S Newlin Attorney Markowitz and Richman		13b. Address (street and number, city, state, and ZIP code) 123 South Broad St. Suite 2020 PA Philadelphia 19109-	
13c. Tel No. (215) 875-3111	13d. Cell No.	13e. Fax No. (215) 790-0668	13f. E-Mail Address cnewlin@markowitzandrichman.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) Claiborne S Newlin	Signature Claiborne S. Newlin	Title Attorney	Date 08/1/2019 11:44:37

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.

DO NOT WRITE IN THIS SPACE

Attachment

Case	Date Filed
04-RC-245889	8/01/19

Employees Included

Full-time & regular part-time Class A Route Drivers, Class B Route Drivers, Class A Shuttle Drivers, Helpers, Yard Drivers, warehouse employees, including Selectors, Leaders, Utility, Receivers, Put-away, Backfillers, Maintenance Mechanics, and Janitors/Cleaner employed by the employer out of its Westampton, NJ facility and hub locations in Scranton, PA, Newburgh, NY, Hagerstown, MD and Kearney, NJ.>

Employees Excluded

Dispatchers, Transportation Supervisors, Clerical employees, Guards, and Supervisors as defined in the Act.

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 04-RC-246356	Date Filed 8/12/19

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:
Aleris Rolled Products, Inc.

2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code):
838 North Delsea Drive, Clayton, NJ 08312

3a. Employer Representative - Name and Title:
Bruce Schlichter, Plant Manager

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

3c. Tel. No.
856-881-3600

3d. Cell No.

3e. Fax No.

3f. E-Mail Address
bruce.schlichter@aleris.com

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

4b. Principal Product or Service
rolled metal

5a. City and State where unit is located:
Clayton, NJ

5b. Description of Unit Involved:
Included:
See Attachment
Excluded:

6a. Number of Employees in Unit:
40

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

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

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

8b. Address:

8c. Tel. No.

8d. Cell No.

8e. Fax No.

8f. E-Mail Address

8g. Affiliation, if any:

8h. Date of Recognition or Certification

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

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

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

10a. Name

10b. Address

10c. Tel. No.

10d. Cell No.

10e. Fax No.

10f. E-Mail Address

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

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

11b. Election Date(s):
August 29, 2019

11c. Election Time(s):
5:30 a.m. to 6:30 a.m.

11d. Election Location(s):
In the Breakroom at the Employer's facility

12a. Full Name of Petitioner (including local name and number):
International Association of Bridge, Structural, Ornamental and Reinforcing Iron Workers, Local 399S

12b. Address (street and number, city, State and ZIP code):
409 Crown Point Road
Westville, NJ 08093

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 and Ornamental Iron Workers

12d. Tel. No.
856-456-9323

12e. Cell No.
856-617-3165

12f. Fax No.
856-456-8702

12g. E-Mail Address
epenna@iwintl.org

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

13a. Name and Title:
Edward Penna

13b. Address (street and number, city, State and ZIP code):
409 Crown Point Road
Westville, NJ 08093

13c. Tel. No.
856-456-9323

13d. Cell No.
856-617-3165

13e. Fax No.
856-456-8702

13f. E-Mail Address
epenna@iwintl.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)
Edward Penna

Signature
Edward Penna

Title
District Council Organizer

Date
8/9/19

**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 A:

Included: All full-time and regular part-time production and maintenance employees, including break down mill employees, foil mill employees, crane operators, coders, splitters 1, 2 and 3, packing employees, compactors, lab employees, shipping and receiving employees, mechanics, electricians, and roll grinders employed by the Employer at its 838 North Delsea Drive, Clayton, NJ facility.

Excluded: All other employees, clerical employees, plant managers, engineers, guards, and supervisors as defined in the Act.

UNITED STATES OF AMERICA
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No: 04-RC-246600	Date Filed 8/15/19

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: PA Virtual Charter School		2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 630 Park Ave., King of Prussia, PA 19406	
3a. Employer Representative - Name and Title: John Chandler, CEO		3b. Address (if same as 2b - state same): same	

3c. Tel. No. 610-275-8500	3d. Cell No.	3e. Fax No.	3f. E-Mail Address jchandler@pavcs.us; ceo@pavcsk12.org
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Cyber Charter School		4b. Principal Product or Service Education	5a. City and State where unit is located: King of Prussia, PA
5b. Description of Unit Involved: Included: All full-time & regular part-time guidance counselors employed by the Employer Excluded:			6a. Number of Employees in Unit: 6
			6b. Do a substantial number (30% or more) of the employees in the unit wish to be represented by the Petitioner? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Check One: 7a. Request for recognition as Bargaining Representative was made on (Date) 05/13/19 and Employer declined recognition on or about (Date) 07/17/2019 (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
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: Requesting Armour-Globe election
 Manual Mail Mixed Manual/Mail

11b. Election Date(s): Aug. 22 - Sept. 12, 2019	11c. Election Time(s): Mail Ballot	11d. Election Location(s): mail
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12a. Full Name of Petitioner (including local name and number): PA Virtual Charter Education Association, PSEA/NEA	12b. Address (street and number, city, State and ZIP code): c/o PSEA, 1512 McDaniel Drive, West Chester, PA 19380
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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):
National Education Association

12d. Tel. No. 610-425-3125	12e. Cell No.	12f. Fax No. 610-430-0596	12g. E-Mail Address @psea.org
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13. Representative of the Petitioner who will accept service of all papers for purposes of the representation proceeding.
13a. Name and Title:
Robert P. Curley, Esq.
13b. Address (street and number, city, State and ZIP code):
325 Chestnut Street, Suite 600, Philadelphia, PA 19106

13c. Tel. No. 215-629-4970	13d. Cell No. 215-514-4597	13e. Fax No. 215-629-4996	13f. E-Mail Address rcurley@odonoghuelaw.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) Robert P. Curley	Signature 	Title Attorney	Date 8/14/2019
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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**

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UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD

RC PETITION

DO NOT WRITE IN THIS SPACE

Case No. 04-RC-247329	Date Filed 8/29/2019
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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 Anchor / Old Castle	2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 1214 Hayes Blvd PA Bristol 19007-
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3a. Employer Representative - Name and Title Dominic Covello	3b. Address (If same as 2b - state same) 331 Newman Springs Rd NJ Red Bank 07701-
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3c. Tel. No. (732) 292-2500	3d. Cell No.	3e. Fax No.	3f. E-Mail Address dominic.covello@oldcastle.com
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4a. Type of Establishment (Factory, mine, wholesaler, etc.) Constr. - Supplies & Fixtures	4b. Principal product or service Concrete Materials	5a. City and State where unit is located: Bristol, PA
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5b. Description of Unit Involved Included: See Attached Page 2 for additional details	6a. No. of Employees in Unit: 7
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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) _____ 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.
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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): September 19, 2019	11c. Election Time(s): 6:00pm - 7:00pm	11d. Election Location(s): Employee Cafeteria
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12a. Full Name of Petitioner (including local name and number) Chris Buschmeier Highway Truck Drivers & Helpers Local 107 a/w/ International Brotherhood of Teamsters	12b. Address (street and number, city, state, and ZIP code) 12275 Townsend Rd. PA Philadelphia 19154-
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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
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12d. Tel No. (215) 552-0070	12e. Cell No. (484) 620-9358	12f. Fax No. (215) 552-0071	12g. E-Mail Address cbuschmeier@teamsters107.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) Chris Buschmeier	Signature Chris Buschmeier	Title Trustee / Organizer / Business Agent	Date 08/29/2019 09:34:04
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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.

Attachment

DO NOT WRITE IN THIS SPACE	
Case	Date Filed

Employees Included

All full-time and regular part-time class A drivers employed by the Employer at its 1214 Hayes Blvd Location

Employees Excluded

All other employees, warehouse, jockey, mechanics, maintenance, timekeepers, shipping & receiving, production, office clerical, guards and supervisors within the meaning of the Act.

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RC PETITION

DO NOT WRITE IN THIS SPACE	
Case No.	04-RC-247331
Date Filed	8/29/19

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
Ta Chen International

2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code)
321 Dultys Lane
NJ Burlington 08016-

3a. Employer Representative - Name and Title
William Pines

3b. Address (if same as 2b - state same)
321 Dultys Lane
NJ Burlington 08016-

3c. Tel. No.
(609) 239-6000

3d. Cell No.

3e. Fax No.
(609) 239-5600

3f. E-Mail Address

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

4b. Principal product or service
Distribution

5a. City and State where unit is located:
Burlington, NJ

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:
19

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) 08/09/2019 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

8c. Tel No.

8d Cell No.

8e. Fax No.

8f. E-Mail Address

8g. Affiliation, if any

8h. Date of Recognition or Certification

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

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

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

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

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

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

11b. Election Date(s):
September 20, 2019

11c. Election Time(s):
6:30A-7:30A / 11:30A-12:30P

11d. Election Location(s):
Employee Breakroom

12a. Full Name of Petitioner (including local name and number)
Ron Ferguson
United Independent Union

12b. Address (street and number, city, state, and ZIP code)
4937 National Street
PA Philadelphia 19135-

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

12d. Tel No.
(215) 338-4150

12e. Cell No.

12f. Fax No.
(215) 338-4154

12g. E-Mail Address
Rferguson@uluphillly.com

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

13a. Name and Title
Matthew D. Areman Esq. Attorney
Markowitz & Richman

13b. Address (street and number, city, state, and ZIP code)
123 S. Broad Street Suite 2020
PA Philadelphia 19109-

13c. Tel No.
(215) 875-3100

13d. Cell No.

13e. Fax No.
(215) 790-0668

13f. E-Mail Address
mareman@markowitzandrichman.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) Matthew D. Areman Esq.	Signature MATTHEW D. AREMAN	Title Attorney	Date 08/28/2019 09:54:07
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DO NOT WRITE IN THIS SPACE

Case

04-RC-247331

Date Filed

8/29/19

Attachment

Employees Included

All full-time and regular part-time warehouse employees, including forklift drivers.

Employees Excluded

All other employees, clericals, guards and supervisors, as defined in the Act.