

UNITED STATES GOVERNMENT
NATIONAL LABOR RELATIONS BOARD
RM PETITION

DO NOT WRITE IN THIS SPACE	
Case No. 06-RM-258648	Date Filed 4-1-20

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 a certificate of service showing service on all parties named in the petition of the following: (1) the petition; (2) Statement of Position form; and (3) Description of Procedures in Certification and Decertification Cases (Form NLRB 4812). The petition must also be accompanied by evidence supporting the statement that a labor organization has made a demand for recognition on the employer or that the employer has good faith uncertainty about majority support for an existing representative. However, if the evidence reveals the names and/or number of employees who no longer wish to be represented, the evidence shall not be served on any party.

1. PURPOSE OF THIS PETITION: RM-CERTIFICATION OF REPRESENTATIVE – One or more individuals or labor organizations have presented a claim to the Employer/Petitioner to be recognized as the representative of employees of the Employer/Petitioner or the Employer/Petitioner has a good faith uncertainty about majority support for an existing representative. If a charge under Section 8(b)(7) of the Act has been filed involving the Employer/Petitioner named in this petition, this statement shall not be deemed made. 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/Petitioner Langeloth Metallurgical Company		2b. Address(es) of Establishment(s) involved (Street and number, city, State, ZIP code) 10 Langeloth Road, Langeloth, PA 15054	
3a. Employer/Petitioner Representative – Name and Title Stanley Ledzinski, Regional HR Manager		3b. Address (If same as 2b – state same) Same as Above.	
3c. Tel. No. 724-947-1248	3d. Cell No.	3e. Fax No. 724-947-2240	3f. E-Mail Address stanley.ledzinski@certerragold.com

4a. Type of Establishment (Factory, mine, wholesaler, etc.) Metal Processor		4b. Principal product or service Molybdenum	
5a. Description of Unit Involved Included: All regular full-time maintenance, lab and production permanent replacement employees at the Employer's Langeloth plant. Excluded: All maintenance, lab and production economic strikers, and all other employees, clerical, confidential, guards, professional employees, and supervisors as defined in the Act.			5b. City and State where unit is located: Langeloth, PA
			6. No. of Employees in Unit: 80

Unless a charge alleging a violation of Section 8(b)(7) is pending, check EITHER item 7a or 7b, whichever is applicable

7a. <input type="checkbox"/> A labor organization made a demand for recognition on the Employer/Petitioner on (Date) _____
7b. <input checked="" type="checkbox"/> The Employer/Petitioner has a good faith uncertainty about majority support for an existing representative.

8a. Recognized or Certified Bargaining Agent - Name United Auto Workers, Local 1311		8b. Affiliation, if any United Auto Workers	
8c. Address (b) (6), (b) (7)(C)		8d. Tel. No.	8e. Cell No. (b) (6), (b) (7)(C)
		8f. Fax No.	8g. E-Mail Address

9. Date of Recognition or Certification Unknown	10. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) March 11, 2019
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11. Is there now a strike or picketing at the Employer's establishment(s) involved? Yes If so, approximately how many employees are participating? 75 (Name of labor organization) UAW, Local 1311 has picketed the Employer since (Month, Day, Year) September 9, 2019
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12. Organizations or individuals other than those named in item 8, which have a contract with the Employer/Petitioner or represent employees of the Employer/Petitioner or demanded 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 and affiliation if any	12b. Address	12c. Tel. No.	12d. Cell No.
		12e. Fax 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.		13a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail	
13b. Election Date(s): April 22, 2020	13c. Election Time(s): 6:30 AM to 7:30 AM; 2:30 PM to 4:00 PM	13d. Election Location(s): Training Center at Employer's Langeloth plant	

14. Representative of the Employer/Petitioner who will accept service of all papers for purposes of the representation proceeding.

14a. Name and Title Jacqueline Rau, Attorney		14b. Address (street and number, city, state, and ZIP code) 191 W Nationwide Blvd, Suite 300, Columbus, OH 43215	
14c. Tel. No. 614-628-6880	14d. Cell No.	14e. Fax No. 614-628-6890	14f. E-Mail Address jacqueline.rau@dinsmore.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) Stanley Ledzinski	Signature 	Title Manager-Regional HR - U.S.	Date 03/31/2020
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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
RM PETITION

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Case No.
06-RM-259442Date Filed
4-22-20

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 a certificate of service showing service on all parties named in the petition of the following: (1) the petition; (2) Statement of Position form; and (3) Description of Procedures in Certification and Decertification Cases (Form NLRB 4812). The petition must also be accompanied by evidence supporting the statement that a labor organization has made a demand for recognition on the employer or that the employer has good faith uncertainty about majority support for an existing representative. However, if the evidence reveals the names and/or number of employees who no longer wish to be represented, the evidence shall not be served on any party.

1. PURPOSE OF THIS PETITION: RM-CERTIFICATION OF REPRESENTATIVE - One or more individuals or labor organizations have presented a claim to the Employer/Petitioner to be recognized as the representative of employees of the Employer/Petitioner or the Employer/Petitioner has a good faith uncertainty about majority support for an existing representative. If a charge under Section 8(b)(7) of the Act has been filed involving the Employer/Petitioner named in this petition, this statement shall not be deemed made. **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/Petitioner: Wellsburg Center LLC d/b/a Valley Haven		2b. Address(es) of Establishment(s) involved (Street and number, City, State, ZIP code): 70 Valley Haven Dr. Wellsburg, WV 26070	
3a. Employer/Petitioner Representative - Name and Title: Karen Stotler, CEO		3b. Address (if same as 2b - state same): Same as 2b	
3c. Tel. No. 304-394-5322	3d. Cell No.	3e. Fax No. 304-394-1242	3f. E-Mail Address kstotler@valleyhavenwv.com
4a. Type of Establishment (Factory, mine, wholesaler, etc.) Skilled Nursing Center		4b. Principal Product or Service Health Care	
5a. Description of Unit Involved: Included: All full time & regular part time employees referenced in Art. 2, Sec. 1 of the CBA. Excluded: All supervisors, aides and other employees referenced in Art. 2, Sec. 1 of the CBA.			5b. City and State where unit is located: Wellsburg, WV
6. Number of Employees in Unit: 35			
Unless a charge alleging a violation of Section 8(b)(7) is pending, check EITHER item 7a or 7b, whichever is applicable <input type="checkbox"/> 7a. A labor organization made a demand for recognition on the Employer/Petitioner on (Date) _____ <input checked="" type="checkbox"/> 7b. The Employer/Petitioner has a good faith uncertainty about majority support for an existing representative.			
8a. Name of Recognized or Certified Bargaining Agent - Name The United Steelworkers Union (USW) on behalf of Local Union 1280-03			8b. Affiliation, if any: AFL-CIO-CLC
8c. Address: Karen Shipley, Staff Representative; 63 Hospitality Lane, Unit 105; Mineral Wells, WV 26150.		8d. Tel. No. 304-489-3961	8e. Cell No. 304-780-9910
		8f. Fax No. 304-489-2717	8g. E-Mail Address kshipley@usw.org
9. Date of Recognition or Certification NLRB Case Nos. 6-RC-9755 and 6-RC-9757			10. Expiration Date of Current or Most Recent Contract, if any (Month, Day, Year) 03/31/2020
11. 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) _____			
12. Organizations or individuals other than those named in item 8, which have a contract with the Employer/Petitioner or represent employees of the Employer/Petitioner or demanded recognition as representatives and other organization 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 and affiliation if any None		12b. Address	12c. Tel. No.
			12d. Cell No.
		12e. Fax 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: There is no bar or any other issue precluding the NLRB from conducting this election.			13a. Election Type: <input checked="" type="checkbox"/> Manual <input type="checkbox"/> Mail <input type="checkbox"/> Mixed Manual/Mail
13b. Election Date(s): May 20, 2020		13c. Election Time(s): 6:00 a.m. - 8:00 a.m.; 2:00 p.m. - 4:00 p.m.	
13d. Election Location(s): Employer's establishment (see 2b)			
14. Representative of the Employer/Petitioner who will accept service of all papers for purposes of the representation proceeding.			
14a. Name and Title: Mark H. Dellinger, Lawyer		14b. Address (street and number, city, State and ZIP code): P.O.Box 553 Charleston, WV 25322	
14c. Tel. No. 304-340-1000	14d. Cell No. 304-951-2163	14e. Fax No. 304-340-1080	14f. E-Mail Address mark.dellinger@jacksonkelly.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) Mark H. Dellinger		Signature 	Title Lawyer
		Date 4/22/2020	

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